Colorado Department of Public Health and Environment

Haloacetic Acids Certified Laboratory Report Form
WQCD - Drinking Water CAS
Submit Online at http://www.wqcdcompliance.com/login

Revision: 4/13/2015

HAA5

Section I (to be completed by the Public Water Systems only)		Section II (to be completed by Laboratories only)	
Public Water System Information		**Laboratory Information**	
PWSID#: CO0207504	Facility ID:DS001	Laboratory ID: CO 0015	
System Name: Meadow Mtn Water Supply		Laboratory Name: Colorado Analytical Laboratory	
Contact Person: Steve Tedford	Phone #: 303-747-2066	Contact Person: Customer Service	Phone: 303-659-2313
Comments:		Comments:	

Section III (Supplied or Completed by PWS)			Section IV (Supplied or Completed by Certified Laboratory)							
Sample Date	Sample Pt ID On Schedule	Address - Location	Lab Receipt Date	Lab Analysis Date	Laboratory Sample ID #	Analyte	Analytical Method	MCL (ug/L)	Lab MRL (ug/L)	Result (ug/L)
9/12/17	DBP001	TRIPLE CREEK RANCH DALE DRIVE	9/13/17	9/16/17	170913074-01	Monochloroacetic Acid	EPA 552.2	N/A	1.0	1.1
						Monobromoacetic Acid	EPA 552.2	N/A	1.0	BDL
						Dichloroacetic Acid	EPA 552.2	N/A	1.0	26.8
						Trichloroacetic Acid	EPA 552.2	N/A	1.0	17.4
						Dibromoacetic Acid	EPA 552.2	N/A	1.0	BDL
						Total Haloacetic Acids	EPA 552.2	60	1.0	45.3

NT: Not Tested
Lab MRL: Laboratory Minimum Reporting Level
BDL: Below Laboratory MRL. A less than (<) may also used.

ug/L: Micrograms per Liter
MCL: Maximum Contaminant Level

9/21/17
170913074
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Y

Drinking Water Chain of Custody

Colorado Analytical LABORATORIES, INC.

Brighton Lab
240 South Main Street
Brighton, CO 80601

Lakewood Lab
12860 W. Cedar Dr, Suite 100A
Lakewood CO 80228

Phone: 303-659-2313
Fax: 303-659-2315

www.coloradolab.com

Report To Information	Bill To Information (If different from report to)	State Form / Project Information
Company Name: Meddow Mountain	Company Name: SAME	PWSID: 207504
Contact Name: Wate Sy Sten	Contact Name:	System Name: Meadow Mountain WS
Address:	Address:	Address:
City State Zip	City State Zip	City Allenspark State CO Zip 80510
Phone: Fax:	Phone: Fax:	County: Boulder
Email:	Email:	Compliance Samples: Yes [X] No [ ]
Sampler Name:	PO No.:	Send Forms to State: Yes [X] No [ ]

CAL Task No. 170913074

ARF

PHASE I, II, V Drinking Water Analyses (check analysis)

Date	Time	Client Sample ID / EP Code	No. of Containers	Residual Chlorine (mg/L) P/A Samples Only	Total Coliform P/A	504.1 EDB/DBCP	505 Pests/PCBs	515.4 Herbicides	524.2 VOCs	525.2 SOCs-Pest	531.1 Carbamates	547 Glyphosate	548.1 Endothall	549.2 Diquat	524.2 TTHMs	552.2 HAA5s	Lead/Copper	Nitrate	Nitrite	Fluoride	Inorganics	Alk./Lang. Index	TOC, DOC (Circle)	SUVA, UV 254 (Circle)	Subcontract Analyses: Gross Alpha/Beta	Radium 226	Radium 228	Radon	Uranium
9/12/17	1pm	Meadow Mtn	3												X														
9/12/17	1pm	" "	1													X													
			4																										

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Instructions: DEPOOL
Triple Creek Ranch Dale Drive

C/S Info: hand

Delivered Via: C/S Charge [ ]

Seals Present Yes [ ] No [X] Headspace Yes [ ] No [ ]

Temp. 9.0 °C /Ice Y Sample Pres. Yes [X] No [ ]

Relinquished By:	Date/Time:	Received By:	Date/Time:	Relinquished By:	Date/Time:	Received By:	Date/Time:
Beth Telford	9-13-17 -207	[signature]	9/13/17 1407				