

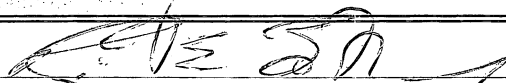
**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: <u>4122000</u>	PWS Name: <u>Hanover Water Dept.</u>	Town: <u>Hanover</u>	Sample Code ¹ :	
State Certified Laboratory: ANALYTICAL BALANCE CORP.			Certified Lab #: M-MA022	
Lead Anal. Method: <u>SM 3113 B</u>	Lead Detection Limit: <u>0.001 mg/L</u>	Copper Anal. Method: <u>EPA 200.8</u>	Copper Detection Limit: <u>0.02 mg/L</u>	
# of Samples Required ¹ : <u>60</u>	# of Samples Submitted ¹ : <u>62</u>	90 th Percentile Lead ¹ : <u>.003</u>	90 th Percentile Copper ¹ : <u>.37</u>	

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
32680-01	2/12/02	<u>1</u>	52 Saltwind	ND	2/13/02	0.12	2/13/02
32680-02	2/12/02	<u>1</u>	14 Maple Ave	ND	2/13/02	0.23	2/13/02
32680-03	2/12/02	<u>1</u>	31 Tilden Lane	ND	2/13/02	0.11	2/13/02

Sample Code	PLEASE NOTE THE FOLLOWING:
1 First Sampling Period	<p>Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period.</p> <p>¹ This section is to be filled out by the water supplier.</p> <p>² See DEP Lead & Copper sampling plan for approved sampling locations.</p>
2 Second Sampling Period	
3 Reduced - Annual	
4 Reduced - Every Three Years	
5 LSL Replacement Program	
6 Demonstration	

Remarks: _____


19 Feb 02
 Water Supplier or Laboratory Director Signature / Date

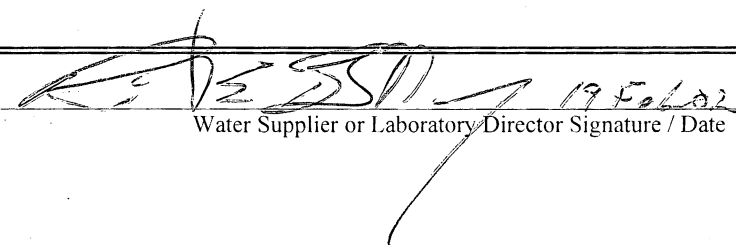
**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: <u>4122000</u>	PWS Name: <u>Hanover Water Dept.</u>	Town: <u>Hanover</u>	Sample Code ¹ :
State Certified Laboratory: ANALYTICAL BALANCE CORP.			Certified Lab #: M-MA022
Lead Anal. Method: SM 3113 B	Lead Detection Limit: 0.001 mg/L	Copper Anal. Method: EPA 200.8	Copper Detection Limit: 0.02 mg/L
# of Samples Required ¹ :	# of Samples Submitted ¹ :	90 th Percentile Lead ¹ :	90 th Percentile Copper ¹ :

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
32732	2/13/02	1	24 Briarwood Drive	0.001	2/14/02	0.24	2/14/02

Sample Code		PLEASE NOTE THE FOLLOWING:
1	First Sampling Period	<p>Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period.</p> <p>¹ This section is to be filled out by the water supplier.</p> <p>² See DEP Lead & Copper sampling plan for approved sampling locations.</p>
2	Second Sampling Period	
3	Reduced - Annual	
4	Reduced - Every Three Years	
5	LSL Replacement Program	
6	Demonstration	

Remarks: _____


 Water Supplier or Laboratory Director Signature / Date

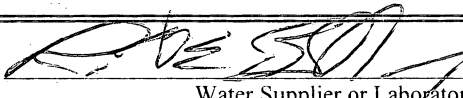
**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: <u>4122000</u>	PWS Name: <u>Hanover Water Dept.</u>	Town: <u>Hanover</u>	Sample Code ¹ :
State Certified Laboratory: ANALYTICAL BALANCE CORP.			Certified Lab #: M-MA022
Lead Anal. Method: SM 3113 B	Lead Detection Limit: 0.001 mg/L	Copper Anal. Method: EPA 200.8	Copper Detection Limit: 0.02 mg/L
# of Samples Required ¹ : <u>2</u>	# of Samples Submitted ¹ : <u>5</u>	90 th Percentile Lead ¹ : <u>0.009</u>	90 th Percentile Copper ¹ : <u>0.32</u>

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
32857-01	2/15/2002	I	Cedar School - Kitchen	ND ✓	2/21/2002	0.02	2/21/2002
32857-02	2/14/2002	I	443 King Street	ND	2/21/2002	0.52	2/21/2002
32857-03	2/13/2002	I	152 Long Water Drive	ND	2/21/2002	0.32 ✓	2/21/2002
32857-04	2/13/2002	I	40 Saltwind Drive	ND	2/21/2002	0.29	2/21/2002
32857-05	2/15/2002	I	Center School - bubbler	0.009	2/21/2002	0.32	2/21/2002

