

# DRINKING WATER ANALYSIS

Village of Blissfield W.T.P. Laboratory MDEQ ID#0750  
1330 Beamer Rd. Blissfield, MI. 49228 (517) 486-3350

COMPLETE FOR ALL SAMPLES (Please Print)

WSSN or Pool ID# <b>004490</b>	Chlorinated? Yes <input type="radio"/> No <input checked="" type="radio"/>	Cl- Residual mg/L
Sample Collector Name <b>KIPP SCOTT</b>	Date Collected <b>7-1-2020</b>	Time Collected <b>11:45</b>
System/ Owner Name <b>CITY OF MORENCI</b>		Collection Site (street address) <b>485 W. MAIN</b>
City/Twp <b>MORENCI</b>	State <b>MI</b>	County <b>LENGUWA</b>
Zip <b>49256</b>		
Sampling Point (kitchen, bath, etc.) <b>Well # 2 Sample Top</b>		Phone Number <b>517-438-0886</b>

REPORT RESULTS TO: (please print)

Name
Address
City
State
Zip
Signature

PD  CH  PS  PU  TX  FX

DO NOT WRITE IN SHADED AREA (LABORATORY USE ONLY)

Received in Lab Date: <b>7/1/2020</b>	Time: <b>14:48</b>	In: <b>1500</b>	Out: <b>1542</b>	Incubator Time	Sample ID# <b>7731</b>	Comment
Analysis				Result		
<b>BACTERIOLOGICAL</b>						
Coliform				Neg		
MF				No coliform or E-c detected		
HPC						
E. coli Enumeration						
<b>CHEMICAL</b>						
Chlorine				A TRUE COPY		
Fluoride				VILLAGE OF BLISSFIELD		
Nitrate				WTP		

The analyses performed by the Blissfield Drinking Water Laboratory were conducted using methods approved by the U.S.E.P.A. and other regulatory agencies as appropriate.

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COMPLETE FOR ALL SAMPLES (Please Print)

WSSN or Pool ID# <b>004490</b>	Chlorinated? Yes <input type="radio"/> No <input checked="" type="radio"/>	Cl- Residual mg/L
Sample Collector Name <b>KIPP SCOTT</b>	Date Collected <b>7-1-2020</b>	Time Collected <b>11:35</b>
System/ Owner Name <b>CITY OF MORENCI</b>		Collection Site (street address) <b>485 W. MAIN</b>
City/Twp <b>MORENCI</b>	State <b>MI</b>	County <b>LENGUWA</b>
Zip <b>49256</b>		
Sampling Point (kitchen, bath, etc.) <b>Well # 1 Sample Top</b>		Phone Number <b>517 438 0886</b>

REPORT RESULTS TO: (please print)

Name <b>CITY OF MORENCI</b>
Address <b>118 ORCHARD ST,</b>
City <b>MORENCI</b>
State <b>MI</b>
Zip <b>49256</b>
Signature

PD  CH  PS  PU  TX  FX

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Received in Lab Date: <b>7/1/2020</b>	Time: <b>14:48</b>	In: <b>1500</b>	Out: <b>1542</b>	Incubator Time	Sample ID# <b>7730</b>	Comment
Analysis				Result		
<b>BACTERIOLOGICAL</b>						
Coliform				Neg		
MF				No coliform or E-c detected		
HPC						
E. coli Enumeration						
<b>CHEMICAL</b>						
Chlorine				A TRUE COPY		
Fluoride				VILLAGE OF BLISSFIELD		
Nitrate				WTP		

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COMPLETE FOR ALL SAMPLES (Please Print)

WSSN or Pool ID# <b>004490</b>	Chlorinated? <input checked="" type="radio"/> Yes <input type="radio"/> No	Cl- Residual <del>0.90 FREE</del> mg/L <b>0.97 Total</b>
Sample Collector Name <b>KIPP SCOTT</b>	Date Collected <b>7-1-2020</b>	Time Collected <b>13:20</b>
System/ Owner Name <b>City of Morenci</b>	Collection Site (street address) <b>597 W. CHESTNUT</b>	
City/Twp. <b>Morenci</b>	State <b>MI</b>	County <b>LEAUVILLE</b>
		Zip <b>49256</b>
Sampling Point (kitchen, bath, etc.) <b>Bath FAUCET</b>	Phone Number <b>517-438-0886</b>	

REPORT RESULTS TO: (please print)

Name <b>City of Morenci</b>	Address <b>118 ORCHARD ST,</b>		
City <b>Morenci</b>	State <b>MI</b>	Zip <b>49256</b>	
Signature	PD <input type="checkbox"/> CH <input checked="" type="checkbox"/> PS <input checked="" type="checkbox"/> PU <input type="checkbox"/> TX <input type="checkbox"/> FX <input type="checkbox"/>		

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Received in Lab Date: <b>7/1/2020</b> Time: <b>14:48</b>	Incubator Time In: <b>1500</b> Out: <b>1542</b>	Sample ID# <b>7732</b>	Comment
Analysis Result	Analyst <b>Madhavi</b>	No coliform or E-c detected	
<b>BACTERIOLOGICAL</b>			
Coliform	<b>Neg</b>	<b>A TRUE COPY</b> VILLAGE OF BLISSFIELD WTP	
MF			
HPC			
E. coli Enumeration			
<b>CHEMICAL</b>			
Chlorine			
Fluoride			
Nitrate			

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WSSN or Pool ID# <b>004490</b>	Chlorinated? <input checked="" type="radio"/> Yes <input type="radio"/> No	Cl- Residual <del>0.85 FREE</del> mg/L <b>0.92 Total</b>
Sample Collector Name <b>KIPP SCOTT</b>	Date Collected <b>7-1-2020</b>	Time Collected <b>13:45</b>
System/ Owner Name <b>City of Morenci</b>	Collection Site (street address) <b>118 ORCHARD ST,</b>	
City/Twp. <b>Morenci</b>	State <b>MI</b>	County <b>LEAUVILLE</b>
		Zip <b>49256</b>
Sampling Point (kitchen, bath, etc.) <b>Bath FAUCET</b>	Phone Number <b>517-438-0886</b>	

REPORT RESULTS TO: (please print)

Name <b>City of Morenci</b>	Address <b>118 ORCHARD ST,</b>		
City <b>Morenci</b>	State <b>MI</b>	Zip <b>49256</b>	
Signature	PD <input type="checkbox"/> CH <input checked="" type="checkbox"/> PS <input checked="" type="checkbox"/> PU <input type="checkbox"/> TX <input type="checkbox"/> FX <input type="checkbox"/>		

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Received in Lab Date: <b>7/1/2020</b> Time: <b>14:48</b>	Incubator Time In: <b>1500</b> Out: <b>1542</b>	Sample ID# <b>7733</b>	Comment
Analysis Result	Analyst <b>Madhavi</b>	No coliform or E-c detected	
<b>BACTERIOLOGICAL</b>			
Coliform	<b>Neg</b>	<b>A TRUE COPY</b> VILLAGE OF BLISSFIELD WTP	
MF			
HPC			
E. coli Enumeration			
<b>CHEMICAL</b>			
Chlorine			
Fluoride			
Nitrate			

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