

# WATER SAMPLE SUBMISSION FORM

<b>SUBMITTER</b>	Company: _____	<b>INVOICE</b>	Company: _____
	Public Water System ID #: _____		Name: _____
	Name: _____		Address: _____
	Address: _____		City, State, Zip: _____
	City, State, Zip: _____		Telephone No.: _____
	Telephone No.: _____		Fax No.: _____
Fax No.: _____ Fax Results: <input type="checkbox"/> YES <input type="checkbox"/> NO			

<b>SAMPLING DATA</b>	County: _____	Water Fluoridation Program Plant Result (ppm): _____
	Sampling Point Description: _____	Lead/Copper (First Draw) Water Last Used Date: _____
		Time: _____
	Date Collected: _____ Time: _____	Comment: _____
	Collected by: _____	

<b>PURPOSE</b>	<input type="checkbox"/> Fluoridation Program	<input type="checkbox"/> Customer Request	<b>BOTTLE NUMBER(S)</b>
	<input type="checkbox"/> Regulatory Compliance	<input type="checkbox"/> District Engineer Request	
	<input type="checkbox"/> Lead Assessment	District: _____	

### INORGANIC PARAMETERS REQUESTED FOR TESTING (preservative)

- Alkalinity (Ice)
  - Anions Package: Fluoride, Chloride, Nitrate, Nitrite, Ortho-phosphate and Sulfate.
  - Combined Nitrate + Nitrite (H<sub>2</sub>SO<sub>4</sub>)
  - Conductivity (Ice)
  - Cyanide, Free (Ice, NaOH, C<sub>6</sub>H<sub>8</sub>O<sub>6</sub>)
  - Basic Drilling Package:  Wet Chemistry Package, Anions Package, Metals, and Total Organic Carbon  Basic Drilling Package + Regulated Volatile Organic Compounds
  - Fluoride
  - Mercury
  - Metals Lead / Copper – First Draw
  - Metals Regulatory Package: Antimony, Arsenic, Barium, Beryllium, Cadmium, Chromium, Mercury, Nickel, Thallium, Selenium and Sodium.
  - Metals Secondary Package: Aluminum, Iron, Magnesium, Manganese, Silver and Zinc.
  - Nitrite (Ice)
  - Nitrate (Ice)
  - Private Wells: Total Coliform Bacteria, Combined Nitrate + Nitrate, Wet Chemistry Package and Metals Regulatory Package.
  - Turbidity (Ice)
  - Wet Chemistry Package: Alkalinity, Calcium, Calcium Hardness, pH, Total Dissolved Solids and Total Hardness. (Ice)
- Other, please list: \_\_\_\_\_

### ORGANIC PARAMETERS REQUESTED FOR TESTING (preservative)

- EPA 504 Package: (EDB) 1,2-Dibromoethane & (EDPC) 1,2-Dibromo-3-Chloropropane (Ice, Na<sub>2</sub>S<sub>2</sub>O<sub>3</sub>)
- Carbamate Pesticides: Aldicarb, Aldicarb sulfone, Aldicarb Sulfoxide, Carbofuran, Oxamyl (Ice, Na<sub>2</sub>S<sub>2</sub>O<sub>3</sub>, C<sub>6</sub>H<sub>7</sub>KO<sub>7</sub>)
- Glyphosate (Ice, Na<sub>2</sub>S<sub>2</sub>O<sub>3</sub>)
- (HAA5s) Haloacetic Acids (Ice, NH<sub>4</sub>Cl)
- (SUVA) Specific Ultraviolet Absorption (Ice)
- (THM) Trihalomethanes (Ice, Na<sub>2</sub>S<sub>2</sub>O<sub>3</sub>)
- (TOC) Total Organic Carbon (Ice, H<sub>3</sub>PO<sub>4</sub>)
- (VOCs) Volatile Organic Compounds Regulated (Ice, HCl, Na<sub>2</sub>S<sub>2</sub>O<sub>3</sub>)

Other, please list: \_\_\_\_\_

<div style="border: 1px solid black; width: 100%; height: 40px; margin: 0 auto; display: flex; align-items: center; justify-content: center;"> <span style="font-size: 0.8em; color: gray;">Place Barcode Here</span> </div>	<b>LABORATORY USE ONLY</b>		
	RECEIVED BY: _____	METHOD OF SHIPPING:	TEMPERATURE WHEN RECEIVED:
DATE/TIME: _____	<input type="checkbox"/> MAILED	COLLECTED WITHIN 24HRS	
CHAIN-OF-CUSTODY: <input type="checkbox"/> YES <input type="checkbox"/> NO	<input type="checkbox"/> HAND DELIVERED	<input type="checkbox"/> YES <input type="checkbox"/> NO	