



# Drinking Water and Groundwater Bureau Analysis Request Form

March 16, 2025

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## Groundwater Rule - Triggered Monitoring - Confirmation Samples

**PWS ID:** 1612010

**Collected By:** \_\_\_\_\_

(Print Name)

**System Name:** PARADISE SHORES

**Signature:** \_\_\_\_\_

I certify that all samples taken are from the site(s) listed below and all information provided on this form to the lab is valid.

**PWS Town:** MOULTONBOROUGH

**Phone Number:** \_\_\_\_\_

**Results for the month of:** \_\_\_\_\_ **Year:** \_\_\_\_\_

**Sample Type:**      **Confirmation**      **Make-up**  
                     

Site ID	Sample Site Location	Date & Time Sample Collected	Lab Sample ID	Date & Time Sample SETUP / PREPARED	Date & Time Sample READ / ANALYZED	Total Coliform Count / P or A	E. coli Count / P or A	Method
G6	BRW 5 /W OF UPR PH AT ACCESS RD STA 890'							
G6	BRW 5 /W OF UPR PH AT ACCESS RD STA 890'							
G6	BRW 5 /W OF UPR PH AT ACCESS RD STA 890'							
G6	BRW 5 /W OF UPR PH AT ACCESS RD STA 890'							
G6	BRW 5 /W OF UPR PH AT ACCESS RD STA 890'							

**FOR LAB USE:** Temp C (upon receipt): \_\_\_\_\_ On Ice? Y / N Batch ID (if different than sample ID prefix): \_\_\_\_\_ List QUALIFIERS (if any): \_\_\_\_\_

**Relinquished by:** \_\_\_\_\_ **Received by:** \_\_\_\_\_ **Date/Time:** \_\_\_\_\_

**Relinquished by:** \_\_\_\_\_ **Received at Lab by:** \_\_\_\_\_ **Date/Time:** \_\_\_\_\_

**Lab Conducting Analysis:** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Lab Accred. ID:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Reporting Lab (if different):** \_\_\_\_\_ **Signature:** \_\_\_\_\_ **Lab Accred. ID:** \_\_\_\_\_ **Phone:** \_\_\_\_\_

**Results must be reported to DES within 2 business days of analysis completion unless acute contaminants are present/exceeded which must be reported within 24 hours.**



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Site ID	Sample Site Location	Date & Time Sample Collected	Lab Sample ID	Date & Time Sample SETUP / PREPARED	Date & Time Sample READ / ANALYZED	Total Coliform Count / P or A	E. coli Count / P or A	Method
G7	BRW 6 /W OF UPR PH 250' SW ACCESS RD 360'							
G7	BRW 6 /W OF UPR PH 250' SW ACCESS RD 360'							
G7	BRW 6 /W OF UPR PH 250' SW ACCESS RD 360'							
G7	BRW 6 /W OF UPR PH 250' SW ACCESS RD 360'							
G7	BRW 6 /W OF UPR PH 250' SW ACCESS RD 360'							

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**Results for the month of:** \_\_\_\_\_ **Year:** \_\_\_\_\_

**Sample Type:**      **Confirmation**      **Make-up**  
                     

Site ID	Sample Site Location	Date & Time Sample Collected	Lab Sample ID	Date & Time Sample SETUP / PREPARED	Date & Time Sample READ / ANALYZED	Total Coliform Count / P or A	E. coli Count / P or A	Method
G8	MT ROBERTS BRW 2/620'SE OF EMERSON PTH TNK							
G8	MT ROBERTS BRW 2/620'SE OF EMERSON PTH TNK							
G8	MT ROBERTS BRW 2/620'SE OF EMERSON PTH TNK							
G8	MT ROBERTS BRW 2/620'SE OF EMERSON PTH TNK							
G8	MT ROBERTS BRW 2/620'SE OF EMERSON PTH TNK							

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Confirmation      Make-up

Sample Type:

Site ID	Sample Site Location	Date & Time Sample Collected	Lab Sample ID	Date & Time Sample SETUP / PREPARED	Date & Time Sample READ / ANALYZED	Total Coliform Count / P or A	E. coli Count / P or A	Method
G10	MT ROBERTS BRW 4/865'NE OF EMERSON PTH TNK							
G10	MT ROBERTS BRW 4/865'NE OF EMERSON PTH TNK							
G10	MT ROBERTS BRW 4/865'NE OF EMERSON PTH TNK							
G10	MT ROBERTS BRW 4/865'NE OF EMERSON PTH TNK							
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