

## Explanation of the Health Effects of Lead and Copper

Lead causes serious health problems if too much enters your body from drinking water and other sources. Drinking water is just one way we consume lead. EPA estimates that less than 20% of lead exposure for the overall population is from drinking water. Infants who consume mostly mixed formula can receive 40 to 60 percent of their exposure to lead from drinking water. Other major sources include lead paint dust, soil and food, food and beverage containers, leaded gasoline and occupational exposure.

Too much lead can cause damage to the brain and kidneys, and it interferes with the production of red blood cells that carry oxygen to all parts of your body. The greatest risk of lead exposure is to infants, young children, and pregnant women. Scientists have linked the effects of lead on the brain with lowered IQ in children. Adults with kidney problems and high blood pressure can be affected by lower levels of lead more than healthy adults. Lead is stored in the bones, so it can be released later in life. During pregnancy, the child receives lead from the mother's bones, which may affect brain development.

Some people who drink water containing copper in excess of the action level may, with short term exposure, experience nausea, cramps, diarrhea and/or vomiting with the more severe effects associated with higher levels of copper; and with long-term exposure may experience liver or kidney damage. People with Wilson's Disease should consult their personal doctor if the amount of copper in their water exceeds the action level.

### How to reduce or eliminate your exposure to lead and copper in drinking water:

Lead and copper originate in plumbing materials and are released from pipes, valves and faucets by corrosion or friction. Wisconsin banned the use of lead solder in 1984. Prior to then lead was widely used in pipe solder, packing, valves, meters and as solid pipe. Brass is an alloy containing up to 15% lead, and most valves and faucets have brass bodies. Copper pipes installed prior to 1985 may have lead solder joints. Water quality affects how readily plumbing corrodes. Hard water deposits a protective scale in pipes which prevents metals from corrosion. Softened or highly treated water is more aggressive and tends to dissolve pipes and other plumbing materials. The following actions will help reduce your exposure to lead and copper in drinking water:

- Run the water until it turns cold before drinking. It is a good idea to flush the water lines before drinking any time the water has been motionless in the distribution system for 6 hours or more.
- *Use cold water for cooking and preparing baby formula.* Do not cook with or drink water from the hot water tap; lead dissolves more easily in hot water.
- *Do not boil water to remove lead.* Boiling water will not reduce lead levels.
- *Look for alternative sources or treatment of water.* If your lead result is above 15 ppb, you may want to consider purchasing bottled water or a water filter. Read the package to be sure the filter is approved to reduce lead or contact NSF International at 800-NSF-8010, or [www.nsf.org](http://www.nsf.org) for information on performance standards for water filters.
- *Identify if your plumbing fixtures contain lead.* New faucets, fittings, and valves, may contain up to 8 percent lead including those advertised or labeled as "lead-free" and may contribute lead to drinking water. Consumers should be aware of this when choosing fixtures and take appropriate precautions.

Lead and copper compliance samples represent worst-case-scenarios. You might consider taking additional water samples *after flushing*. Most labs charge about \$25 for a metals analysis. Take 1 sample after flushing a minute or so; and another in the middle of a day or evening, to test a random sample during periods of regular water use.

For more information call Andy Stelsel 920-324-3400 or visit the WDNR website to view or print a brochure about lead at <http://dnr.wi.gov/topic/drinkingwater/documents/forms/lead.pdf> and about copper at <http://dnr.wi.gov/topic/drinkingwater/documents/forms/copperdg027.pdf>



## Consumer Notice of Lead and Copper Results in Drinking Water (OTM/NN)

Public Water Systems are required to test water for lead and copper from drinking water taps within their distribution systems *AND* to notify consumers of lead and copper test results. Listed below are test results of samples collected this year.

Public Water Supply Name:	Squires Grove		
PWSID:	26802017	County:	68 - Waukesha

Thank you for participating in our drinking water lead and copper monitoring program. The results of the lead and copper sample collected at your location are in the table below.