Sample Code	PLEASE NOTE THE FOLLOWING:
1 First Sampling Period	<p>Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period.</p> <p>¹ This section is to be filled out by the water supplier.</p> <p>² See DEP Lead & Copper sampling plan for approved sampling locations.</p>
2 Second Sampling Period	
3 Reduced - Annual	
4 Reduced - Every Three Years	
5 LSL Replacement Program	
6 Demonstration	

Remarks: _____


27 Feb 02
 Water Supplier or Laboratory Director Signature / Date

**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS ID.: 4122000 PWS Name: Hanover Water Dept. Town: Hanover Sample Code¹: _____

State Certified Laboratory: **ANALYTICAL BALANCE CORP.** Certified Lab #: **M-MA022**

Lead Anal. Method: SM3113 B Lead Detection Limit: 0.001 mg/L Copper Anal. Method: EPA 200.8 Copper Detection Limit: 0.02 mg/L

of Samples Required¹: _____ # of Samples Submitted¹: _____ 90th Percentile Lead¹: _____ 90th Percentile Copper¹: _____

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
33443	3/06/02		348 Old Farm Road	0.002	3/19/02	0.12	3/19/02

Sample Code		PLEASE NOTE THE FOLLOWING:
1	First Sampling Period	<p>Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period.</p> <p>¹ This section is to be filled out by the water supplier.</p> <p>² See DEP Lead & Copper sampling plan for approved sampling locations.</p>
2	Second Sampling Period	
3	Reduced - Annual	
4	Reduced - Every Three Years	
5	LSL Replacement Program	
6	Demonstration	

Remarks: _____


 2 April '02
 Water Supplier or Laboratory Director Signature / Date

**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: 4122000 PWS Name: Hanover Water Dept. Town: Hanover Sample Code¹: _____

State Certified Laboratory: **ANALYTICAL BALANCE CORP.** Certified Lab #: **M-MA022**

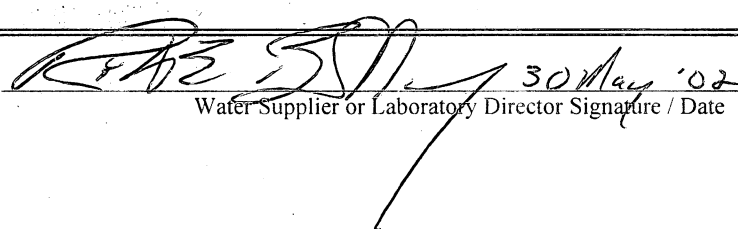
Lead Anal. Method: SM 3113 B Lead Detection Limit: 0.001 mg/L Copper Anal. Method: EPA 200.8 Copper Detection Limit: 0.02 mg/L

of Samples Required¹: _____ # of Samples Submitted¹: _____ 90th Percentile Lead¹: _____ 90th Percentile Copper¹: _____

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
35569-01	5/22/02	1	101 Shingle Mill Lane	ND	5/22/02	0.11	5/22/02
35569-02	5/22/02	1	44 Ash Lane	0.001	5/22/02	0.24	5/22/02
35569-03	5/22/02	1	41 Fair Acres Drive	ND	5/22/02	0.06	5/22/02
35569-04	5/22/02	1	26 Longwater Drive	ND	5/22/02	0.2	5/22/02
35569-05	5/22/02	1	19 Aspen Drive	ND	5/22/02	0.29	5/22/02
35569-06	5/22/02	1	89 Cedar Street	ND	5/22/02	0.11	5/22/02
35569-07	5/22/02	1	40 Baily Road	ND	5/22/02	0.16	5/22/02
35569-08	5/22/02	1	8 Baily Road	0.001	5/22/02	0.17	5/22/02
35569-09	5/22/02	1	116 Dwelly Ave.	ND	5/22/02	0.04	5/22/02
35569-10	5/22/02	1	40 Longwater Drive	0.004	5/22/02	0.15	5/22/02

Sample Code		PLEASE NOTE THE FOLLOWING:
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2	Second Sampling Period	
3	Reduced - Annual	
4	Reduced - Every Three Years	
5	LSL Replacement Program	
6	Demonstration	

Remarks: _____



 Water Supplier or Laboratory Director Signature / Date

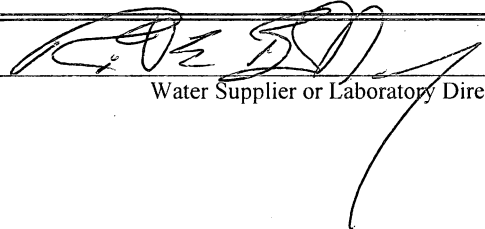
**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: <u>4122000</u>		PWS Name: <u>Hanover Water Dept.</u>		Town: <u>Hanover</u>		Sample Code ¹ :	
State Certified Laboratory: ANALYTICAL BALANCE CORP.						Certified Lab #: M-MA022	
Lead Anal. Method: SM 3113 B		Lead Detection Limit: 0.001 mg/L		Copper Anal. Method: EPA 200.8		Copper Detection Limit: 0.02 mg/L	
# of Samples Required ¹ :		# of Samples Submitted ¹ :		90 th Percentile Lead ¹ :		90 th Percentile Copper ¹ :	

