

**MRDL Form 2**

**Quarterly Reporting Form for Chlorine and Chloramines Maximum Residual Disinfectant  
Level Running Annual Average (RAA)**

**PWSID #:** \_\_\_\_\_ **SYSTEM NAME:** \_\_\_\_\_ **DATE:** \_\_\_\_\_

**PREPARED BY:** \_\_\_\_\_ **TITLE:** \_\_\_\_\_

**SIGNATURE:** \_\_\_\_\_

			Column A	Column B	Column C
Month	Year	Number of Samples Taken	Monthly Average Chlorine or Chloramines (mg/L)	Quarterly Average Chlorine or Chloramines (mg/L)	Running Annual Average Chlorine or Chloramines (mg/L)
January	20__ __				
February	20__ __				
March	20__ __			Q1 =	
April	20__ __				
May	20__ __				
June	20__ __			Q2 =	
July	20__ __				
August	20__ __				
September	20__ __			Q3 =	
October	20__ __				
November	20__ __				
December	20__ __			Q4 =	
Running Annual Average =					

**MONITORING RECORDS MUST BE AVAILABLE UPON REQUEST**

**Instructions on Reverse**

This form is available at <http://www.cdphe.state.co.us/wq/drinkingwater/PublicWaterSystemReportingForms.html>

**INSTRUCTIONS FOR COMPLETING**  
***Quarterly Report for Chlorine and Chloramines Maximum Residual Disinfection Level***  
***Running Annual Average (RAA)***

**PLEASE READ THIS FIRST**

This form is for community and non-transient, non-community water systems that do not report residual disinfectant monitoring with EACH total coliform bacteria result. If the sampler writes the residual on the total coliform lab slip, there is no need to submit a MRDL Form 2 for compliance. The water system must confirm with their lab that the residuals are reported to the Division for EACH total coliform sample result.

When should a water system submit an MRDL Form 2?

1. If the sampler forgets to write the residual on each total coliform lab sample slip;
2. If the water system submits a summary of bacteria sampling instead of individual sample results (only appropriate for systems doing a high volume of sampling); or
3. If the laboratory does not transmit residuals to the state with each total coliform sample result.

**INSTRUCTIONS FOR MRDL FORM 2**

1. PWSID #: Enter the Public Water System (PWS) Identification Number assigned by CDPHE.
2. System Name: Enter system legal name provided to CDPHE when PWSID assigned.
3. Date: Enter the date that the final report is prepared and signed.
4. Prepared by: Print the name of the person completing the form.
5. Signature: The person that signs the form must be the legal owner or authorized representative of the legal owner. This signature certifies that the information submitted is correct and consistent with the written monitoring plan.
6. Year: Enter the reporting year.
7. Number of Samples Taken: Enter the total number of samples for chlorine and chloramines for each month of the reporting quarter.
8. Column A: Enter the average of all chlorine/chloramines residual levels for each month. Refer to MRDL Form 1, MRDL monthly worksheet.
9. Column B: For the current quarterly reporting period, enter into the Q1, Q2, Q3, or Q4 box the average monthly chlorine or chloramine residual for the months associated with the reporting quarter. For example, in Q1, sum the average chlorine or chloramine concentration reported for Jan, Feb and March, divide the sum by 3 and enter the result in the Q1 box.
10. Column C: Calculate the RAA (Running Annual Average) of the chlorine/chloramines residual levels for the four most recent quarters and enter the result in the last row of Column C titled: Running Annual Average.