



**National
Bee Diagnostic
Centre**
NORTHWESTERN POLYTECHNIC

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SUBMISSION FORM - CHEMICAL ANALYSIS

Office Use:

Date Received: _____

Beekeeper ID: _____

Submission #: _____

Report Date: _____

					H-Honey P-Pollen B-Bee PR-Propolis W-Water		Honey Quality Package	Fumagillin	Tetracycline	Tylosin	Glyphosate	Quinclorac	Hydroxymethylfurfural	Synthetic Acaricides	
ID	Lab Use Only	Colony ID	Apiary ID	Sample Date	Sample Type										
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 _____

When submitting samples, please send an email and tracking number to **NBDC@NWPolytech.ca**