



Colorado Department of Public Health and Environment Compliance Assurance & Data Management Unit

Colorado Department
of Public Health
and Environment

REPORTING FORM FOR NITRATE OR NITRITE AS NITROGEN ANALYSES

SAMPLER: FILL OUT ONE FORM - FOR EACH INDIVIDUAL SAMPLING POINT

Are these results to be used to fulfill compliance monitoring requirements? YES or NO
Is this a check or confirmation sample? YES NO

PWSID CO0 _____ COUNTY: _____ DATE COLLECTED: ____ / ____ / ____

SYSTEMS NAME: _____

SYSTEM MAILING ADDRESS: _____
Street address/PO Box CITY STATE ZIP

CONTACT PERSON: _____ PHONE: (____) _____

SAMPLE COLLECTED BY: _____ TIME COLLECTED: _____ am/pm

ENTRY POINT (Finished Water) SAMPLE SOURCE WATER SAMPLE

FOR ENTRY POINT SAMPLES PLEASE INDICATE: Chlorinated Other Treatment
Finished—Not Treated (No chlorine or other treatment)

STATE ENTRY POINT CODE: EP _____ SOURCE(S) REPRESENTED: _____

For Laboratory Use Only Below This Line

LABORATORY SAMPLE # _____ CLIENT NAME or ID# _____

LABORATORY NAME _____

LAB PHONE # (____) _____ DATE RECEIVED IN LABORATORY ____ / ____ / ____

COMMENTS: _____

PARAMETER	RESULT	UNITS	MCL	STANDARD METHOD	LAB MDL	DATE ANALYZED
NITRATE as N		mg/L	10.0 mg/L		mg/L	
NITRITE as N		mg/L	1.0 mg/L		mg/L	

Reviewed & Approved by _____ Title _____ Date ____ / ____ / ____

MAIL RESULTS TO: CDPHE, WQCD-CADM
4300 Cherry Creek Drive South
Denver, CO 80246-1530

FAX: 303-782-0390

INSTRUCTIONS AND EXAMPLES

****DO NOT TAKE SAMPLE FROM HOSES OR THROUGH SCREENS****

*****DO NOT take your sample in the DISTRIBUTION SYSTEM*****

SAMPLER:

- Fill out one form for each sample
 - Fully complete the upper portion of the "REPORTING FORM FOR INORGANIC CONTAMINANTS ANALYSIS" and submit it to the laboratory with the filled sample bottle.
 - Label each bottle correctly and completely. Please be sure you use the same description you used on the paperwork.
1. **Are these results to be used to fulfill compliance-monitoring requirements?** Check YES or NO
 2. **Is this sample a check or confirmation sample?** Check YES or NO
 3. **Enter the following information in the appropriate blanks:**
 - PWSID Number
 - County
 - Date of Sample Collection
 - Systems Name
 - System Mailing Address
 - Contact Person's Name and Phone Number
 - Sampler's Name
 - Time Collected
 4. **Indicate if this is a finished water sample or a source water sample** (source water samples **cannot** be used for compliance). Compliance sampling points are always AFTER ALL TREATMENT and before the first customer. Any exception must be approved in writing from the Inorganic Chemical Contaminants Rule Manager. If your system does not treat the water from deep-water wells, the finished and source sampling points may be the same. For compliance purposes always check the box for "Finished—Not Treated."
 5. **For Finished Water Samples Check the Appropriate Box**
 - Chlorinated
 - Other Treatment
 - Finished—Not Treated (No Chlorine or Other Treatment) (i.e., deep-water wells that have no disinfection)
 6. **Enter the State Entry Point Code:** ALWAYS use state assigned facility id numbers. These are located on your annual monitoring schedule.
 7. **List the Source(s) Represented**

Examples for numbers 6 and 7 above:

(6) SAMPLING POINTS

EP-001
EP-002T
EP-003T

(7) SOURCE(S)

001-Well #1 (no treatment added)
009-Chlorinator for North spring
007, 010, 011-North well Field Clearwell

It is important that you have a sampling tap at each entry point to the distribution system (EPTDS). If your system does not have a sampling tap at each EPTDS, every effort should be made to have one installed as soon as possible.

If you have an unusual situation that we have not covered in these instructions, or you have other sampling questions please call (303) 692-3500 and ask to speak to the Inorganic Contaminants Drinking Water Rule Manager.