Address / Location of Sample	Sample Date	Lead µg/l (ppb)	Copper µg/l (ppb)
15275 Red Fox Ln., Kitchen Sink	09/10/18	ND	68
1500 Red Fox Ln., Kitchen Sink	09/10/18	2.7	86
1195 Terrace Dr., Kitchen Sink	09/12/18	1.7	110
1140 Pilgrim Parkway, Kitchen Sink	09/10/18	0.37	46
1122 Pilgrim Parkway, Bathroom Sink	9/7/18	16	110

Contaminant	Action Level (parts per billion or ppb)	Maximum Contaminant Level Goal (ppb)
Lead	15	0
Copper	1300	1300

### Definition of terms:

- **µg/l:** micrograms per liter. This is equivalent to one part-per-billion or *ppb*.
- **Action Level:** The concentration of lead or copper which, if exceeded in greater than ten percent of the total number of samples collected by a public water system, triggers one or more of the actions specified above. The lead action level is not health-based. It was established based on the feasible lead level that public water systems could meet.
- **Maximum Contaminant Level Goal:** The level of lead or copper in drinking water below which there is no known or expected risk to health. The MCLG for lead is 0 (zero) ppb, based on information from EPA and CDC that there is no identifiable level of lead that is without risk, and the MCLG for copper is 1300 ppb which is the same as the copper action level and water at or below this level is considered safe.

**CERTIFICATION OF CONSUMER NOTIFICATION OF LEAD/COPPER RESULTS FORM**

**WISCONSIN DEPARTMENT OF NATURAL RESOURCES**

Return this form to your District DNR Office

**1. PWS Information**

Squires Grove

PWS Name

Elm Grove

26802017

City/Town

PWS ID

The public water system (PWS) named above hereby certifies that individual lead and copper tap results have been provided to the persons served by the public water system at the specific sampling site from which the sample was collected in compliance with ch. NR 809.547(4)(a).

COMPLIANCE MONITORING PERIOD:	<u>06/01/18</u>	TO	<u>09/30/18</u>
	Start Date		End Date
NUMBER OF SITES SAMPLED: <u>5</u>	DATE PWS RECEIVED RESULTS FROM LAB:		<u>09/27/18</u>
			Date

**2. Consumer Delivery Methods – Based on Type of Public Water System**

For Community Water Systems (choose a. or b.)

- a. My system notified consumers by U.S. Mail. \_\_\_\_\_  
Date Completed
- b. My system notified consumers by hand/direct delivery. \_\_\_\_\_  
Date Completed

For Non-Transient Non-Community Water Systems (choose a. or b.)

- a. My system posted within the facility in which the samples were collected and the results will remain posted until the next lead and copper results are reported. \_\_\_\_\_  
Date Completed
- b. My system notified consumers by hand/direct delivery. \_\_\_\_\_  
Date Completed

