Florida Department of Environmental Protection
Safe Drinking Water Program Laboratory Reporting Format

INSTRUCTIONS

This format is to be used by laboratories for reporting drinking water analyses to the appropriate Department of Environmental Protection (DEP) or Health Department offices (see below). For analysis results to be acceptable for compliance with Chapter 62-550, F.A.C., laboratories performing the analyses must be certified for those analayses in drinking water by the Florida Department of Health (DOH) and report results in accordance with Chapter 62-160, F.A.C. Computer generated or otherwise personalized reports will be accepted as long as they conform to this format, with the results reported using the same groups with the same contaminant IDs, contaminant names, units, column headings, and in the same order as in this format.

The contaminants shown in this example are those named in Rule 62-550, F.A.C. Other contaminants may be reported using this format as long as the contaminant IDs and names are the same as those found in the Safe Drinking Water Act. When applicable, results shall be reported using the data qualifier codes specified in the attached Table 1 of Rule 62-160, F.A.C. Parameters not reported need not be listed. Multiple samples for the same parameter can be reported under the same cover sheet as long as the sample locations are specific. Likewise, composite samples must be so identified so that if samples are from multiple plants and/or systems, credit for compliance will be given to all the plants/systems. Radionuclides samples that have been composited over time (multiple quarters) also have to be clearly identified so that proper credit for compliance will be given.

Send completed reports to the DEP District Office or DOH Health Dept. office which has jurisdiction over the water system. The 7-character PWS ID must be included on the report.

Northwest DEP District Office……. 160 Governmental Center, Pensacola, FL, 32502-5794 850.595-8300
Northeast DEP District Office ……. 7825 Baymeadows Way, Suite 200B, Jacksonville, FL, 32256-7590 904.807-3300
Central DEP District Office …….. 3319 Maguire Blvd., Suite 232, Orlando, FL, 32803-3767…… 407.894-7555
Southeast DEP District Office ……. 400 N. Congress Ave., Suite 200, West Palm Beach, FL, 33416…… 561.681-6600
Southeast DEP District Branch Office ……1801 S.E. Hillmoor Dr., Suite C-204, Port St. Lucie, FL, 34952…… 772.398-2806
South DEP District Office ……. P.O. Box 2549, Ft. Myers, FL, 33902-2549 ……. 239.332-6975
Southwest DEP District Office …… 13051 N. Telecom Parkway, Temple Terrace, FL, 33637…… 813.632-7600

Broward County Health Department ……..2421 S.W. 6th Ave., Ft. Lauderdale, FL, 33315…….. 954.467-4854
Dade County Health Department ……. 1725 N.W. 167th St., Suite 119, Miami, FL, 33056……. 305.623-3552
Hillsborough County Health Department ……P.O. Box 5135, Tampa, FL, 33675-5135…….. 813.307-8059
Lee County Health Department …… .60 Danley Dr., Unit 1, Ft. Myers, FL, 33907 ……. …….. 239.274-2200
Manatee County Health Department …….. .Environmental Health, 410 6th Avenue East, Bradenton, FL, 34208…..…….. 941.748-0747
Palm Beach County Health Department…... .P.O. Box 29, West Palm Beach, FL, 33402 ……..…….. 561.837-5900
Polk County Health Department…… .1290 Golfview Ave., 4th Floor, Bartow, FL, 33830……..…….. 863.519-8330
Sarasota County Health Department ……1301 Cattleman Road, Sarasota, FL, 34232……..…….. 941.378-6133
Volusia County Health Department……..…Environmental Engineering – Bin #180, Box 9190, Daytona Beach, FL, 32120-9190….. 386.736-5436

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DATA QUALIFIER CODES (From 62-160, Table 1)

The following qualifier codes shall be used by laboratories when reporting data values that either meet the specified descriptions outlined below or do not meet the quality control criteria of the laboratory. They are categorized on these 2 pages as Acceptable, Not Acceptable, or May Be Acceptable for compliance.

