



PORTAGE COUNTY HEALTH DEPARTMENT
705 Oakwood St., Suite 208
Ravenna, OH 44266
Phone: 330-296-9919/Fax: 330-297-3597
Email: pchd@portageco.com

FRACKING WATER SAMPLING REQUEST

Tier 1 _____ Tier 2 _____ Tier 3 _____ Fee: \$ _____

Tier 1 = \$120.00	Tier 2 (Includes Tier 1) = \$179.00	Tier 3 (Includes Tier 1 & Tier 2) = \$294.00
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Address _____ Township _____

Owner _____ Owner's Phone _____

Cell Phone _____

Email: _____ Owner's Fax No. _____

Sample Requested by _____

Date Requested _____

Owner's Present **Complete** Mailing:

 (Required)

Is your water treated? Yes _____ No _____

Available Outside Spigot? Yes _____ No _____

If yes, is there an outside spigot that does not go through treatment (unsoftened)? Yes ____ No ____

If outside spigot is treated, can the softener be bypassed? Yes ____ No ____

Location of outside spigot _____

Additional information or comments _____

Revised 9/19/13 Date paid _____ Receipt # _____