

**COLORADO DEPARTMENT OF PUBLIC HEALTH AND ENVIRONMENT
WATER QUALITY CONTROL DIVISION - COMPLIANCE ASSURANCE SECTION**

CORRECTION FOR DISINFECTANT RESIDUAL REPORTING

WATER SYSTEM NAME: MEADOW MOUNTAIN WATER SUPPLY

PWSID #: CO - 0207504

Sample date	Total Coliform Sample Laboratory ID	Corresponding Chlorine/Chloramine Residual (mg/L)
02/01/10	S100331318	1-10 µg/L

In the future I will record the disinfectant residual and/or instruct sample collectors of the need to record disinfectant residuals on the laboratory paperwork for all required total coliform samples.

Printed Name RACHEL BARKWORTH

Signature R. C. Barkworth Date 03/30/10

Submit completed form to:

Email to melissa.mcclain@state.co.us ;

Fax: 303-758-1398 Attn: Melissa McClain, SW Team

Or Mail:

CDPHE_WQCD
ATTN: CADM-Compliance Response (Melissa McClain)
4300 Cherry Creek Drive South
Denver, CO 80246-1530