



# Sample Submission Form

Label samples carefully and indicate tests needed

CCOVI Analytical Services  
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Shaded areas for lab use only

Received by: \_\_\_\_\_  
 Date: \_\_\_\_\_  
 Time: \_\_\_\_\_  
 # containers: \_\_\_\_\_

Company Name: \_\_\_\_\_  
 Address: \_\_\_\_\_  
 Phone: \_\_\_\_\_  
 Contact Name: \_\_\_\_\_  
 E-mail: \_\_\_\_\_

Client Sample Identification	Lab ID#	Sample Type	Brix - refractometer	pH - pH meter	Titratable Acidity	Volatile Acidity - Acetic Acid enzyme kit	Juice Panel - Brix, pH, TA, & VA	Wine/Cider Panel - pH, TA, & VA	Malic acid - enzyme kit	Residual sugar - glucose+fructose or sucrose kit	Yeast Assimilable Nitrogen - enzyme kit duo	Free SO <sub>2</sub>	Total SO <sub>2</sub>	Alcohol - GC-FID	Protein/Heat Stability - 80°C for 30 minutes	Cold Stability - 72 hour refrigeration	FOSS	Methoxypyrazines - GC-MS*	Brettanomyces - GC-MS*	Other (Copper, Microbial Analysis, etc.) (please contact lab)

Submitted by: _____	Date/Time: _____	Priority: _____	Routine: 7-10 days	Special Instructions: _____
Include standard deviation, coefficient of variation and # of replicates. A 5% surcharge will be applied.			5 days	
			Rush! 48 hours	
			Rush!! 24 hours	

\*There is no rush service for analysis involving GC-MS.