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
35569-11	5/22/02	1	99 Dwelley Ave.	0.001	5/22/02	0.6	5/22/02
35569-12	5/22/02	1	307 Old Farm Road	ND	5/22/02	0.18	5/22/02
35569-13	5/22/02	1	291 Old Farm Road	ND	5/22/02	0.21	5/22/02
35569-14	5/22/02	1	18 Damon Road	ND	5/22/02	0.18	5/22/02
35569-15	5/22/02	1	1010 Main Street	0.001	5/22/02	0.12	5/22/02
35569-16	5/22/02	1	339 Old Farm Road	ND	5/22/02	0.18	5/22/02
35569-17	5/22/02	1	29 Teresa Lane	ND	5/22/02	0.11	5/22/02
35569-18	5/22/02	1	88 Salt Winds Drive	0.004	5/22/02	0.04	5/22/02

Sample Code	PLEASE NOTE THE FOLLOWING:
1 First Sampling Period	<p>Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period.</p> <p>¹ This section is to be filled out by the water supplier.</p> <p>² See DEP Lead & Copper sampling plan for approved sampling locations.</p>
2 Second Sampling Period	
3 Reduced - Annual	
4 Reduced - Every Three Years	
5 LSL Replacement Program	
6 Demonstration	

Remarks: _____


30 May '02
 Water Supplier or Laboratory Director Signature / Date

**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: 41220001 PWS Name: Hanover Water Dept. Town: Hanover Sample Code¹: _____

State Certified Laboratory: **ANALYTICAL BALANCE CORP.** Certified Lab #: **M-MA022**

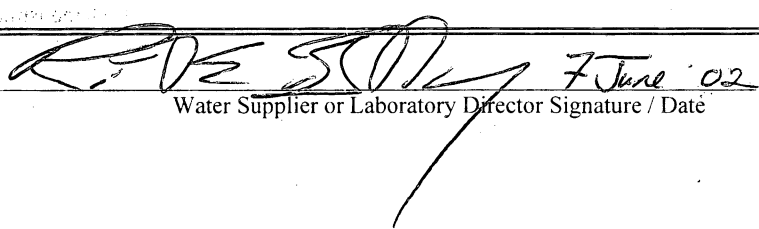
Lead Anal. Method: SM 3113-B Lead Detection Limit: 0.001 mg/L Copper Anal. Method: EPA 200.8 Copper Detection Limit: 0.02 mg/L

of Samples Required¹: _____ # of Samples Submitted¹: _____ 90th Percentile Lead¹: _____ 90th Percentile Copper¹: _____

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
35799-01	5/22/02	1	135 Great Rock Road	0.002	5/31/02	0.16	5/31/02
35799-02	5/24/02	1	125 Cedar Street	ND	5/31/02	0.09	5/31/02
35799-03	5/24/02	1	122 Great Rock Road	0.002	5/31/02	0.20	5/31/02
35799-04	5/24/02	1	199 Hearth Stone Drive	0.002	5/31/02	0.10	5/31/02
35799-05	5/29/02	1	184 Larchmont Lane	0.002	5/31/02	0.07	5/31/02

Sample Code	PLEASE NOTE THE FOLLOWING:
1 First Sampling Period	<p>Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period.</p> <p>¹ This section is to be filled out by the water supplier.</p> <p>² See DEP Lead & Copper sampling plan for approved sampling locations.</p>
2 Second Sampling Period	
3 Reduced - Annual	
4 Reduced - Every Three Years	
5 LSL Replacement Program	
6 Demonstration	

Remarks: _____

 7 June 02
Water Supplier or Laboratory Director Signature / Date

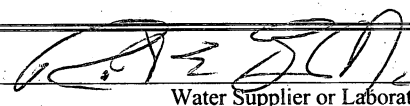
**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: <u>4122000</u>	PWS Name: <u>Hanover Water District</u>	Town: <u>Hanover</u>	Sample Code ¹ : _____
State Certified Laboratory: ANALYTICAL BALANCE CORP.		Certified Lab #: M-MA022	
Lead Anal. Method: EPA 200.8	Lead Detection Limit: 0.001 mg/L	Copper Anal. Method: EPA 200.8	Copper Detection Limit: 0.02 mg/L
# of Samples Required ¹ :	# of Samples Submitted ¹ :	90 th Percentile Lead ¹ :	90 th Percentile Copper ¹ :

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
36289-01	06/05/02		100 Great Rock Rd.	ND	06/12/02	0.27	06/12/02
36289-02	06/05/02		92 Shingle Mill Lane	ND	06/12/02	0.12	06/12/02
36289-03	06/05/02		46 Great Rock Rd.	ND	06/12/02	0.26	06/12/02
36289-04	06/05/02		48 Briarwood Dr.	0.001	06/12/02	0.13	06/12/02
36289-05	06/05/02		124 Stonegate Lane	ND	06/12/02	0.07	06/12/02
36289-06	06/05/02		210 Stonegate Lane	ND	06/12/02	0.07	06/12/02
36289-07	06/05/02		515 Main St.	ND	06/12/02	0.06	06/12/02
36289-08	06/05/02		20 Tindale Way	0.003	06/12/02	0.30	06/12/02
36289-09	06/05/02		465 King St.	0.001	06/12/02	0.12	06/12/02
36289-10	06/05/02		24 Shingle Mill Lane	ND	06/12/02	0.09	06/12/02

