



## Secondary Contaminant Report

I. PWS INFORMATION: Please refer to your DEP Water Quality Sampling Schedule (WQSS) to help complete this form

PWS ID #: **3116000** City / Town: **GROVELAND**  
 PWS Name: **Groveland Water Department** PWS Class: **COM**  **NTNC**  **TNC**

DEP LOCATION (LOC) ID#	DEP Location Name	Sample Information	Date Collected	Collected By
A 10004	GP WELL #4	<input type="checkbox"/> (M)ultiple <input checked="" type="checkbox"/> (S)ingle	<input type="checkbox"/> (R)aw <input checked="" type="checkbox"/> (F)inished	8/17/16 J. KOTULI
B		<input type="checkbox"/> (M)ultiple <input checked="" type="checkbox"/> (S)ingle	<input type="checkbox"/> (R)aw <input checked="" type="checkbox"/> (F)inished	
Routine or Special Sample	Original, Resubmitted or Confirmation Report	If Resubmitted Report, list below:		
		(1) Reason for Resubmission	(2) Collection Date of Original Sample	
A <input checked="" type="checkbox"/> RS <input type="checkbox"/> SS	<input checked="" type="checkbox"/> Original <input type="checkbox"/> Resubmitted <input type="checkbox"/> Confirmation	<input type="checkbox"/> Resample <input type="checkbox"/> Reanalysis <input type="checkbox"/> Report Correction		
B <input type="checkbox"/> RS <input type="checkbox"/> SS	<input type="checkbox"/> Original <input type="checkbox"/> Resubmitted <input type="checkbox"/> Confirmation	<input type="checkbox"/> Resample <input type="checkbox"/> Reanalysis <input type="checkbox"/> Report Correction		
SAMPLE NOTES – (Such as, if a Manifold/Multiple sample, list any sources that were on-line during sample collection).				
A				
B				

## II. ANALYTICAL LABORATORY INFORMATION:

Primary Lab MA Cert. #: **MA026** Primary Lab Name: **Biomarine Inc.** Subcontracted? (Y/N) **Y**  
 Analysis Lab MA Cert. #: **M-CT008** Analysis Lab Name: **MICROBAC LABS INC.**

Compound	Results		SMCL	MDL (mg/L)	Lab Method	Date Analyzed	Lab Sample ID#
	A	B					
IRON (mg/L)	ND		0.3	0.050	ICP BY 200.7	8/24/16	E608P22-6-62810F
MANGANESE (mg/L)	0.016		0.05*	0.0020	ICP BY 200.7	8/24/16	E608P22-6-62810F
ALKALINITY (mg/L as CaCO <sub>3</sub> )	76		None	1.0	SM2320B	8/19/16	E608P22-6-62810F
CALCIUM (mg/L)	18		None	0.050	ICP BY 200.7	8/24/16	E608P22-6-62810F
MAGNESIUM (mg/L)	5.3		None	0.050	ICP BY 200.7	8/24/16	E608P22-6-62810F
HARDNESS (mg/L as CaCO <sub>3</sub> )	66		None	0.34	SM2340B	8/24/16	E608P22-6-62810F
POTASSIUM (mg/L)	1.6		None	0.20	ICP BY 200.7	8/24/16	E608P22-6-62810F
TURBIDITY (mg/L)	0.38		None	0.10	SM2130B	8/18/16	E608P22-6-62810F
ALUMINUM (mg/L)	ND		0.2	0.050	ICP BY 200.7	8/24/16	E608P22-6-62810F
CHLORIDE (mg/L)	81		250	2.0	SM4500-CL-D	8/20/16	E608P22-6-62810F
COLOR (c.u.)	0		15		SM2120B	8/18/16	E608P22-6-62810F
COPPER (mg/L)	ND		1	0.0020	200.7	8/24/16	E608P22-6-62810F
ODOR (T.O.N)	1		3		SM2150B	8/18/16	E608P22-6-62810F
pH	7.6		6.5-8.5		SM 4500-H+B	8/18/16	E608P22-6-62810F
SILVER (mg/L)	ND		0.10	0.0020	ICP BY 200.7	8/24/16	E608P22-6-62810F
SULFATE (mg/L)	15		250	5.0	SM4500-SO <sub>4</sub> -E	8/19/16	E608P22-6-62810F
TDS (mg/L)	230		500	10	SM 2540C	8/22/16	E608P22-6-62810F
ZINC (mg/L)	0.0067		5	0.0050	ICP BY 200.7	8/25/16	E608P22-6-62810F

\* EPA has established a lifetime Health Advisory (HA) for manganese at 0.3 mg/L and an acute HA at 1.0 mg/L.

LAB SAMPLE NOTES	
A	
B	

I certify under penalties of law that I am the person authorized to fill out this form and the information contained herein is true, accurate and complete to the best extent of my knowledge.