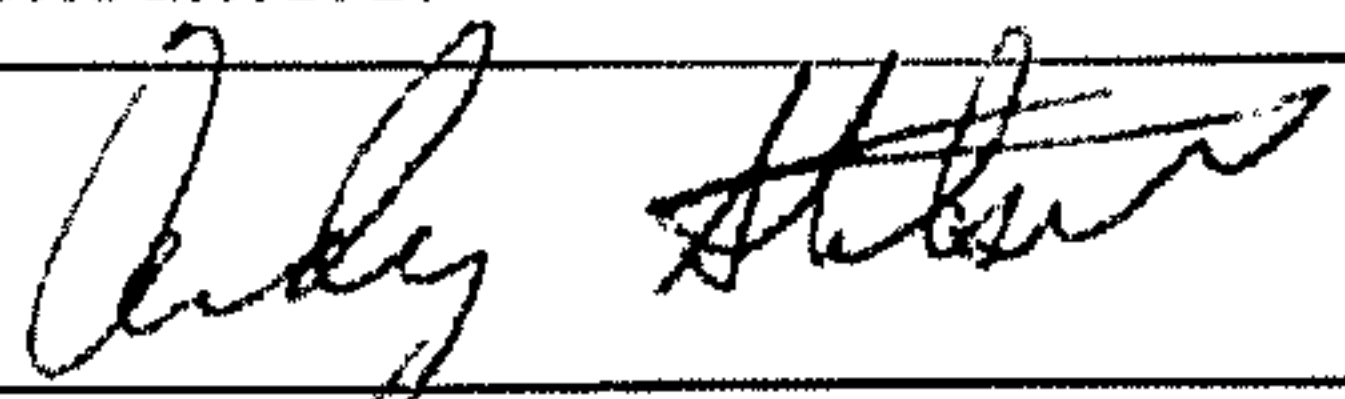
**3. Consumer Delivery Requirements**

The water system named above certifies that all of the following information was provided as part of the Lead and Copper Rule monitoring and compliance requirements within **30-days of receiving the test results** from the laboratory:

- Individual lead tap results from lead and copper tap water monitoring.
- An explanation of the health effects of lead with steps that consumers can take to reduce exposure to lead in drinking water.
- Contact information for your water system.
- The action level for lead and the maximum contaminant level goal, and the definitions of these two terms from s. NR 809.833 (2).

**4. PWS Certification Requirements**

- Sent a copy of this completed Certification Form to the address, email, or fax above within 90-days following the end of the monitoring period specified in 1. above. (per NR 809.55(6)(c))
- Attached to this Certification Form an example of one completed Consumer Notification of Lead and Copper Results Form as presented to consumers.

Certified by:  09/28/18

Andy Stelsel, Certified Operator

(Name, Title) (Date)

(920) 324-3400

astelsel@municipalwellandpump.com

(Phone) (E-mail address)



# ANALYTICAL REPORT

NORTHERN LAKE SERVICE, INC.  
 Analytical Laboratory and Environmental Services  
 400 North Lake Avenue - Crandon, WI 54520  
 Ph: (715)-478-2777 Fax: (715)-478-3060

WDNR Laboratory ID No. 721026460  
 WDATCP Laboratory Certification No. 105-330  
 EPA Laboratory ID No. WI00034  
 Printed: 09/26/18 Page 1 of 1

Client: Municipal Well & Pump Inc  
 Attn: Gretchen Schaver  
 1212 Storbeck Drive  
 Waupun, WI 53963

NLS Project: 308119  
 NLS Customer: 22200  
 Fax: 920 324 3431 Phone: 800 383 7412

Project: Squires Grove PWS#26802017

**D6 NLS ID: 1080831**

Matrix: DW

Collected: 09/10/18 06:49 Received: 09/18/18

Parameter

Result	Units	Dilution	LOD	LOQ/MCL	Analyzed	Method	Lab
68	ug/L	1	1.0*	2.0 / 1300*	09/20/18	EPA 200.8, Rev 5.4	721026460
ND	ug/L	1	0.10*	0.20 / 15*	09/20/18	EPA 200.8, Rev 5.4	721026460
ND	NTU	1	1.0*	1.0*	09/19/18	EPA 180.1	721026460

**D7 NLS ID: 1080832**

Matrix: DW

Collected: 09/10/18 06:15 Received: 09/18/18

Parameter

Result	Units	Dilution	LOD	LOQ/MCL	Analyzed	Method	Lab
86	ug/L	1	1.0*	2.0 / 1300*	09/20/18	EPA 200.8, Rev 5.4	721026460
2.7	ug/L	1	0.10*	0.20 / 15*	09/20/18	EPA 200.8, Rev 5.4	721026460
ND	NTU	1	1.0*	1.0*	09/19/18	EPA 180.1	721026460

**D8 NLS ID: 1080833**

Matrix: DW

Collected: 09/12/18 05:00 Received: 09/18/18

Parameter

Result	Units	Dilution	LOD	LOQ/MCL	Analyzed	Method	Lab
110	ug/L	1	1.0*	2.0 / 1300*	09/20/18	EPA 200.8, Rev 5.4	721026460
1.7	ug/L	1	0.10*	0.20 / 15*	09/20/18	EPA 200.8, Rev 5.4	721026460
ND	NTU	1	1.0*	1.0*	09/19/18	EPA 180.1	721026460