The following codes (B,D,E,I,K.L,M,U,V,!) **ARE ACCEPTABLE** for use with results submitted for compliance with 62-550 and 62-555.	
SYMBOL	MEANING
B	Results based upon colony counts outside the acceptable range. Applies to microbiological tests and specifically to membrane filter colony counts. It is to be used if the colony count is generated from a plate in which the total number of coliform colonies is outside the method indicated ideal range. This code is not to be used if a 100 mL sample has been filtered and the colony count is less than the lower value of the ideal range.
D	Measurement was made in the field (i.e., in situ). This code applies to any value (except field measurements of pH, specific conductance, dissolved oxygen, temperature, total residual chlorine, transparency, turbidity or salinity) that was obtained under field conditions using approved analytical methods. If the parameter code specifies a field measurement (e.g., "Field pH"), this code is not required.
E	Indicates that extra samples were taken at composite stations.
I	The reported value is greater than or equal to the laboratory method detection limit but less than the laboratory practical quantitation limit.
K	Off-scale low. Actual value is known to be less than the value given. This code shall be used if the value is less than the lowest calibration standard and the calibration curve is known to be non-linear; or the value is known to be less than the reported value based on sample size, dilution. Shall not be used to report values that are less than the laboratory practical quantitation limit or laboratory method detection limit.
L	Off-scale high. Actual value is known to be greater than value given. To be used when the concentration of the analyte is above the acceptable level for quantitation (exceeds the linear range or highest calibration standard) and the calibration curve is known to exhibit a negative deflection.
M	When reporting chemical analyses: presence of material is verified but not quantified; the actual value is less than the value given. The reported value shall be the laboratory practical quantitation limit. This code shall be used if the level is too low to permit accurate quantification, but the estimated concentration is greater than or equal to the method detection limit. If the value is less than the method detection limit use "T" below.
U	Indicates that the compound was analyzed for but not detected. This symbol shall be used to indicate that the specified component was not detected. The value associated with the qualifier shall be the laboratory method detection limit. Unless requested by the client, less than the method detection limit values shall not be reported (see "T" below).
V	Indicates that the analyte was detected at or above the method detection limit in both the sample and the associated method blank and the value of 10 times the blank value was equal to or greater than the associated sample value. Note: unless specified by the method, the value in the blank shall not be subtracted from associated samples.
!	Data deviate from historically established concentration ranges.
The following codes (A,F,H,N,O,T,Z,?,*) are **NOT ACCEPTABLE** for use with results submitted for compliance with 62-550 and 62-555.	
A	Value reported is the arithmetic mean (average) of two or more determinations. This code shall be used if the reported value is the average of results for two or more discrete and separate samples. These samples shall have been processed and analyzed independently. Do not use this code if the data are the result of replicate analysis on the same sample aliquot, extract or digestate.
F	When reporting species: F indicates the female sex.
H	Value based on field kit determination; results may not be accurate. This code shall be used if a field screening test (i.e., field gas chromatograph data, immunoassay, vendor-supplied field kit, etc.) was used to generate the value and the field kit or method has not been recognized by the Department as equivalent to laboratory methods.

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DATA QUALIFIER CODES (From 62-160, Table 1)
CONTINUED

