

Environment 1, Incorporated

P.O. Box 7085, 114 Oakmont Drive
Greenville, NC 27835-7085

Laboratory ID#: 37715

Phone: (252) 756-6208

Fax: (252) 756-0633

Client ID#: _____

Radiological Analysis

Note: ALL information must be supplied for compliance credit

WATER SYSTEM ID#: _____ - _____ - _____

County: _____

Name of Water System: _____

Sample Type: Single Sample-Entry Point Composite Sample-Entry Point Special/Non-compliance

Location Where Collected: _____

Facility ID No. _____

Location Code: _____

Collected By: _____

Mail Results to (water system representative):

Phone: (____) _____ - _____

Fax #: (____) _____ - _____

Email:

<u>Period</u>	<u>Collection Date</u>	<u>Collection Time</u>
Single/ 1st Qtr	____/____/____	____:____ AM or PM
2nd Qtr	____/____/____	____:____ AM or PM
3rd Qtr	____/____/____	____:____ AM or PM
4th Qtr	____/____/____	____:____ AM or PM

All Parameters

Alpha

Radium 226

Radium 228

Uranium

Received On:

Temp: _____ Celsius