

PUBLIC WATER SUPPLY REGIONAL OFFICE REQUEST

Complete All Items – Please Print Clearly

Read Instructions on Reverse Side Prior to Sample Collection

*-Indicates Required Fields

Water System I.D. Number - -

*Name of System: _____

Type of System: Community
 Non-Community

Sampling Address: _____
_____ Zip _____

Source of Water: Ground Both
 Surface Purchased

*Report To: _____

Type of Sample: Raw Treated

Address: _____
_____ Zip _____

Type of Treatment: _____

EIN # _____

Sampling Point: _____ *Date Collected: _____ *Time Collected: _____

Collected By: _____

Place a check in the box to request analyses for all parameters in the group or select individual parameters by circling the parameter(s) desired.

Regular Parameters

- pH
- Alkalinity
- Fluoride
- Chloride
- Calcium
- Total Hardness
- Manganese (Total)
- Lead
- Arsenic
- Copper
- Iron (Total)
- Magnesium
- Zinc

Additional Metals Group

- Cadmium
- Chromium
- Mercury
- Selenium
- Silver
- Barium
- Antimony
- Beryllium
- Thallium

Additional Water Parameters

- Acidity
- Color
- Sodium
- Sulfate
- Turbidity
- Total Dissolved Solids

Optional Parameters: List Optional Parameters Below

Total & Soluble Fe & Mn

- Iron
- Manganese

Comments: _____

Laboratory Use Only

Received By: _____ Mail Courier Walk In

PURPOSE: Provide instructions for collecting and submitting a public water supply sample for Inorganic Chemical Analysis to the State Laboratory of Public Health.

DIRECTIONS FOR COMPLETION OF DHHS FORM 2887

Using a ball point pen, fill in all requested information on the top portion of the form. **PLEASE PRINT CLEARLY.**

1. All fields marked with an asterisk (*) are **Required Fields** which must be completed. Incomplete forms may result in REJECTION of the sample.
2. Name of System: The name of the public water supply.
3. Water System I.D. Number: Public water supply identification number.
4. Sampling Address: Address where the sample is collected.
5. Report To/Address: Regional Office and Address of Regional Office
6. EIN#: The federal tax ID number of the agency. The lab uses this number to log the samples into the laboratory information management system.
7. Sampling Point: The location where the sample was collected such as the kitchen tap, well head, or outside spigot.
8. Date Collected and Time Collected: The date and time the sample is collected.
9. Collected By: Person that collects the sample.
10. Type of Treatment: List any types of treatment to water.

DIRECTIONS FOR SAMPLE COLLECTION AND SHIPMENT

The kit contains a cardboard mailer, a one-quart plastic (1 liter) container, a submittal form and a mailing label.

1. Remove the one-quart plastic container; remove cap from container and inflate container by mouth, if uninflated.
2. Turn on the tap and allow the water to run for five minutes to ensure the water is from the distribution system unless collecting a "first draw" sample.
3. Rinse the container two or three times, and discard the water. Do **NOT** rinse container if collecting a "first draw" sample.
4. Fill the container to within approximately one inch of the top and securely cap the container.
5. Place the container along with the completed form in the cardboard mailer.
6. Seal the box and ship immediately to the State Laboratory using the supplied mailing label.

NOTE: Nitrate and Nitrite samples require a separate sampling kit; therefore nitrate and nitrite analyses can not be requested under "Optional Parameters."