



NASHOBA ANALYTICAL

A DIVISION OF GRANITE STATE ANALYTICAL SERVICES, LLC

31A Willow Road Ayer, Massachusetts 01432
 Phone: 978-391-4428 | website: www.nashobaanalytical.com

PRICE LIST as of 1/1/2023

Bacteria

Total Coliform Bacteria (Present/Absent Result)	\$30.00
Total Coliform Bacteria (MPN-Count)	\$35.00
Heterotrophic Plate Count	\$35.00

Basic Package

Total Coliform Bacteria	Chloride	\$75.00
E.coli Bacteria	Hardness	
Iron	Nitrate	
Manganese	Nitrite	
Sodium	pH	

General Package

Total Coliform Bacteria	Sodium	Hardness	\$115.00
E.coli Bacteria	Alkalinity	Nitrate	
Calcium	Ammonia	Nitrite	
Copper	Chloride	pH	
Iron	Chlorine	Sulfate	
Magnesium	Color	Turbidity	
Manganese	Conductivity	Odor/Sediment	

Comprehensive Package

Total Coliform Bacteria	Potassium	Fluoride	\$165.00
E.coli Bacteria	Sodium	Hardness	
Arsenic (Total)	Alkalinity	Nitrate	
Calcium	Ammonia	Nitrite	
Copper	Color	Odor/Sediment	
Iron	Conductivity	pH	
Lead	Chlorine	Sulfate	
Magnesium	Chloride	Turbidity	
Manganese			

Title V

Total Coliform Bacteria	\$75.00
Ammonia	
Nitrate	
Nitrite	

Stain Package

Calcium	Magnesium	\$65.00
Copper	Manganese	
Hardness	pH	
Iron	Sodium	

Individual Items

Arsenic (Total)	\$30.00	Radon	\$40.00
Arsenic Speciation	\$65.00 (This includes total, +3 +5.)	Volatile Organics	\$135.00
Fluoride	\$25.00	Perchlorate	\$175.00
Lead	\$30.00	Uranium	\$45.00
PFAS (18)	\$400.00	**New Offering: Radon in Air (Single) \$40.00 (double) \$70	

Other prices available upon request. Standard Turn Around Time is 3-5 business days for our regular packages. Sample containers may be obtained from the lab at no charge. Sampling Instructions are on the reverse side.



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Water Sampling Instructions

Samples for microbiological analysis must be collected in disposable pre-sterilized plastic bottles. Chemical analysis will be performed from a clean 500mL glass or plastic container.

****PLEASE FILL ALL THE CONTAINERS THAT YOU ARE GIVEN.****

When the sample is collected, sufficient air space (1/4 inch) should be left in the top of the bottle to facilitate shaking prior to analysis. Keep sample bottles closed until they are to be filled and be careful not to contaminate inside surfaces of containers. Fill containers without rinsing and cap immediately.

1. Remove aeration screen or other attachments from faucet.
2. If tap cleanliness is in doubt it may be cleaned with either an alcohol prep pad or a weak solution of Clorox bleach.
3. Run hot water first (if available) for 2-3 minutes then turn off. Run the cold water for 2-3 minutes.
4. Reduce water flow to permit filling bottle without splashing.
5. Fill sample container(s) with cold water and recap immediately.
6. Deliver samples to the laboratory as soon as possible.

Samples must be received at the laboratory within 24 hours of collection.

Do not take bacteria samples from a hose, they will almost certainly fail. Use a faucet that has been cleaned properly.

Special Instructions for Radon in Water or Volatile Organic Compounds:

If sampling for radon in water or volatile organic compounds, special vials are required. They must be filled so that there are no air bubbles present after capping the vials. Invert the vial after filling and observe for any rising bubbles. If there are bubbles, just add some more water. (Note: Radon in Air has separate instructions included in the kit – please follow those instructions.)

Label bottles with your name, address, date and time sampled.

Please fill in all information and include this sheet with samples. Are you a returning customer? Yes No

MAILING INFORMATION (Please Print)

SAMPLE SITE INFORMATION (Please Print)

Name: _____

Street: _____

Street: _____

Town: _____

Town: _____

State/Zip Code: _____

State/Zip Code: _____

Sample drawn by: _____

Contact Phone #: _____

Sample Site: _____
(i.e. kitchen sink, well head)

Email: _____

Date and Time Sampled: _____

Source: Drinking Water _____ Other _____

Payment is required when sample is received at lab.
We accept Cash, Check or Credit Card.
Results will not be released until payment is received.

Do you have any water treatment devices? _____

Are you having any problems with your water? _____

****Test(s) To Be Performed**:** Must fill this line out for paperwork to be complete:

ALL RESULTS WILL BE EMAILED UNLESS OTHERWISE REQUESTED. Please make sure you include your correct email address above