Primary Lab Director Signature: \_\_\_\_\_

Date: 9/8/16

If not submitting these results electronically, mail TWO copies of this report to your DEP Regional Office no later than 10 days after the end of the month in which you received this report or no later than 10 days after the end of the reporting period, whichever is sooner.

DEP REVIEW STATUS (Initial & Date) <input type="checkbox"/> Accepted _____ <input type="checkbox"/> Disapproved _____	Review Comments	<input type="checkbox"/> WQTS Data Entered
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## Secondary Contaminant Report

I. PWS INFORMATION: Please refer to your DEP Water Quality Sampling Schedule (WQSS) to help complete this form

PWS ID #: \_\_\_\_\_ City / Town: Biomarine, MAPWS Name: Biomarine - DW - DEP PWS Class: COM  NTNC  TNC 

DEP LOCATION (LOC) ID#	DEP Location Name	Sample Information	Date Collected	Collected By
A	62810F	<input type="checkbox"/> (M)ultiple <input type="checkbox"/> (R)aw <input checked="" type="checkbox"/> (S)ingle <input checked="" type="checkbox"/> (F)inished	8/17/2016	Client
B				

	Routine or Special Sample	Original, Resubmitted or Confirmation Report	If Resubmitted Report, list below	
			(1) Reason for Resubmission	(2) Collection Date of Original Sample
A	<input checked="" type="checkbox"/> RS <input type="checkbox"/> SS	<input checked="" type="checkbox"/> Original <input type="checkbox"/> Resubmitted <input type="checkbox"/> Confirmation	<input type="checkbox"/> Resample <input type="checkbox"/> Reanalysis <input type="checkbox"/> Report Correction	
B				

SAMPLE NOTES	
A	
B	

## II. ANALYTICAL LABORATORY INFORMATION

Primary Lab MA Cert. #: M-CT008 Primary Lab Name: Microbac Laboratories, Inc. Subcontract? (Y/N) NAnalysis Lab MA Cert. #: M-CT008 Analysis Lab Name: Microbac Laboratories, Inc.

Contaminant	Results		SMCL	MDL (mg/L)	Lab Method	Date Analyzed	Lab Sample ID#
	A	B					
IRON (mg/L)	ND		0.3	0.050	200.7	8/24/2016	E608P22-6
MANGANESE (mg/L)	0.016		0.05*	0.0020	200.7	8/24/2016	E608P22-6
ALKALINITY (mg/L as CaCO <sub>3</sub> )	76		none	1.0	SM2320B	8/19/2016	E608P22-6
CALCIUM (mg/L)	18		none	0.050	200.7	8/24/2016	E608P22-6
MAGNESIUM (mg/L)	5.3		none	0.050	200.7	8/24/2016	E608P22-6
HARDNESS (mg/L as CaCO <sub>3</sub> )	66		none	0.34	200.7	8/24/2016	E608P22-6
POTASSIUM (mg/L)	1.6		none	0.20	200.7	8/24/2016	E608P22-6
TURBIDITY (NTU)	0.38		none	0.10	2130B	8/18/2016	E608P22-6
ALUMINUM (mg/L)	ND		0.2	0.050	200.7	8/24/2016	E608P22-6
CHLORIDE (mg/L)	81		250	2.0	SM4500-CL-E	8/20/2016	E608P22-6
COLOR (C.U)	0		15		2120B	8/18/2016	E608P22-6
COPPER (mg/L)	ND		1	0.0020	200.7	8/24/2016	E608P22-6
ODOR (T.O.N)	1		3		2150B	8/18/2016	E608P22-6
pH	7.6		6.5 to 8.5		4500H-B	8/18/2016	E608P22-6
SILVER (mg/L)	ND		0.10	0.0020	200.7	8/24/2016	E608P22-6
SULFATE (mg/L)	15		250	5.0	SM4500-SO4-E	8/19/2016	E608P22-6
TDS (mg/L)	230		500	10	SM2540C	8/22/2016	E608P22-6
ZINC (mg/L)	0.0067		5	0.0050	200.7	8/25/2016	E608P22-6

\* EPA has established a lifetime Health Advisory (HA) for manganese at 0.3 mg/L and an acute HA at 1.0 mg/L.

LAB SAMPLE NOTES	
A	
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I certify under penalties of law that I am the person authorized to fill out this form and the information contained herein is true, accurate and complete to the best extent of my knowledge

Primary Lab Director Signature: Date: 8/25/2016If not submitting results electronically, mail TWO copies of this report to your DEP Regional Office no later than 10 days after the end of the month in which you received this report or no later than 10 days after the end of the reporting period, whichever is sooner.

DEP REVIEW STATUS (Initial & Date)	Review Comments	<input type="checkbox"/> WQTS Data Entered
<input type="checkbox"/> Accepted <input type="checkbox"/> Disapproved		