Sample Code	PLEASE NOTE THE FOLLOWING:
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2 Second Sampling Period	
3 Reduced - Annual	
4 Reduced - Every Three Years	
5 LSL Replacement Program	
6 Demonstration	

Remarks: _____

 14 June 02
 Water Supplier or Laboratory Director Signature / Date

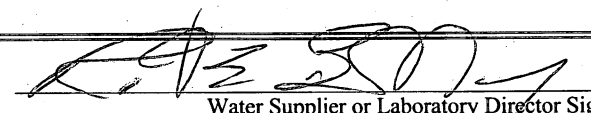
**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: <u>4122000</u>	PWS Name: <u>Hanover Water District</u>	Town: <u>Hanover</u>	Sample Code ¹ : _____
State Certified Laboratory: ANALYTICAL BALANCE CORP.			Certified Lab #: M-MA022
Lead Anal. Method: EPA 200.8	Lead Detection Limit: 0.001 mg/L	Copper Anal. Method: EPA 200.8	Copper Detection Limit: 0.02 mg/L
# of Samples Required ¹ : _____	# of Samples Submitted ¹ : _____	90 th Percentile Lead ¹ : _____	90 th Percentile Copper ¹ : _____

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
36289-11	06/05/02		90 Dwelley Ave.	0.002	06/12/02	0.15	06/12/02
36289-12	06/05/02		103 Briarwood Dr.	ND	06/12/02	0.09	06/12/02
36289-13	06/05/02		93 Maplewood Dr.	ND	06/12/02	0.12	06/12/02
36289-14	06/05/02		98 Hearthstone Way	ND	06/12/02	0.04	06/12/02
36289-15	06/05/02		19 Briarwood Dr.	0.001	06/12/02	0.16	06/12/02
36289-16	06/05/02		38 Tindale Way	ND	06/12/02	0.03	06/12/02

Sample Code	PLEASE NOTE THE FOLLOWING:
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2 Second Sampling Period	
3 Reduced - Annual	
4 Reduced - Every Three Years	
5 LSL Replacement Program	
6 Demonstration	

Remarks: _____


 14 June 02
 Water Supplier or Laboratory Director Signature / Date

**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: 4122000 PWS Name: Hanover Water Dept. Town: Hanover Sample Code¹: _____

State Certified Laboratory: **ANALYTICAL BALANCE CORP.** Certified Lab #: **M-MA022**

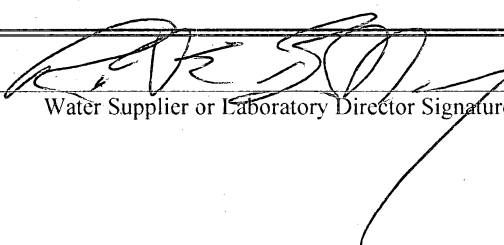
Lead Anal. Method: SM 3113 B Lead Detection Limit: 0.001 mg/L Copper Anal. Method: EPA 200.8 Copper Detection Limit: 0.02 mg/L

of Samples Required¹: 100 # of Samples Submitted¹: _____ 90th Percentile Lead¹: _____ 90th Percentile Copper¹: _____

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
36615-01	6/19/02		79 Maple Wood Drive	0.004	6/20/02	0.46	6/20/02
36615-02	6/15/02		18 Aspen Drive	0.001	6/20/02	0.16	6/20/02
36615-03	6/18/02		99 Cedar Street	0.002	6/20/02	0.29	6/20/02

Sample Code		PLEASE NOTE THE FOLLOWING:
1	First Sampling Period	<p>Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period.</p> <p>¹ This section is to be filled out by the water supplier.</p> <p>² See DEP Lead & Copper sampling plan for approved sampling locations.</p>
2	Second Sampling Period	
3	Reduced - Annual	
4	Reduced - Every Three Years	
5	LSL Replacement Program	
6	Demonstration	

Remarks: _____

 24 June 02
Water Supplier or Laboratory Director Signature / Date

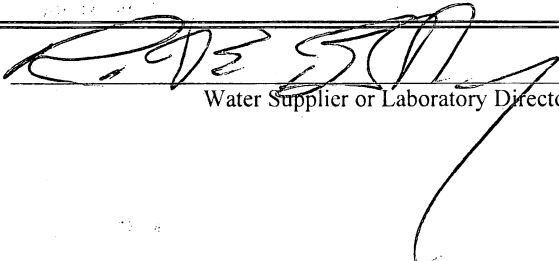
**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: <u>4122000</u>	PWS Name: <u>Hanover Water Dept.</u>	Town: <u>Hanover</u>	Sample Code ¹ : _____
State Certified Laboratory: ANALYTICAL BALANCE CORP.			Certified Lab #: M-MA022
Lead Anal. Method: <u>SM 3113 B</u>	Lead Detection Limit: <u>0.001 mg/L</u>	Copper Anal. Method: <u>EPA 200.8</u>	Copper Detection Limit: <u>0.02 mg/L</u>
# of Samples Required ¹ : <u>10</u>	# of Samples Submitted ¹ : <u>10</u>	90 th Percentile Lead ¹ : _____	90 th Percentile Copper ¹ : _____

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
36580-01	6/11/02	/	73 Clark Circle	0.002	6/20/02	0.28	6/20/02
36580-02	6/12/02	/	1327 Broadway	0.002	6/20/02	0.10	6/20/02
36580-03	6/12/02	/	125 Great Rock Road	0.002	6/20/02	0.37	6/20/02
36580-04	6/12/02	/	75 East Street	0.002	6/20/02	0.09	6/20/02
36580-05	6/12/02	/	82 Dwelley Avenue	0.002	6/20/02	0.24	6/20/02
36580-06	6/13/02	/	284 Circuit Street	0.002	6/20/02	0.60	6/20/02
36580-07	6/13/02	/	60 Briarwood Drive	0.002	6/20/02	0.26	6/20/02
36580-08	6/13/02	/	18 Teresa Lane	0.001	6/20/02	0.56	6/20/02
36580-09	6/17/02	/	54 Baily Road	0.005	6/20/02	0.34	6/20/02
36580-10	6/18/02	/	111 Great Rock Road	0.003	6/20/02	0.51	6/20/02

Sample Code	PLEASE NOTE THE FOLLOWING:
1 First Sampling Period	<p>Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period.</p> <p>¹ This section is to be filled out by the water supplier.</p> <p>² See DEP Lead & Copper sampling plan for approved sampling locations.</p>
2 Second Sampling Period	
3 Reduced - Annual	
4 Reduced - Every Three Years	
5 LSL Replacement Program	
6 Demonstration	

Remarks: _____


24 June '02
 Water Supplier or Laboratory Director Signature / Date

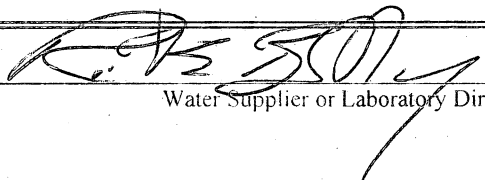
**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: <u>4122000</u>	PWS Name: <u>Hanover Water Dept.</u>	Town: <u>Hanover</u>	Sample Code ¹ :	
State Certified Laboratory: ANALYTICAL BALANCE CORP.			Certified Lab #: M-MA022	
Lead Anal. Method: SM 3113 B	Lead Detection Limit: 0.001 mg/L	Copper Anal. Method: EPA 200.8	Copper Detection Limit: 0.02 mg/L	
# of Samples Required ¹ : <u>60</u>	# of Samples Submitted ¹ : <u>60</u>	90 th Percentile Lead ¹ : <u>0.002</u>	90 th Percentile Copper ¹ : <u>0.32</u>	

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
41098-11	10/17/02	<u>2</u>	515 Main Street	ND	10/21/02	0.03	10/21/02
41098-12	10/17/02	<u>2</u>	1327 Broadway	0.001	10/21/02	0.14	10/21/02
41098-13	10/17/02	<u>2</u>	75 East Street	ND	10/21/02	0.10	10/21/02
41098-14	10/17/02	<u>2</u>	79 Maplewood Drive	ND	10/21/02	0.13	10/21/02
41098-15	10/17/02	<u>2</u>	152 Longwater Drive	0.001	10/21/02	0.16	10/21/02
41098-16	10/17/02	<u>2</u>	1010 Main Street	ND	10/21/02	0.16	10/21/02
41098-17	10/17/02	<u>2</u>	40 Saltwind Drive	0.006	10/21/02	0.14	10/21/02
41098-18	10/17/02	<u>2</u>	8 Bailey Road	ND	10/21/02	0.03	10/21/02

Sample Code	PLEASE NOTE THE FOLLOWING:
1 First Sampling Period	<p>Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period.</p> <p>¹ This section is to be filled out by the water supplier.</p> <p>² See DEP Lead & Copper sampling plan for approved sampling locations.</p>
2 Second Sampling Period	
3 Reduced - Annual	
4 Reduced - Every Three Years	
5 LSL Replacement Program	
6 Demonstration	

Remarks: _____


23 Oct. 02
 Water Supplier or Laboratory Director Signature / Date

**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: 4122000 PWS Name: Hanover Water Dept. Town: Hanover Sample Code¹: _____

State Certified Laboratory: **ANALYTICAL BALANCE CORP.** Certified Lab #: **M-MA022**

Lead Anal. Method: SM 3113.B Lead Detection Limit: 0.001 mg/L Copper Anal. Method: EPA 200.8 Copper Detection Limit: 0.02 mg/L

of Samples Required¹: 60 # of Samples Submitted¹: 60 90th Percentile Lead¹: 0.002 90th Percentile Copper¹: 0.32

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
41098-01	10/17/02	2	124 Stonegate Lane	ND	10/21/02	0.02	10/21/02
41098-02	10/17/02	2	44 Ash Lane	ND	10/21/02	0.11	10/21/02
41098-03	10/17/02	2	210 Stonegate Lane	ND	10/21/02	0.09	10/21/02
41098-04	10/17/02	2	88 Saltwind Drive	0.009	10/21/02	0.10	10/21/02
41098-05	10/17/02	2	52 Saltwind Drive	0.002	10/21/02	0.12	10/21/02
41098-06	10/17/02	2	44 Theresa Lane	ND	10/21/02	0.25	10/21/02
41098-07	10/17/02	2	219 Old Farm Road	ND	10/21/02	0.12	10/21/02
41098-08	10/17/02	2	71 Fair Acres Drive	ND	10/21/02	0.21	10/21/02
41098-09	10/17/02	2	54 Bailey Road	0.001	10/21/02	0.16	10/21/02
41098-10	10/17/02	2	40 Bailey Road	ND	10/21/02	0.18	10/21/02

Sample Code		PLEASE NOTE THE FOLLOWING:
1	First Sampling Period	<p>Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period.</p> <p>¹ This section is to be filled out by the water supplier.</p> <p>² See DEP Lead & Copper sampling plan for approved sampling locations.</p>
2	Second Sampling Period	
3	Reduced - Annual	
4	Reduced - Every Three Years	
5	LSL Replacement Program	
6	Demonstration	

Remarks: _____

R. B. Smith 23 Oct. 02
Water Supplier or Laboratory Director Signature / Date

**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: 4122000 PWS Name: Hanover Water Dept. Town: Hanover Sample Code¹: _____

State Certified Laboratory: **ANALYTICAL BALANCE CORP.** Certified Lab #: **M-MA022**

Lead Anal. Method: **SM 3113 B** Lead Detection Limit: **0.001 mg/L** Copper Anal. Method: **EPA 200.8** Copper Detection Limit: **0.02 mg/L**

of Samples Required¹: 60 # of Samples Submitted¹: 60 90th Percentile Lead¹: .002 90th Percentile Copper¹: .32

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
41137-01	10/19/02	2	99 Dwelly Ave.	ND	10/22/02	0.07	10/22/02
41137-02	10/19/02	2	125 Great Rock Road	ND	10/22/02	0.17	10/22/02
41137-03	10/19/02	2	14 Maple Ave.	ND	10/22/02	0.26	10/22/02
41137-04	10/19/02	2	284 Circuit Street	ND	10/22/02	0.39	10/22/02
41137-05	10/19/02	2	111 Great Rock road	ND	10/22/02	0.24	10/22/02
41137-06	10/19/02	2	116 Dwelly Avenue	ND	10/22/02	0.06	10/22/02
41137-07	10/19/02	2	465 King Street	ND	10/22/02	0.26	10/22/02
41137-08	10/19/02	2	18 Aspen Drive	ND	10/22/02	0.18	10/22/02
41137-09	10/19/02	2	339 Old Farm Road	0.004	10/22/02	0.17	10/22/02
41137-10	10/19/02	2	31 Tilden Lane	ND	10/22/02	0.18	10/22/02

Sample Code		PLEASE NOTE THE FOLLOWING:
1	First Sampling Period	<p>Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period.</p> <p>¹ This section is to be filled out by the water supplier.</p> <p>² See DEP Lead & Copper sampling plan for approved sampling locations.</p>
2	Second Sampling Period	
3	Reduced - Annual	
4	Reduced - Every Three Years	
5	LSL Replacement Program	
6	Demonstration	

Remarks: _____

R. A. E. S. J. J. 25 Oct. 02
Water Supplier or Laboratory Director Signature / Date

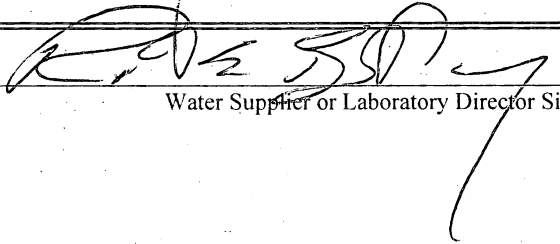
**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: <u>4122000</u>	PWS Name: <u>Hanover Water Dept.</u>	Town: <u>Hanover</u>	Sample Code ¹ :	
State Certified Laboratory: ANALYTICAL BALANCE CORP.				Certified Lab #: M-MA022
Lead Anal. Method: SM 3113 B	Lead Detection Limit: 0.001 mg/L	Copper Anal. Method: EPA 200.8	Copper Detection Limit: 0.02 mg/L	
# of Samples Required ¹ : <u>60</u>	# of Samples Submitted ¹ : <u>60</u>	90 th Percentile Lead ¹ : <u>.002</u>	90 th Percentile Copper ¹ : <u>.32</u>	

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
41137-11	10/19/02	<u>2</u>	443 King Street	ND	10/22/02	0.30	10/22/02
41137-12	10/19/02	<u>2</u>	348 Old Farm Road	ND	10/22/02	0.19	10/22/02
41137-13	10/19/02	<u>2</u>	184 Larchmont Lane	ND	10/22/02	0.05	10/22/02
41137-14	10/19/02	<u>2</u>	89 Cedar Street	ND	10/22/02	0.12	10/22/02
41137-15	10/19/02	<u>2</u>	99 Cedar Street	ND	10/22/02	0.06	10/22/02
41137-16	10/19/02	<u>2</u>	93 Maplewood Drive	0.002	10/22/02	0.08	10/22/02
41137-17	10/19/02	<u>2</u>	40 Long Water Drive	0.001	10/22/02	0.18	10/22/02
41137-18	10/19/02	<u>2</u>	82 Dwelly Avenue	ND	10/22/02	0.04	10/22/02
41137-19	10/19/02	<u>2</u>	48 Briarwood Drive	ND	10/22/02	0.32	10/22/02
41137-20	10/19/02	<u>2</u>	103 Briarwood Drive	ND	10/22/02	0.32	10/22/02