**D9 NLS ID: 1080834**

Matrix: DW

Collected: 09/10/18 07:15 Received: 09/18/18

Parameter

Result	Units	Dilution	LOD	LOQ/MCL	Analyzed	Method	Lab
46	ug/L	1	1.0*	2.0 / 1300*	09/20/18	EPA 200.8, Rev 5.4	721026460
0.37	ug/L	1	0.10*	0.20 / 15*	09/20/18	EPA 200.8, Rev 5.4	721026460
ND	NTU	1	1.0*	1.0*	09/19/18	EPA 180.1	721026460

**D10 NLS ID: 1080835**

Matrix: DW

Collected: 09/07/18 14:15 Received: 09/18/18

Parameter

Result	Units	Dilution	LOD	LOQ/MCL	Analyzed	Method	Lab
110	ug/L	1	1.0*	2.0 / 1300*	09/20/18	EPA 200.8, Rev 5.4	721026460
ND	NTU	1	1.0*	1.0*	09/19/18	EPA 180.1	721026460

Values in brackets represent results greater than or equal to the LOD but less than the LOQ and are within a region of "Less-Certain Quantitation". Results greater than or equal to the LOQ are considered to be in the region of "Certain Quantitation". LOD and/or LOQ tagged with an asterisk(\*) are considered Reporting Limits. All LOD/LOQs adjusted to reflect dilution and/or solids content.

ND = Not Detected (< LOD)    LOD = Limit of Detection    NA = Not Applicable

DWB = Dry Weight Basis    %DWB = (mg/kg DWB) / 10000    1000 ug/L = 1 mg/L

MCL = Maximum Contaminant Levels for Drinking Water Samples. Shaded results indicate >MCL.

Reviewed by:



Authorized by:  
 R. T. Krueger  
 President



# LEAD AND COPPER ANALYSES

**(ENCLOSE FORM WHEN SENDING SAMPLE TO LAB)**

Rev: 09/16

**Section I: To be completed by the Department of Natural Resources/SAMPLER**

System Name: SQUIRES GROVE System Type: MC\_\_\_ NN\_\_\_ OC X TN\_\_\_  
(Check one)  
System Address: \_\_\_\_\_ City: ELM GROVE County: 68 - Waukesha Region Code: 2  
Pws Id#: 26802017 Entry Point \_\_\_\_\_ WI Unique \_\_\_\_\_ DNR Contact: JOSEPH NADOLSKI (414) 263-8522  
ID: \_\_\_\_\_ Well No: \_\_\_\_\_



Sampler Phone/Name/Address (Notify DNR Contact of Corrections)

(920) 210-0391  
STELSEL, ANDY - MUNICIPAL WELL & PUMP  
1212 STORBECK DR  
PO BOX 311  
WAUPUN WI 53963

Sampler: Provide information to have results faxed or e-mailed or to change a billing address, if your lab offers these services (leave blank if you don't use these services).

Fax number: \_\_\_\_\_  
E-mail: \_\_\_\_\_  
Billing address: \_\_\_\_\_

**Sample Source:**

- W Well  
 E Entry Point  
 D Distribution System

**Sample Type:**

- D Compliance Sample  
 C Confirmation Sample  
 I Investigation Sample  
 W Raw Water Sample

**Special Instructions:**

Collect sample between: 06 / 01 / 2018 and 09 / 30 / 2018

**Section II: To be completed by SAMPLER -- ALL ITEMS REQUIRED**

Sample Collection Date: 09 / 10 / 2018 Time: 6 : 49  a.m.  p.m.  
mm dd yyyy

As required in ch. NR 809.547(2), these samples shall be collected after water sat motionless for a minimum of 6 hours.

Tier:  1  2  3  Exceptional

Address where sample was collected: 15275 Red Fox Ln.

Monitoring Point ID: D6 Sample Point Description: Kitchen Sink

First Initial and Last Name of Sampler: A. Stessel

Sampler Phone: \_\_\_\_\_

**Section III: To be completed by LAB. Report test results on back for PWS and electronically to DNR within 10 days per NR 809.80**

Check here if some or all of the parameters were analyzed by a subcontracted lab.