N	Presumptive evidence of presence of material. This qualifier shall be used if the component has been tentatively identified based on mass spectral library search; or there is an indication that the analyte is present, but quality control requirements for confirmation were not met (i.e., presence of analyte was not confirmed by alternative procedures).
O	Sampled, but analysis lost or not performed.
T	Value reported is less than the laboratory method detection limit. The value is reported for informational purposes only and shall not be used in statistical analysis.
Z	Too many colonies were present for accurate counting. Historically, this condition has been reported as "too numerous to count" (TNTC). The "Z" qualifier code shall be reported when the total number of colonies of all types is more than 200 in all dilutions of the sample. When applicable to the observed test results, a numeric value for the colony count for the microorganism tested shall be estimated from the highest dilution factor (smallest sample volume) used for the test and reported with the qualifier code.
?	Data are rejected and should not be used. Some or all of the quality control data for the analyte were outside criteria, and the presence or absence of the analyte cannot be determined from the data.
*	Not reported due to interference.
The following codes (J,Q,R,Y) **MAY OR MAY NOT BE ACCEPTABLE** for use with results submitted for compliance with 62-550 and 62-555, depending on the parameter(s) and/or the circumstances. Results with these codes will be evaluated on a case by case basis.	
SYMBOL	MEANING
J	Estimated value. A "J" value shall be accompanied by a detailed explanation for designating the value as estimated. Where possible, the lab shall report whether the actual value is estimated to be less than or greater than the reported value. A "J" value shall not be used as a substitute for K, L, M, T, V, or Y, however, if additional reasons exist for identifying the value as an estimate (e.g., matrix spiked failed to meet acceptance criteria), the "J" code may be added to a K, L, M, T, V, or Y. Examples of situations in which a "J" code must be reported include: instances where a quality control item associated with the reported value failed to meet the established quality control criteria (the specific failure must be identified); instances when the sample matrix interfered with the ability to make any accurate determination; instances when data are questionable because of improper laboratory or field protocols (e.g., composite sample was collected instead of a grab sample); instances when the analyte was detected at or above the method detection limit in a blank other than the method blank (such as calibration blank or field-generated blanks and the value of 10 times the blank value was equal to or greater than the associated sample value); or instances when the field or laboratory calibrations or calibration verifications did not meet calibration acceptance criteria.
Q	Sample held beyond the accepted holding time. This code shall be used if the value is derived from a sample that was prepared or analyzed after the approved holding time restrictions for sample preparation or analysis.
R	Significant rain in the past 48 hours. (Significant rain typically involves rain in excess of 1/2 inch within the past 48 hours.) This code shall be used when the rainfall might contribute to a lower than normal value.
Y	The laboratory analysis was from an improperly preserved sample. The data may not be accurate.

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PUBLIC WATER SYSTEM INFORMATION (to be completed by sampler – please type or print legibly)

System Name: _____ PWS I.D. #: ☐☐☐☐☐☐☐

System Type (check one): ☐Community ☐Nontransient Noncommunity ☐Transient Noncommunity

Address: _____

City: _____ ZIP Code: _____

Phone # _____ Fax #: _____ E-Mail Address: _____

SAMPLE INFORMATION (to be completed by sampler)

Sample Number: _____ Sample Date: _____ Sample Time: _____ AM PM (Circle One)

Sample Location (be specific) : _____ Location Code: _____

Disinfectant Residual (Required when reporting results for trihalomethanes and haloacetic acids): _____ mg/L Field pH: _____

Sample Type (Check Only One)

☐Distribution
☐Entry Point (to Distribution)
☐Plant Tap (not for compliance with 62-550)
☐Raw (at well or intake)
☐Max Residence Time
☐Ave Residence Time
☐Near First Customer

Reason(s) for Sample (Check all that apply)

☐Routine Compliance with 62-550
☐Confirmation of MCL Exceedance*
☐Composite of Multiple Sites**
☐Replacement (of Invalidated Sample)
☐Special (not for compliance with 62-550)
☐Clearance (permitting)
☐Other: _____

Sampling Procedure Used or Other Comments:

_____

*See 62-550.500(6) for requirements and restrictions. And 62-550.512(3) for nitrate or nitrite exceedances.

**See 62-550.550(4) for requirements and attach a results page for each site.

SAMPLER CERTIFICATION

I, _____ (Print Name), _____ (Print Title), do HEREBY CERTIFY that the above public water system and sample collection information is complete and correct.

Signature: _____ Date: _____

Certified Operator #: _____ Phone #: _____ Sampler's Fax #: _____

Sampler's E-mail: _____

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LABORATORY CERTIFICATION INFORMATION (to be completed by lab – please type or print legibly)

Lab Name:_____ Florida DOH Certification #: E_____ Certification Expiration Date:_____

ATTACH CURRENT DOH ANALYTE SHEET*

Address: _____ Phone #: _____

Were any analyses subcontracted? ☐Yes ☐No If yes, please provide DOH certification number(s): _____

ATTACH DOH ANALYTE SHEET FOR EACH SUBCONTRACTED LAB*

ANALYSIS INFORMATION (to be completed by lab) Date Sample(s) Received: _____

PWS ID (From Page 1): _____ Sample Number (From Page 1):_____ Lab Assigned Report # or Job ID:_____

