Space for Lab Letter Head

**Lead and Copper**

*Distribution System—Analyses Report*

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| **Lead and Copper Analyses (LCR)** | System Group Type: (circle one) A B Other: |
| Water System ID Number: \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ \_\_\_ | System Name: |
| Source: S93 (standing distribution samples) | County: |
|  | Consecutive System? (circle one) YES NO |
| Sample Purpose *(check appropriate box)*  ⃣ RC—Routine/Compliance *(Satisfies monitoring requirements.)*  ⃣ I—Investigative *(Does not satisfy monitoring requirements.)*  ⃣ O—Other *(Specify—does not satisfy monitoring requirements.)* | Date Received: (MM/DD/YY) \_\_\_ \_\_\_/\_\_\_ \_\_\_/\_\_\_ \_\_\_  Date Analyzed: (MM/DD/YY) \_\_\_ \_\_\_/\_\_\_ \_\_\_/\_\_\_ \_\_\_  Date Reported: (MM/DD/YY) \_\_\_ \_\_\_/\_\_\_ \_\_\_/\_\_\_ \_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  COMMENTS: |
| Sample Composition *(Check appropriate box.)*  ⃣ S—Single Source  ⃣ B—Blended *(List source numbers in “Source Numbers” field.)*  ⃣ C—Composite *(List source numbers in “Source Numbers” field.)*  ⃣ D—Distribution Sample | Sample Type *(Check one.)* ⃣ Pre-treatment/Untreated (Raw)  ⃣ Post-treatment (Finished)  ⃣ Unknown or Other  Sample Collected by: *(name)* \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  Phone Number: \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |
| Send Report to:  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ | Bill to: (client name)  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_  \_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_\_ |

**Analytical Results**

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| **(DOH #) Analyte** | **(0009) Lead** | **(0023) Copper** |
| **State Detection Reporting Level (SDRL)** | **0.001 mg/L** | **0.02 mg/L** |
| **Action Level** | **0.015 mg/L** | **1.3 mg/L** |
| **Analytical Method / Analyst’s Initials** | **\_\_\_\_\_\_\_\_\_\_\_/\_\_\_** | **\_\_\_\_\_\_\_\_\_\_/\_\_\_** |

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| **Lab Number/Sample Number**  **\_\_ \_\_ \_\_/\_\_ \_\_ \_\_ \_\_ \_\_** | **Date Collected** | **Sample Location** | **Lead**  **(mg/L)** | **Copper**  **(mg/L)** |
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**NOTES**:

**mg/L:** milligrams per liter or parts per million.

**Action Level:** The concentration against which the 90th percentile of all distribution samples collected during the monitoring period that, if exceeded, signals the system must take actions to address the corrosivity of the water. Highlight the result if it is greater than or equal to the Action Level.

**SDRL (State Detection Reporting Level):** The minimum reporting level established by the department**.**

**LAB COMMENTS AND DATA QUALIFERS**—Note data qualifiers next to the individual result. Note the definition of the qualifier here.