



SUBMISSION FORM - CHEMICAL ANALYSIS

Office Use:

Date Received: _____

Beekeepers ID: _____

Submission # : _____

Report Date: _____

ID	Lab Use Only	Colony ID	Apiary ID	Sample Date	Sample type															
						H - Honey	P - Pollen	B - Bee	PR - Propolis	W - Water	Honey Quality Package	Fumagillin	Tetracycline	Tylosin	Glyphosate	Quinlorac	Hydroxymethylfurfural	Synthetic Acaricides		
1																				
2																				
3																				
4																				
5																				
6																				
7																				
8																				
9																				
10																				

Contact Information (Please print clearly)

Name _____

Business _____

Address _____

City/Prov/PC _____

Phone _____

Email _____

Signature _____

Date _____

Office: When sending samples, please send an email and tracking number to nbdc@nwpolytech.ca