Group(s) Analyzed & Results attached for compliance with Chapter 62-550, F.A.C. (Check all that apply):

Inorganics	Synthetic Organics	Volatile Organics	Disinfection Byproducts	Radionuclides	Secondaries
☐All Except Asbestos	☐All 30	☐All 21	☐Trihalomethanes	☐Single Sample	☐All 14
☐Partial	☐All Except Dioxin	☐Partial	☐Haloacetic Acids	☐Qtrly Composite**	☐Partial
☐Nitrate	☐Partial		☐Chlorite		
☐Nitrite	☐Dioxin Only		☐Bromate		
☐Asbestos					

LAB CERTIFICATION

I, _____,_____, do HEREBY CERTIFY
(Print Name) (Print Title)

that all attached analytical data are correct and unless noted meet all requirements of the National Environmental Laboratory Accreditation Conference (NELAC).

Signature:_____ Date:_____

* Failure to provide a valid and current Florida DOH lab certification number and a current Analyte Sheet for the attached analysis results will result in rejection of the report, possible enforcement against the public water system for failure to sample, and may result in notification of the DOH Bureau of Laboratory Services.

** Please provide radiological sample dates & locations for each quarter.

CONFIRMATION & NOTIFICATION IS REQUIRED WITHIN 24 HRS FOR NITRATE OR NITRITE MCL EXCEEDANCES

NON-DETECTS ARE TO BE REPORTED AS THE MDL WITH A "U" QUALIFIER. **(Non-detects reported as "BDL" or with a "<" are not acceptable.)**

COMPLIANCE DETERMINATION (to be completed by DEP or DOH -- attach notes as necessary)

Sample Collection & Analysis Satisfactory:☐Yes☐No _____ Replacement Sample or Report Requested (circle or highlight group(s) above)

Person Notified:_____ Date Notified: _____ DEP/DOH Reviewing Official: _____

Florida Department of Environmental Protection
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INORGANIC CONTAMINANTS
62-550.310(1)

Report Number / Job ID: _____

PWS ID (From Page 1): _____

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification #
1040	Nitrate (as N)	10	mg/L							E
1041	Nitrite (as N)	1	mg/L							E
1005	Arsenic	0.010	mg/L							E
1010	Barium	2	mg/L							E
1015	Cadmium	0.005	mg/L							E
1020	Chromium	0.1	mg/L							E
1024	Cyanide	0.2	mg/L							E
1025	Fluoride	4.0	mg/L							E
1030	Lead	0.015	mg/L							E
1035	Mercury	0.002	mg/L							E
1036	Nickel	0.1	mg/L							E
1045	Selenium	0.05	mg/L							E
1052	Sodium	160	mg/L							E
1074	Antimony	0.006	mg/L							E
1075	Beryllium	0.004	mg/L							E
1085	Thallium	0.002	mg/L							E
1094	Asbestos	7 MFL	MFL							E

*Results must be reported with appropriate qualifiers in accordance with Florida Administrative Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, *, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

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SECONDARY CONTAMINANTS
62-550.320

Report Number / Job ID: _____

PWS ID (From Page 1): _____

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification #
1002	Aluminum	0.2	mg/L							E
1017	Chloride	250	mg/L							E
1022	Copper	1	mg/L							E
1025	Fluoride	2.0	mg/L							E
1028	Iron	0.3	mg/L							E
1032	Manganese	0.05	mg/L							E
1050	Silver	0.1	mg/L							E
1055	Sulfate	250	mg/L							E
1095	Zinc	5	mg/L							E
1905	Color	15	CU							E
1920	Odor	3	TON							E
1925	pH (field pH from page 1)	6.5 - 8.5								E
1930	Total Dissolved Solids	500	mg/L							E
2905	Foaming Agents	0.5	mg/L							E

*Results must be reported with appropriate qualifiers in accordance with Florida Administrative Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, *, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

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DISINFECTION BYPRODUCTS
62-550.310(3)

