



**DRINKING WATER ANALYSIS REPORTING FORM  
STAGE 2 DISINFECTION BYPRODUCTS (TTHM&HAA5)**  
\*\*\* Point of Use (POU) Only \*\*\*

**\*\*\* PUBLIC WATER SYSTEM INFORMATION \*\*\***  
>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

[ \_\_\_\_\_ ]  
**PWS ID Number**

[ \_\_\_\_\_ ] [ \_\_\_\_\_ : \_\_\_\_\_ ]  
**Sample Date**                      **Sample Time** (24HR CLOCK)

\_\_\_\_\_ **PWS Name**

\_\_\_\_\_ **Owner/Contact Person**

( \_\_\_\_\_ )  
**Owner/Contact Phone Number**

\_\_\_\_\_ **Owner/Contact Email Address**

**SAMPLE TYPE**  
 Compliance Monitoring

**POINT OF USE ID (TTHM / HAA5):**

\_\_\_\_\_

(Taken from Stage 2 Compliance Monitoring Plan - Ex. 01-A)

**STAGE 2 Compliance Monitoring POU Site ID:**

\_\_\_\_\_

(Taken from Stage 2 Compliance Monitoring Plan  
Ex. 1234 Main St. Tap)

**\*\*\* DISINFECTION BYPRODUCTS ANALYSIS \*\*\***  
>>> TO BE COMPLETED BY LABORATORY PERSONNEL <<<

Analysis Method	MCL	Reporting Limit	Contaminant Name	Cont. Code	Analysis Run Date	Result	Exceeds MCL
_____		< 0.0010	Chloroform	2941	_____	_____	
_____		< 0.0010	Bromoform	2942	_____	_____	
_____		< 0.0010	Bromodichloromethane	2943	_____	_____	
_____		< 0.0010	Dibromochloromethane	2944	_____	_____	
_____	0.080		<b>TTHM</b>	2950	_____	_____	<input type="checkbox"/>
_____		< 0.0020	Monochloroacetic Acid	2450	_____	_____	
_____		< 0.0010	Dichloroacetic Acid	2451	_____	_____	
_____		< 0.0010	Trichloroacetic Acid	2452	_____	_____	
_____		< 0.0010	Monobromoacetic Acid	2453	_____	_____	
_____		< 0.0010	Dibromoacetic Acid	2454	_____	_____	
_____	0.060		<b>HAA5</b>	2456	_____	_____	<input type="checkbox"/>

**\*\*\* LABORATORY INFORMATION \*\*\***  
>>> TO BE COMPLETED BY LABORATORY PERSONNEL <<<

[ \_\_\_\_\_ ]  
**Specimen Number**

\_\_\_\_\_ **Comment** [ \_\_\_\_\_ ]

Lab ID Number [AZ \_\_\_\_\_]      Lab Name [ \_\_\_\_\_ ]      Phone Number [ \_\_\_\_\_ ]

Lab Contact, Printed Name [ \_\_\_\_\_ ]      Authorized Signature [ \_\_\_\_\_ ]

PWS Notification Date [ \_\_\_\_\_ ]      PWS Person Notified [ \_\_\_\_\_ ]

All units must be reported in milligrams per liter (mg/L)  
DWAR 32POU: Rev 12/2017

**Submit completed form to:**  
EMAIL: [WQD\\_Compliance\\_Data@azdeq.gov](mailto:WQD_Compliance_Data@azdeq.gov) -or- MAIL: ADEQ Water Quality Compliance Data Unit (MC 5415B-1), 1110 W. Washington St., Phoenix, AZ 85007.  
For questions call: (602) 771-9200