

SUMMIT COUNTY PUBLIC HEALTH

1867 West Market Street Akron, OH 44313 (330) 926-5600

EPA certification # 598

Chemical Report for Private Water System Samples

PAYMENT INFORMATION:
 On accompanying application
or
 Credit Card Date Paid: ___/___/___
 Cash
 Check # _____

SERVICE REQUESTED (CHOOSE ONE):

SYSTEM TYPE (CHOOSE ONE):

Collection & Lab Analysis

- PWS Permit
- POS Evaluation
- Re-Sample Requested

Lab Analysis Only

- Contractor \$20.00
- Commercial \$20.00

- Well
- Hauled Water Tank
- Cistern
- Other:

PROPERTY INFORMATION:

Property Owner	Parcel ID	Location of Sample Tap
Property Address	Phone Number	Date of Collection
City	Zip Code	Time of Collection

CONTACT PERSON TO RECEIVE RESULTS: Preferred method of contact: Mail Email Fax

Name	Phone Number	Address/ Email / Fax
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SAMPLE COLLECTED BY:

Name	Phone Number	Company/Agency Name
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Continuous Disinfection: Yes No
Chlorine Residual: _____ **Testing Requested:** Lead Copper Arsenic

****LABORATORY USE ONLY****

Test Performed: EPA 200.9, Atomic Absorption Spectroscopy Lead Copper Arsenic

Laboratory Results: Lead _____ $\mu\text{g/L}$ Maximum Contaminant Level (MCL) 15 $\mu\text{g/L}$ <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable	Sample Information: Sample Number: _____ Date/ Time Received: _____ Date of Analysis: _____ Date/ Time Reported: _____
Copper _____ $\mu\text{g/L}$ Maximum Contaminant Level (MCL) 1300 $\mu\text{g/L}$ <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable	OEPA Certified Analyst <input type="checkbox"/> 5188 (TS) <input type="checkbox"/> 5717 (BO) <input type="checkbox"/> 5186 (TC) <input type="checkbox"/> 6220 (RB)
Arsenic _____ $\mu\text{g/L}$ Maximum Contaminant Level (MCL) 10 $\mu\text{g/L}$ <input type="checkbox"/> Acceptable <input type="checkbox"/> Unacceptable	Comments: