



Massachusetts Department of Environmental Protection - Drinking Water Program **CIO<sub>4</sub>**

**Perchlorate Report**

(PWS) to help complete this form

PWS ID #: 1191000 City / Town: Monson  
 PWS Name: Monson Water & Sewer PWS Class: COM  NTNC  TNC

DEP LOCATION (LOC) ID#	DEP Location Name	Sample Information	Date Collected	Collected By
10009	Bunyan Rd. Wells	<input checked="" type="checkbox"/> (M)ultiple <input type="checkbox"/> (S)ingle	4-2-07	C. Jalbert
		<input type="checkbox"/> (R)aw <input checked="" type="checkbox"/> (F)inished		
Routine or Special Sample	Original or Resubmitted Report	If Resubmitted Report, list below:		
		(1) Reason for Resubmission	(2) Collection Date of Original Sample	
<input checked="" type="checkbox"/> RS <input type="checkbox"/> SS	<input checked="" type="checkbox"/> Original <input type="checkbox"/> Resubmitted	<input type="checkbox"/> Resample <input type="checkbox"/> Reanalysis <input type="checkbox"/> Report Correction		
SAMPLE NOTES - (Such as, if a Manifold/Multiple sample, list any sources that were on-line during collection).				

Primary Lab MA Cert. #: MA138 Primary Lab Name: Spectrum Analytical, Inc. Subcontracted? (Y/N) Y  
 Analysis Lab MA Cert. #: MNH023 Analysis Lab Name: Chemserve

CONTAMINANT	Result	UOM	MCL	MDL	MRL	Lab Method	Date Analyzed	Lab Sample ID#
PERCHLORATE	< 0.3	µg/L		0.3	1.0	314.0	4-9-07	SA60032-01
CONDUCTIVITY	117µmhos	µmhos/cm		1		SM2510B	4-9-07	SA60032-01

Perchlorate analysis requires the use of a Massachusetts DEP approved laboratory.  
 Perchlorate concentrations between the Minimum Detection Limit (MDL) and the Minimum Reporting Level (MRL) must be reported as estimated (J) values (i.e. perchlorate is positively present but tentatively quantified).  
 All field samples with measured native perchlorate concentrations between 0.8 µg/L and 2.0 µg/L must be retested with and without a perchlorate spike approximately equal to the native perchlorate concentration.

LAB SAMPLE NOTES

Reanalysis and Spike Recovery (required for results between 0.8 µg/L and 2.0 µg/L or samples subject to pretreatment in method EPA 314.0)

Compound	Result (µg/L)	MDL (µg/L)	MRL (µg/L)	Spike Concentration (µg/L)	Spike Recovery (%)	Lab Method	Date Analyzed
Perchlorate (reanalysis)							
Perchlorate (spike)							

I certify under penalties of law that I am the person authorized to fill out this form and the information contained herein is true, accurate and complete to the best extent of my knowledge.

Primary Lab Director Signature: [Signature]  
 Date: 4/12/07

If not submitting these results electronically, mail TWO copies of this report to your DEP Regional Office no later than 10 days after the end of the month in which you received this report or no later than 10 days after the end of the reporting period, whichever is sooner.

DEP REVIEW STATUS (Initial & Date)	Review Comments	<input type="checkbox"/> WQTS Data Entered
<input type="checkbox"/> Accepted _____ <input type="checkbox"/> Disapproved _____		