

Environment 1, Incorporated

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Greenville, NC 27835-7085

Laboratory ID#: 37715

Phone: (252) 756-6208

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Client ID#: _____

**Total Organic Carbon Requirements
(TOC's)
Disinfection Byproducts Precursor Analysis**

Note: ALL information must be supplied for compliance credit

WATER SYSTEM ID#: _____ - _____ - _____

County: _____

Name of Water System: _____

Sample Type: Source Water Treated Water Special/Non-compliance

Location Where Collected: _____

Facility ID No. ____ ____ ____

Location Code: ____ ____ ____

Collected By: _____

Collection Date	Collection Time
____/____/____	____:____ AM or PM

Mail Results to (water system representative):

Phone: (____) _____ - _____

Fax #: (____) _____ - _____

Email: _____

Total Organic Carbon Dissolved Organic Carbon Alkalinity Ultraviolet Absorption 254 (UV254)

Received On:

Temp: _____ Celsius