NOTE: A separate form must be completed by each lab with data for only the parameters which that lab analyzed.

Laboratory ID Number: \_\_\_\_\_

Laboratory Name: \_\_\_\_\_

Date Sample Received: 9/18/18

Time Sample Received: 10:00

Laboratory Sample ID: \_\_\_\_\_

Signature of Receiving Lab Official: Marnie Fease

Date Reported to PWS:  / /

Condition of Sample Upon Receipt: \_\_\_\_\_

Notice: This form must be submitted with laboratory samples analyzed to determine compliance with ch. NR 809, Wis. Adm. Code, Safe Drinking Water. Completion of this form or a similar form approved by the Department is mandatory. Failure to submit a completed form to the Department is a violation punishable by a forfeiture of no less than \$10 nor more than \$5000, or by a fine of not less than \$10 nor more than \$100 or imprisonment of not less than 30 days, or both. Each day of continued violation is a separate offense (ss. 144.99, Wis. Stats.). Authorization for these requirement is under s. 280.13(d), Wis. Stats. and ch. NR 809.80. Personally identifiable information on this form will be used for no other purpose.



# LEAD AND COPPER ANALYSES

**(ENCLOSE FORM WHEN SENDING SAMPLE TO LAB)**

Rev: 09/16

**Section I: To be completed by the Department of Natural Resources/SAMPLER**

System Name: SQUIRES GROVE System Type: (Check one) MC  NN  OC  TN   
System Address: \_\_\_\_\_ City: ELM GROVE County: 68 - Waukesha Region Code: 2  
Pws Id#: 26802017 Entry Point \_\_\_\_\_ WI Unique \_\_\_\_\_ DNR Contact: JOSEPH NADOLSKI (414) 263-8522  
ID: \_\_\_\_\_ Well No: \_\_\_\_\_



<b>Sampler Phone/Name/Address (Notify DNR Contact of Corrections)</b> (920) 210-0391 STELSEL, ANDY - MUNICIPAL WELL & PUMP 1212 STORBECK DR PO BOX 311 WAUPUN WI 53963	<b>Sampler:</b> Provide information to have results faxed or e-mailed or to change a billing address, if your lab offers these services (leave blank if you don't use these services). Fax number: _____ E-mail: _____ Billing address: _____
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**Sample Source:**

- W Well
- E Entry Point
- D Distribution System

**Sample Type:**

- D Compliance Sample
- C Confirmation Sample
- I Investigation Sample
- W Raw Water Sample

**Special Instructions:**

Collect sample between: 06 /01 /2018 and 09 /30 /2018

**Section II: To be completed by SAMPLER -- ALL ITEMS REQUIRED**

Sample Collection Date: 09 /10 /2018 Time: 6 : 15  a.m.  p.m.

As required in ch. NR 809.547(2), these samples shall be collected after water sat motionless for a minimum of 6 hours.

Tier:  1  2  3  Exceptional

Address where sample was collected: 15100 Red Fox Ln

Monitoring Point ID: D7 Sample Point Description: Kitchen Sink

First Initial and Last Name of Sampler: A - Stelsel Sampler Phone: \_\_\_\_\_

**Section III: To be completed by LAB. Report test results on back for PWS and electronically to DNR within 10 days per NR 809.80**

Check here if some or all of the parameters were analyzed by a subcontracted lab.

NOTE: A separate form must be completed by each lab with data for only the parameters which that lab analyzed.

Laboratory ID Number: \_\_\_\_\_ Laboratory Name: \_\_\_\_\_

Date Sample Received: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time Sample Received: \_\_\_\_:\_\_\_\_:\_\_\_\_ Laboratory Sample ID: \_\_\_\_\_

Signature of Receiving Lab Official: \_\_\_\_\_ Date Reported to PWS: \_\_\_\_/\_\_\_\_/\_\_\_\_

