



Sagescript Institute, llc
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Longmont, CO 80504
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303-651-2062

Microbiology Testing Services Request

Be sure products are labeled with your name and product name.

Contact Person _____

Date _____

Company Name _____

Address _____

Phone _____ Email _____

Sample(s) (name or type)

- 1.
- 2.
- 3.
- 4.
- 5.
- 6.

Tests Requested:

- ☐ Aerobic Plate Count (enumeration of bacteria)
- ☐ Yeast/Fungal Count (enumeration of yeast and fungi)
- ☐ Both APC & YFC

Preservative used (optional):

Additional information:

Total Number of Tests: _____

Number of Samples	APC	FYC	both
1-2	\$21	\$21	\$35
3-4	\$19	\$20	\$32
5+	\$18	\$19	\$31

Total Cost _____

Method of payment:

