

DRINKING WATER BACTERIOLOGICAL LABORATORY REPORT

Volusia County Environmental Health Laboratory

1250 Indian Lake Road, Daytona Beach, FL 32124

NELAP# E23111

Contact: Jack Towle

Contact Phone: 386-248-1781 FAX: 386-248-1785



Analysis Date & Time: \_\_\_\_\_ By: \_\_\_\_\_

Sample Acceptance Criteria:

Sample Preservation \_\_\_ On Ice \_\_\_ Not on Ice \_\_\_ °C

Disinfectant Check \_\_\_ Not Detected \_\_\_ mg/L

This sample does not meet the following NELAC requirements:

Analysis Requested: (please check all that apply)

- MF (SM9222B)
MMO-MUG (SM9223B)
Other: \_\_\_\_\_

System Name: \_\_\_\_\_

PWS I.D. [ ] [ ] [ ] [ ] [ ] [ ] [ ] [ ]

System Address: \_\_\_\_\_ City: \_\_\_\_\_

System or Owner's Phone #: \_\_\_\_\_ Fax #: \_\_\_\_\_

Collector: \_\_\_\_\_ Collector's Phone #: \_\_\_\_\_

Sample Collection Date: \_\_\_\_\_

Type of Supply: (check only one)

- Community Water System, Non-Transient Non-community Water System, Transient Non-community Water System, Limited Use System, Bottled Water, Private Well, Swimming Pool, Other

Reason for Sampling: (check only one) Routine Compliance, Repeat, Replacement, Main Clearance, Well Survey, Other

Relinquished By: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Received @ Lab By: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Remarks: \_\_\_\_\_

Table with 6 columns: Coll. Number, Sample Point (Location or Specific Address), Collection Time, Sample Type, Disinfect Res'd (mg/L), pH. Includes sub-tables for 'To be completed by collector of sample' and 'To be completed by lab' with analysis methods and sample numbers.

Average of disinfectant residuals for routine and repeat samples. (Complete for community and non-transient non-community systems serving populations up to and including 4,900. Do not include raw or plant samples in the average.)

Defined in Florida Administrative Code Rule 62-160, Table 1. All tests are performed in accordance with NELAC standards.

Disinfectant Residual Analysis Method: [ ] DPD Colorimetric
Other: \_\_\_\_\_
Person performing analysis is: [ ] A certified operator (# \_\_\_\_\_) [ ] Employed by a certified lab
[ ] Supervised by a cert. operator (# \_\_\_\_\_) [ ] Employed by DEP or DOH

Date PWS notified by lab of positive results: \_\_\_\_\_
Date State notified by lab of positive results: \_\_\_\_\_

Name and Mailing Address of Person/Firm to Receive Results:

Empty box for Name and Mailing Address of Person/Firm to Receive Results.

Lab Signature: \_\_\_\_\_

Title: \_\_\_\_\_

Checkboxes for Satisfactory, Incomplete Collection Information, Repeat Samples Required, Replacement Samples Required. Includes Date Reviewed by DEP/DOH and DEP/DOH Reviewing Official.

1DEP Sample Type Codes: D= Distribution (Routine Compliance); C= Repeat or Check; R= Raw; N=Entry to distribution; P=Plant Tap; S= Special (Clearance, etc.)

Analysis Methods: MF = SM9222B &D; MMO/MUG = SM9223B

Results: A = coliforms are absent; P = coliforms are present; C = confluent growth; TNTC = too numerous to count

# INSTRUCTIONS

## A. COMPLETION OF FORM:

1. **Public Water Supplies\***: fill in all spaces indicated on reverse side of form.
2. **Private Wells, Swimming Pools and Bottled Water**: Fill in all spaces except System ID No. and DEP District.

## B. COLLECTION OF WATER SAMPLES:

1. Sample bags are sterile and contain chlorine neutralizer. **DO NOT RINSE OR TOUCH INSIDE SURFACES.**
2. Do not take samples from taps with aerators, strainers, hose attachments, water purifiers or other devices.
3. Disinfect tap with a hypochlorite solution (1 part household bleach: 9 parts water), then flush line by running water for three (3) to five (5) minutes, or until the service line is clear before sampling. Carefully avoid contaminating sample with hypochlorite which would invalidate results. Flaming of faucet is not recommended.
4. Fill sample bags leaving one (1) inch air space at top of bag. Whirl bags three (3) times and twist-tie tape wire ends.
5. Identify each sample bag by numbering to correspond with number on form.
6. Deliver samples to laboratory on the day of collection.
7. When samples have been sent by Mail, United Parcel Service, bus, etc., samples should be refrigerated and received in the laboratory within thirty (30) hours after collection.\*

\* Note: Florida Safe Drinking Water Act requires holding/transit time between sampling and analyses shall not exceed thirty (30) hours; over forty-eight (48) hours -- sample unsatisfactory; between thirty (30) and forty-eight (48) hours -- unreliable results.