Condition of Sample Upon Receipt: \_\_\_\_\_

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# LEAD AND COPPER ANALYSES

**(ENCLOSE FORM WHEN SENDING SAMPLE TO LAB)**

Rev: 09/16

**Section I: To be completed by the Department of Natural Resources/SAMPLER**

System Name: SQUIRES GROVE System Type: (Check one) MC  NN  OC  TN   
System Address: \_\_\_\_\_ City: ELM GROVE County: 68 - Waukesha Region Code: 2  
Pws Id#: 26802017 Entry Point \_\_\_\_\_ WI Unique \_\_\_\_\_ DNR Contact: JOSEPH NADOLSKI (414) 263-8522  
ID: \_\_\_\_\_ Well No: \_\_\_\_\_



<b>Sampler Phone/Name/Address (Notify DNR Contact of Corrections)</b> (920) 210-0391 STELSEL, ANDY - MUNICIPAL WELL & PUMP 1212 STORBECK DR PO BOX 311 WAUPUN WI 53963	<b>Sampler:</b> Provide information to have results faxed or e-mailed or to change a billing address, if your lab offers these services (leave blank if you don't use these services). Fax number: _____ E-mail: _____ Billing address: _____
---	--

**Sample Source:**

- W Well
- E Entry Point
- D Distribution System

**Sample Type:**

- D Compliance Sample
- C Confirmation Sample
- I Investigation Sample
- W Raw Water Sample

**Special Instructions:**

Collect sample between: 06 / 01 / 2018 and 09 / 30 / 2018

**Section II: To be completed by SAMPLER -- ALL ITEMS REQUIRED**

Sample Collection Date: 09 / 12 / 2018 Time: 5 : 00  a.m.  p.m.

Tier:  1  2  3  Exceptional

As required in ch. NR 809.547(2), these samples shall be collected after water sat motionless for a minimum of 6 hours.

Address where sample was collected: 1195 Terrace Dr.

Monitoring Point ID: D8 Sample Point Description: Kitchen Sink

First Initial and Last Name of Sampler: A. Stelsel Sampler Phone: \_\_\_\_\_

**Section III: To be completed by LAB. Report test results on back for PWS and electronically to DNR within 10 days per NR 809.80**

Check here if some or all of the parameters were analyzed by a subcontracted lab.

NOTE: A separate form must be completed by each lab with data for only the parameters which that lab analyzed.

Laboratory ID Number: \_\_\_\_\_ Laboratory Name: \_\_\_\_\_

Date Sample Received: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time Sample Received: \_\_\_\_:\_\_\_\_:\_\_\_\_ Laboratory Sample ID: \_\_\_\_\_

Signature of Receiving Lab Official: \_\_\_\_\_ Date Reported to PWS: \_\_\_\_/\_\_\_\_/\_\_\_\_

Condition of Sample Upon Receipt: \_\_\_\_\_

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# LEAD AND COPPER ANALYSES

**(ENCLOSE FORM WHEN SENDING SAMPLE TO LAB)**

Rev: 09/16

**Section I: To be completed by the Department of Natural Resources/SAMPLER**

System Name: SQUIRES GROVE System Type: MC  NN  OC  TN   
(Check one)  
System Address: \_\_\_\_\_ City: ELM GROVE County: 68 - Waukesha Region Code: 2  
Entry Point WI Unique Pws Id#: 26802017 ID: \_\_\_\_\_ Well No: \_\_\_\_\_ DNR Contact: JOSEPH NADOLSKI (414) 263-8522



<b>Sampler Phone/Name/Address (Notify DNR Contact of Corrections)</b> (920) 210-0391 STELSEL, ANDY - MUNICIPAL WELL & PUMP 1212 STORBECK DR PO BOX 311 WAUPUN WI 53963	<b>Sampler:</b> Provide information to have results faxed or e-mailed or to change a billing address, if your lab offers these services (leave blank if you don't use these services). Fax number: _____ E-mail: _____ Billing address: _____
---	--

**Sample Source:**

- W Well
- E Entry Point
- D Distribution System

**Sample Type:**

- D Compliance Sample
- C Confirmation Sample
- I Investigation Sample
- W Raw Water Sample

**Special Instructions:**

Collect sample between: 06 /01 /2018 and 09 /30 /2018

**Section II: To be completed by SAMPLER -- ALL ITEMS REQUIRED**

Sample Collection Date: 09 /10 /2018 Time: 7 : 15  a.m.  p.m.  
Tier:  1  2  3  Exceptional  
Address where sample was collected: 1140 Pilgrim Parkway  
Monitoring Point ID: D9 Sample Point Description: Kitchen Sink  
First Initial and Last Name of Sampler: A - Stelsel Sampler Phone: \_\_\_\_\_

As required in ch. NR 809.547(2), these samples shall be collected after water sat motionless for a minimum of 6 hours.

