CHEMICAL – DISINFECTION BYPRODUCTS (THM/HAA5) SAMPLE SUBMISSION REPORT (SSR)

Division of Drinking and Ground Waters

Central Office
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PUBLIC WATER SYSTEM INFORMATION:

PWS ID: OH __ __ __ __ __ __ __
PWS Name:_____
STU ID:_____
STU Name:_____
Address:_____
City, State, Zip:_____
County:_____

LABORATORY INFORMATION:

Reporting Lab Name:_____
Reporting Lab Certification No.:_____
Lab Sample Number:_____

Comments

SAMPLE INFORMATION:

Sample Monitoring Point_____
Sample Type:
☐ -- Routine (compliance)
☐ -- Special (non-compliance)

Sample Collection Date:_____
mm/dd/yyyy
Sample Collection Time:_____
hh:mm am/pm
Street Address or Tap Location:_____
_____
_____
Lead/Copper Location Type_____
(At Source, Flushed, First Draw, Lead Service Line)

Data Quality Results:
Analysis: ☐ -- Accepted
☐ -- Rejected

☐ --Invalid Sampling Point
☐ --Broken
☐ --Chlorine Present
☐ --Exceeds Holding Time
☐ --Frozen Sample
☐ --Excessive Head Space
☐ --Insufficient Sample Information
☐ --Invalid Sampling Protocol
☐ --Lab Accident
☐ --Leaked in Transit
☐ --Insufficient Volume

Sample Results:

Analyte	Analyte Code	Method Code	Results Sign	Results Value	Results Units	Analytical Lab ID#	Analyst #	Analysis Date	QC Date
BROMODICHLOROMETHANE	2943								
BROMOFORM	2942								
CHLOROFORM	2941								
DIBROMOCHLOROMETHANE	2944								
TRIHALOMETHANES, total	2950								
DIBROMOACETIC ACID	2454								
DICHLOROACETIC ACID	2451								
MONOBROMOACETIC ACID	2453								
MONOCHLOROACETIC ACID	2450								
TRICHLOROACETIC ACID	2452								
HALOACETIC ACIDS (HAA5)	2456								

Analyte	Analyte Code	Method Code	Results Sign	Results Value	Results Units	Analytical Lab ID#	Analyst #	Analysis Date	QC Date
BROMATE	1011								
CHLORAL HYDRATE	2952								
CHLORAMINE RESIDUAL	1006								
CHLORATE	1007								
CHLORINE, TOTAL	0999								
CHLORIDE, TOTAL	1017								
CHLORINE DIOXIDE									
CHLORINE DIOXIDE RESIDUAL	1008								
CHLORITE	1009								
ORGANIC CARBON, total	2920								