Report Number / Job ID: _____

Disinfectant Residual (mg/L): _____

PWS ID (From Page 1): _____

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Regulatory MRL**	Analysis Date	Analysis Time	DOH Lab Certification #
1009	Chlorite	1000	µg/L					20***			E
1011	Bromate	10	µg/L					5.0 or 1.0****			E

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Regulatory MRL**	Analysis Date	Analysis Time	DOH Lab Certification #
2450	Monochloroacetic Acid	N/A	µg/L					2.0			E
2451	Dichloroacetic Acid	N/A	µg/L					1.0			E
2452	Trichloroacetic Acid	N/A	µg/L					1.0			E
2453	Monobromoacetic Acid	N/A	µg/L					1.0			E
2454	Dibromoacetic Acid	N/A	µg/L					1.0			E
2456	Total Haloacetic Acids (HAA5)	60	µg/L					---			E

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Regulatory MRL**	Analysis Date	Analysis Time	DOH Lab Certification #
2941	Chloroform	N/A	µg/L					1.0			E
2942	Bromoform	N/A	µg/L					1.0			E
2943	Bromodichloromethane	N/A	µg/L					1.0			E
2944	Dibromochloromethane	N/A	µg/L					1.0			E
2950	Total Trihalomethanes (TTHM)	80	µg/L					---			E

** Laboratories are required to adhere to the minimum reporting level (MRL) requirements of 40 CFR 141.131(b)(2)(iv).

*** Applicable to monitoring as prescribed in 40 CFR 141.132.(b)(2)(i)(B) and (b)(2)(ii).

**** Laboratories that use EPA Methods 317.0 Revision 2.0, 326.0 or 321.8 must meet a 1.0 µg/L MRL for bromate.

NOTE: Do not round values. Report results to the accuracy, precision, and sensitivity of the analytical method used.

*Results must be reported with appropriate qualifiers in accordance with Florida Administrative Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, *, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

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RADIONUCLIDES
62-550.310(6)

Report Number / Job ID: _____

PWS ID (From Page 1): _____

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	RDL	Analysis Error	Analysis Date	Analysis Time	DOH Lab Certification #
4000	Gross Alpha (Excl Uranium)	15	pCi/L	**				3				E
4002	Gross Alpha (Incl Uranium)	***	pCi/L					3				E
4006	Combined Uranium**** (U-234, U-235, & U-238)	20	pCi/L					.67				E
		30	µg/L					1				E
4020	Radium-226	5	pCi/L					1				E
4030	Radium-228							1				E

** If the result exceeds 5 pCi/L, a measurement for radium-226 is required. Uranium is reported separately under Contam ID 4006.

*** If the results exceed 5 pCi/L, a measurement for radium-226 is required. If the results exceed 15 pCi/L, a measurement for Combined Uranium must be reported separately. The DEP/DOH will subtract the U value from the Gross Alpha (ID 4002) to determine compliance with MCL for Gross Alpha (Excl. U) of 15pCi/L. If the result for ID 4002 Gross Alpha (Including Uranium) does not exceed 15pCi/L, Combined Uranium need not be measured nor reported.

**** If using Uranium testing methods ASTM D5174 or EPA 200.8 only, then Analysis Error need not be reported.

*Results must be reported with appropriate qualifiers in accordance with Florida Administrative Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, *, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

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VOLATILE ORGANICS
62-550.310(4)(a)