**Section III: To be completed by LAB. Report test results on back for PWS and electronically to DNR within 10 days per NR 809.80**

Check here if some or all of the parameters were analyzed by a subcontracted lab.

NOTE: A separate form must be completed by each lab with data for only the parameters which that lab analyzed.

Laboratory ID Number: \_\_\_\_\_ Laboratory Name: \_\_\_\_\_  
Date Sample Received: \_\_\_\_/\_\_\_\_/\_\_\_\_ Time Sample Received: \_\_\_\_:\_\_\_\_:\_\_\_\_ Laboratory Sample ID: \_\_\_\_\_  
Signature of Receiving Lab Official: \_\_\_\_\_ Date Reported to PWS: \_\_\_\_/\_\_\_\_/\_\_\_\_  
Condition of Sample Upon Receipt: \_\_\_\_\_

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# LEAD AND COPPER ANALYSES

**(ENCLOSE FORM WHEN SENDING SAMPLE TO LAB)**

Rev: 09/16

**Section I: To be completed by the Department of Natural Resources/SAMPLER**

System Name: SQUIRES GROVE

System Type: (Check one) MC  NN  OC  TN

System Address: \_\_\_\_\_ City: ELM GROVE County: 68 - Waukesha Region Code: 2

Pws Id#: 26802017 Entry Point \_\_\_\_\_ WI Unique ID: \_\_\_\_\_ Well No: \_\_\_\_\_ DNR Contact: JOSEPH NADOLSKI (414) 263-8522



Sampler Phone/Name/Address (Notify DNR Contact of Corrections)

(920) 210-0391  
STELSEL, ANDY - MUNICIPAL WELL & PUMP  
1212 STORBECK DR  
PO BOX 311  
WAUPUN WI 53963

Sampler: Provide information to have results faxed or e-mailed or to change a billing address, if your lab offers these services (leave blank if you don't use these services).

Fax number: \_\_\_\_\_

E-mail: \_\_\_\_\_

Billing address: \_\_\_\_\_

**Sample Source:**

- W Well
- E Entry Point
- D Distribution System

**Sample Type:**

- D Compliance Sample
- C Confirmation Sample
- I Investigation Sample
- W Raw Water Sample

**Special Instructions:** \_\_\_\_\_

Collect sample between: 06 /01 /2018 and 09 /30 /2018

**Section II: To be completed by SAMPLER -- ALL ITEMS REQUIRED**

Sample Collection Date: 09 /07 /2018 Time: 2 : 15  a.m.  p.m.

As required in ch. NR 809.547(2), these samples shall be collected after water sat motionless for a minimum of 6 hours.

Tier:  1  2  3  Exceptional

Address where sample was collected: 1122 Pilgrim Parkway

Monitoring Point ID: D10 Sample Point Description: Bathroom Sink

First Initial and Last Name of Sampler: A - Stelsel

Sampler Phone: \_\_\_\_\_

**Section III: To be completed by LAB. Report test results on back for PWS and electronically to DNR within 10 days per NR 809.80**

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NOTE: A separate form must be completed by each lab with data for only the parameters which that lab analyzed.

Laboratory ID Number: \_\_\_\_\_

Laboratory Name: \_\_\_\_\_

Date Sample Received:   /  /  

Time Sample Received:   :  

Laboratory Sample ID: \_\_\_\_\_

Signature of Receiving Lab Official: \_\_\_\_\_

Date Reported to PWS:   /  /  

Condition of Sample Upon Receipt: \_\_\_\_\_

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