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RESIDENTIAL DRINKING WATER SAMPLING DIRECTIONS

Eurofins Spectrum Analytical provides testing services for a comprehensive range of contaminants. Testing packages are available or may be requested ala carte as needed. For a complete listing of parameters, please contact our Quality Service Department at clientservicesdept@spectrum-analytical.com or (800) 789-9115. Your local health department can advise you as to possible contaminants of concern in your area and recommended sampling parameters and frequency.

Taking a Water Sample

The source of the private water supply shall be sampled directly or sampled from a cold water faucet supplying water for domestic purposes that is located within the building. The bathroom sink is the faucet of choice, if that is unavailable the kitchen sink is the next best choice. If water treatment is provided the sample should be collected prior to any treatment.

1. Before drawing a water sample, first remove any attachment screen, filter, aerator, or purification device from the faucet opening.

2. Wash hands thoroughly before opening any containers and use gloves provided.

3. If the well is used on a regular daily basis let the cold water run at full flow for 10 minutes prior to sampling. If the well has not been used for several days, the cold water should be run for at least 30 minutes. The objective is to sample water that is freshly drawn from the well. If well has recently been disinfected/chlorinated, make sure all traces of chlorine have been flushed out of the well**.**

4. Reduce flow to a pencil sized stream and fill sample containers as directed.

   Sampling Containers - Three containers are normally provided for potability scan sampling as follows:

   - 120ml Sterile Plastic Bottle: fill to the 100ml-fill line, this bottle is to be used for the bacterial analysis of the water sample. In order to avoid contaminating the sample, you must be careful not to touch either the inside of the bottle or the inside surface of its cap. Carefully remove the cap and then fill the bottle to just above the 100ml line with a sample of the running water from the faucet. Replace the cap immediately. *Please note that coliform samples are tested for the presence of chlorine. Any sample found to contain chlorine will be invalidated.
   - 1L Amber Glass: fill to the neck with the water sample after allowing the water to run for the required amount of time as described above.
   - 500ml Plastic: fill to the neck with the water sample after allowing the water to run for the required amount of time as described above.

   Sampling for Volatile Organic Compounds (VOCs) – You may inquire with your local Director of Health whether testing for the presence of VOCs is recommended.

   - If sampling for VOCs is required, Spectrum Analytical, Inc will supply three (3) 40-ml amber vials for this purpose. Please use caution, vials contain hydrochloric acid. Do not rinse out vials. Turn tap to a slow flow and fill each vial until it is actually above the rim. Immediately replace the cap tightly taking care not to trap any air inside the container. If any air bubbles are detected, do not reopen vials once they have been capped in order to minimize volatile loss.

5. Fill out Chain of Custody Document and labels with appropriate information and affix labels to sample containers.

6. Keep sample on ice and transport to laboratory facility as soon as possible. *Please note that some of the analysis must be conducted within 24 hours of sample collection*.

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Care and Delivery of Drinking Water Samples

Samples must be kept cool, below 42.8°F or 6°C but not frozen, and transport them to the laboratory facility as soon as possible. ***Please note that some analysis must be started within 24 hours of sample collection***. Drinking water samples will be accepted Monday through Thursday only. If shipping is required, the sample must be sent by overnight delivery service. A cooler is recommended for shipping purposes. Samples must be iced and properly insulated against freezing, excessive heat, and breakage. The requisite fee must be paid by check or money order only (cash or credit cards are not accepted) at time of sample receipt by Eurofins Spectrum Analytical.

Chain of Custody Documentation

Owner of Property Sampled: _____ Phone: _____

Address: _____ City: _____ State: ____

Report To: _____ _____ _____ _____ Telephone #: _____ Email: _____	Invoice To: _____ _____ _____ _____ Telephone #: _____ Email: _____

Lab ID:	Sampling Point:	Date:	Time:	Collected by:

Containers provided:

# of Sterile Jars	
# of Amber Glass	
# of Clear Glass	
# of Plastic	
# of VOA Vials with HCl	

Tests Requested:

☐ Potability Scan Package	☐ Title 5 scan
☐ Total coliforms	☐ VOCs by 524.2
☐ Nitrate	☐ Nitrite
☐ Other:	

Relinquished by: _____ Received by: _____ Date/Time: _____

Lab Use Only

Temp °C	Condition upon receipt:
Observed	Custody Seals: ☐ Present ☐ Intact ☐ Broken
Correction Factor	☐ Ambient ☐ Iced
Corrected	
IR ID #	

Paid by Check # _____ Amount received: _____ Date: _____

Sample shipping address: 11 Almgren Drive • Agawam, MA 01001 • 413-789-9018

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