Sample Code	PLEASE NOTE THE FOLLOWING:
1 First Sampling Period	<p>Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period.</p> <p>¹ This section is to be filled out by the water supplier.</p> <p>² See DEP Lead & Copper sampling plan for approved sampling locations.</p>
2 Second Sampling Period	
3 Reduced - Annual	
4 Reduced - Every Three Years	
5 LSL Replacement Program	
6 Demonstration	

Remarks: _____


25 Oct. 02
 Water Supplier or Laboratory Director Signature / Date

**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: 4122000 PWS Name: Hanover Water Dept. Town: Hanover Sample Code¹: _____

State Certified Laboratory: **ANALYTICAL BALANCE CORP.** Certified Lab #: **M-MA022**

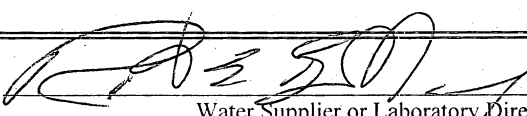
Lead Anal. Method: SM 3113 B Lead Detection Limit: 0.001 mg/L Copper Anal. Method: EPA 200.8 Copper Detection Limit: 0.02 mg/L

of Samples Required¹: 60 # of Samples Submitted¹: 60 90th Percentile Lead¹: 0.002 90th Percentile Copper¹: 0.32

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
41137-21	10/19/02	2	90 Dwelly Avenue	ND	10/22/02	0.04	10/22/02

Sample Code		PLEASE NOTE THE FOLLOWING:
1	First Sampling Period	<p>Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period.</p> <p>¹ This section is to be filled out by the water supplier.</p> <p>² See DEP Lead & Copper sampling plan for approved sampling locations.</p>
2	Second Sampling Period	
3	Reduced - Annual	
4	Reduced - Every Three Years	
5	LSL Replacement Program	
6	Demonstration	

Remarks: _____

 25 Oct. 02
Water Supplier or Laboratory Director Signature / Date

**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: 4122000 PWS Name: Hanover Water Dept. Town: Hanover Sample Code¹: _____

State Certified Laboratory: **ANALYTICAL BALANCE CORP.** Certified Lab #: **M-MA022**

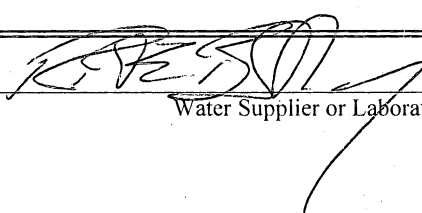
Lead Anal. Method: SM 3113 B Lead Detection Limit: 0.001 mg/L Copper Anal. Method: EPA 200.8 Copper Detection Limit: 0.02 mg/L

of Samples Required¹: 60 # of Samples Submitted¹: 60 90th Percentile Lead¹: 0.002 90th Percentile Copper¹: 0.32

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
41245-11	10/23/02	2	100 Great Rock Road	ND	10/25/02	0.10	10/25/02
41245-12	10/23/02	2	73 Clark Circle	0.002	10/25/02	0.30	10/25/02
41245-13	10/19/02	2	19 Aspen Drive	0.001	10/25/02	0.22	10/25/02
41245-14	10/21/02	2	135 Great Rock Road	0.001	10/25/02	0.13	10/25/02

Sample Code		PLEASE NOTE THE FOLLOWING:
1	First Sampling Period	<p>Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period.</p> <p>¹ This section is to be filled out by the water supplier.</p> <p>² See DEP Lead & Copper sampling plan for approved sampling locations.</p>
2	Second Sampling Period	
3	Reduced - Annual	
4	Reduced - Every Three Years	
5	LSL Replacement Program	
6	Demonstration	

Remarks: _____


29 Oct. 02
 Water Supplier or Laboratory Director Signature / Date

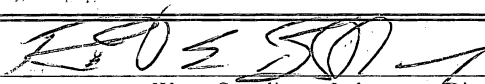
**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: <u>4122000</u>	PWS Name: <u>Hanover Water Dept.</u>	Town: <u>Hanover</u>	Sample Code ¹ :	
State Certified Laboratory: ANALYTICAL BALANCE CORP.			Certified Lab #: M-MA022	
Lead Anal. Method: SM 3113 B	Lead Detection Limit: 0.001 mg/L	Copper Anal. Method: EPA 200.8	Copper Detection Limit: 0.02 mg/L	
# of Samples Required ¹ : <u>60</u>	# of Samples Submitted ¹ : <u>60</u>	90 th Percentile Lead ¹ : <u>.002</u>	90 th Percentile Copper ¹ : <u>.32</u>	

