Test request - Food sample EBL-0056
Version 5.

Company/payer: _____ **Address:** _____

Site: _____ **Social security no:** _____

Contact: _____ **Telephone:** _____

Sampled by: _____ **Date:** _____

Send results to email address: _____

Sample no.	Sampling date	Sample labeling as requested in the report:
1		
2		
3		
4		
5		
6		

Microbiological analyses

Sample no.	1	2	3	4	5	6
Total plate count 22°C						
Total plate count 30°C						
Total plate count 35°C						
Psychrotrophic microorganism 7°C						
Coliforms						
Thermotolerant coliforms						
Escherichia coli (E. coli)						
Staphylococci						
Enterobacteriaceae						
Clostridium perfringens						
Sulfite reducing clostridia						
Sulfite reducing clostidia - spore						
Sulfite reducing bacteria						
Bacillus cereus						
Yeast						
Mould						
Candida Albicans						
Lactic acid bacteria						
Enterococci						
Pseudomonas spp.						
Salmonella						
Listeria spp. (Not type analysis)						
Listeria enumeration						
Listeria - type analysis						
Listeria monocytogenes						
Campylobacter spp.						
Vibrio spp.						
Vibrio Parahemolyticus						

Trichinella

Sýni nr.	1	2	3	4	5	6
Trichinella						

Chemical analysis

Sample no.	1	2	3	4	5	6
Protein						
Fat						
Dry matter						
Water						
Ash content						
Salt						
pH						
Nutritional value						
Water activity (Aw)						
TVB-N						

Sensory evaluation

Sýni nr.	1	2	3	4	5	6
Texture						
Apperance						
Smell						

Other:

Sýni nr.	1	2	3	4	5	6

Regarding report:

☐ Icelandic ☐ English

☐ One report ☐ Report for each sample

Further information on the accreditation of methods, uncertainty, decision rule, confidentiality and impartiality can be found at www.syni.is

Signature on behalf of the client

Sýni ehf. - Víkurhvarfi 3 - 203 Kópavogi - s. 512 3380 - www.syni.is - profanir@syni.is
Sýni ehf. - Furuvöllum 1 - 600 Akureyri - s. 464 3810 - www.syni.is - akureyri@syni.is