Report Number / Job ID: _____

PWS ID (From Page 1): _____

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	RDL	Analysis Date	Analysis Time	DOH Lab Certification #
2378	1,2,4-Trichlorobenzene	70	µg/L					0.5			E
2380	cis-1,2-Dichloroethylene	70	µg/L					0.5			E
2955	Xylenes (total)	10,000	µg/L					0.5			E
2964	Dichloromethane	5	µg/L					0.5			E
2968	o-Dichlorobenzene	600	µg/L					0.5			E
2969	para-Dichlorobenzene	75	µg/L					0.5			E
2976	Vinyl Chloride	1	µg/L					0.5			E
2977	1,1-Dichloroethylene	7	µg/L					0.5			E
2979	trans-1,2-Dichloroethylene	100	µg/L					0.5			E
2980	1,2-Dichloroethane	3	µg/L					0.5			E
2981	1,1,1-Trichloroethane	200	µg/L					0.5			E
2982	Carbon tetrachloride	3	µg/L					0.5			E
2983	1,2-Dichloropropane	5	µg/L					0.5			E
2984	Trichloroethylene	3	µg/L					0.5			E
2985	1,1,2-Trichloroethane	5	µg/L					0.5			E
2987	Tetrachloroethylene	3	µg/L					0.5			E
2989	Monochlorobenzene	100	µg/L					0.5			E
2990	Benzene	1	µg/L					0.5			E
2991	Toluene	1,000	µg/L					0.5			E
2992	Ethylbenzene	700	µg/L					0.5			E
2996	Styrene	100	µg/L					0.5			E

NOTE: Results indicating non-detection with a reported lab MDL > .5 µg/L will not be accepted for compliance.

*Results must be reported with appropriate qualifiers in accordance with Florida Administrative Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, *, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

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SYNTHETIC ORGANICS

Report Number / Job ID:_____ PWS ID (from Page 1): _____

62-550.310(4)(b)

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	RDL	Extraction Date	Analysis Date	Analysis Time	DOH Lab Certification #
2005	Endrin	2	µg/L					0.01				E
2010	Lindane	0.2	µg/L					0.02				E
2015	Methoxychlor	40	µg/L					0.1				E
2020	Toxaphene	3	µg/L					1				E
2031	Dalapon	200	µg/L					1				E
2032	Diquat	20	µg/L					0.4				E
2033	Endothall	100	µg/L					9				E
2034	Glyphosate	700	µg/L					6				E
2035	Di(2-ethylhexyl)adipate	400	µg/L					0.6				E
2036	Oxamyl (Vydate)	200	µg/L					2				E
2037	Simazine	4	µg/L					0.07				E
2039	Di(2-ethylhexyl)phthalate	6	µg/L					0.6				E
2040	Picloram	500	µg/L					0.1				E
2041	Dinoseb	7	µg/L					0.2				E
2042	Hexachlorocyclopentadinene	50	µg/L					0.1				E
2046	Carbofuran	40	µg/L					0.9				E
2050	Atrazine	3	µg/L					0.1				E
2051	Alachlor	2	µg/L					0.2				E
2063	2,3,7,8-TCDD (Dioxin)	0.03	ng/L					0.005				E
2065	Heptachlor	0.4	µg/L					0.04				E
2067	Heptachlor Epoxide	0.2	µg/L					0.02				E
2105	2,4-D	70	µg/L					0.1				E
2110	2,4,5-TP (Silvex)	50	µg/L					0.2				E
2274	Hexachlorobenzene	1	µg/L					0.1				E
2306	Benzo(a)pyrene	0.2	µg/L					0.02				E
2326	Pentachlorophenol	1	µg/L					0.04				E
2383	Polychlorinated biphenyls (PCBs)	0.5	µg/L					0.1				E
2931	Dibromochloropropane	0.2	µg/L					0.02				E
2946	Ethylene Dibromide (EDB)	0.02	µg/L					0.01				E
2959	Chlordane	2	µg/L					0.2				E

NOTE: Results indicating non-detection with a reported lab MDL >50% of the MCL will not be accepted for compliance.

*Results must be reported with appropriate qualifiers in accordance with Florida Administrative Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, *, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.

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OTHER CONTAMINANTS

Report Number / Job ID: _____

PWS ID (From Page 1): _____

Contam ID	Contam Name	MCL	Units	Analysis Result	Qualifier*	Analytical Method	Lab MDL	Analysis Date	Analysis Time	DOH Lab Certification #
										E
										E
										E
										E
										E
										E
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*Results must be reported with appropriate qualifiers in accordance with Florida Administrative Code Rule 62-160, Table 1. Results qualified with A, F, H, N, O, T, Z, ?, *, are unacceptable for compliance with 62-550. Results qualified with a J, Q, R, or Y must be accompanied by written justification and will be evaluated on a case by case basis. To avoid a monitoring violation, unacceptable results must be replaced with acceptable results from samples collected during the same monitoring period.