

Private Water Supply

Contact Information			
Collected By:		Date Collected:	Time Collected:
Received Date:	Received Temp:	Examined Time:	Reported Time:
Name of Owner:		Address:	
Producer #:	Sampling Point:		

Report Test Results		
Name(if different):	Phone Number:	Fax Number:
Email Address:	Reported By:	Reported Time and Date:

Source of Sample						
<input type="checkbox"/> Dug Well	<input type="checkbox"/> Drilled Well	<input type="checkbox"/> Spring	<input type="checkbox"/> Buried	<input type="checkbox"/> Surface	<input type="checkbox"/> Public Supply	<input type="checkbox"/> Other:
Additional Description of Source:				Distance from All Possible Sources of Pollution:		

<input type="checkbox"/> Method 1 - Col / E. coli: using Colilert				
Total Coliform		E. coli		Analyst:
< 1/100ml - NF	<input type="checkbox"/> Satisfactory	< 1/100ml - NF/absence	<input type="checkbox"/> Satisfactory	
≥ 1/100ml - POS	<input type="checkbox"/> Unsatisfactory	≥ 1/100ml - POS/presence	<input type="checkbox"/> Unsatisfactory	License #:

<input type="checkbox"/> Method 2 - Col / E. coli: using Membrane Filter (recirculated water systems)													
Presumptive Test Membrane Filter Method Millipore Colonies Detected Per 100 ml.:		Confirmation Col.											
		+ = Positive		LTB		EC Mug		BGLB					
- = Negative		24 HR	48 HR	24 HR	48 HR	24 HR	48 HR						
# Typical	# Atypical	# Typical Colonies		# Atypical Colonies									
Total Colonies Detected:													
TNTC* = Invalid Sample <input type="checkbox"/> * Too Numerous To Count													
						<table border="1"> <tr> <td>Number of Tubes Tested:</td> <td></td> </tr> <tr> <td>Number of Tubes Positive:</td> <td></td> </tr> <tr> <td>Percent Positive</td> <td></td> </tr> </table>		Number of Tubes Tested:		Number of Tubes Positive:		Percent Positive	
Number of Tubes Tested:													
Number of Tubes Positive:													
Percent Positive													
						LTB BGLB # Verified Coliform % Positive Verified Coliforms * = Total # of Coliforms Total Coliforms Subjected to Verification							

Method 2 Test - Results				
Total Coliform		E. coli		Analyst:
< 1.1/100ml - NF	<input type="checkbox"/> Satisfactory	< 1/100ml - NF/absence	<input type="checkbox"/> Satisfactory	
≥ 1.1/100ml - POS	<input type="checkbox"/> Unsatisfactory	≥ 1/100ml - POS/presence	<input type="checkbox"/> Unsatisfactory	License #: