



Sample Submission Form

Label samples carefully and indicate tests needed

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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 ₂	Total SO ₂	Alcohol - GC-FID	Protein/Heat Stability - 80°C for 30 minutes	Cold Stability - 72 hour refrigeration	FOSS	Methoxyypyrazines - GC-MS*	Brettanomyces - GC-MS*	Other (Copper, Microbial Analysis, etc.) (please contact lab)

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

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