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
41245-01	10/23/02	<u>2</u>	307 Old Farm Road	ND	10/25/02	0.22	10/25/02
41245-02	10/23/02	<u>2</u>	46 Great Rock Road	0.001	10/25/02	0.13	10/25/02
41245-03	10/23/02	<u>2</u>	18 Damon Road	ND	10/25/02	0.14	10/25/02
41245-04	10/22/02	<u>2</u>	20 Tindale Way	0.002	10/25/02	0.35	10/25/02
41245-05	10/21/02	<u>2</u>	18 Teresa Lane	0.002	10/25/02	0.34	10/25/02
41245-06	10/23/02	<u>2</u>	101 Shingle Mill Lane	ND	10/25/02	0.08	10/25/02
41245-07	10/22/02	<u>2</u>	92 Shingle Mill Lane	0.002	10/25/02	0.15	10/25/02
41245-08	10/22/02	<u>2</u>	38 Tindale Way	0.003	10/25/02	0.07	10/25/02
41245-09	10/22/02	<u>2</u>	98 Hearth Stone Way	ND	10/25/02	0.05	10/25/02
41245-10	10/23/02	<u>2</u>	24 Shingle Mill Lane	0.001	10/25/02	0.11	10/25/02

Sample Code	PLEASE NOTE THE FOLLOWING:
1 First Sampling Period	<p>Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period.</p> <p>¹ This section is to be filled out by the water supplier.</p> <p>² See DEP Lead & Copper sampling plan for approved sampling locations.</p>
2 Second Sampling Period	
3 Reduced - Annual	
4 Reduced - Every Three Years	
5 LSL Replacement Program	
6 Demonstration	

Remarks: _____


29 Oct 02
 Water Supplier or Laboratory Director Signature / Date

**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: 4122000 PWS Name: Hanover Water Dept. Town: Hanover Sample Code¹: _____

State Certified Laboratory: ANALYTICAL BALANCE CORP. Certified Lab #: M-MA022

Lead Anal. Method: SM 3113.B Lead Detection Limit: 0.001 mg/L Copper Anal. Method: EPA 200.8 Copper Detection Limit: 0.02 mg/L

of Samples Required¹: 60 # of Samples Submitted¹: 60 90th Percentile Lead¹: .002 90th Percentile Copper¹: .32

Lab Sample ID	Collection Date ²	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
41382-01	10/26/02	2	122 Great Rock Road	ND	11/01/02	0.23	11/01/02
41382-02	10/26/02	2	24 Brairwood Road	ND	11/01/02	0.14	11/01/02

Sample Code		PLEASE NOTE THE FOLLOWING:
1	First Sampling Period	<p>Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period.</p> <p>¹ This section is to be filled out by the water supplier.</p> <p>² See DEP Lead & Copper sampling plan for approved sampling locations.</p>
2	Second Sampling Period	
3	Reduced - Annual	
4	Reduced - Every Three Years	
5	LSL Replacement Program	
6	Demonstration	

Remarks: _____

[Signature] 5 Nov 02
Water Supplier or Laboratory Director Signature / Date

**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: 4122000 PWS Name: Hanover Water Dept. Town: Hanover Sample Code¹: _____

State Certified Laboratory: **ANALYTICAL BALANCE CORP.** Certified Lab #: **M-MA022**

Lead Anal. Method: SM 3113 B Lead Detection Limit: 0.001 mg/L Copper Anal. Method: EPA 200.8 Copper Detection Limit: 0.02 mg/L

of Samples Required¹: 60 # of Samples Submitted¹: 60 90th Percentile Lead¹: 002 90th Percentile Copper¹: 32

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
41615	10/28/02	2	31 Bailey Road	ND	11/06/02	0.21	11/06/02

Sample Code		PLEASE NOTE THE FOLLOWING:
1	First Sampling Period	<p>Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period.</p> <p>¹ This section is to be filled out by the water supplier.</p> <p>² See DEP Lead & Copper sampling plan for approved sampling locations.</p>
2	Second Sampling Period	
3	Reduced - Annual	
4	Reduced - Every Three Years	
5	LSL Replacement Program	
6	Demonstration	

Remarks: _____

[Signature] 19 Nov 02
Water Supplier or Laboratory Director Signature / Date

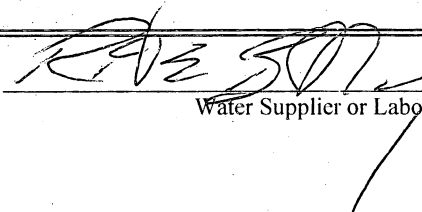
**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: 4122000 PWS Name: Hanover Water Dept. Town: Hanover Sample Code¹: _____
 State Certified Laboratory: **ANALYTICAL BALANCE CORP.** Certified Lab #: **M-MA022**
 Lead Anal. Method: SM 3113 B Lead Detection Limit: 0.001 mg/L Copper Anal. Method: EPA 200.8 Copper Detection Limit: 0.02 mg/L
 # of Samples Required¹: 60 # of Samples Submitted¹: 60 90th Percentile Lead¹: .002 90th Percentile Copper¹: .32

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
41953-01	11/15/02	2	47 Kingston Road	0.001	11/18/02	0.36	11/18/02
41953-02	11/15/02	2	30 Teresa Lane	ND	11/18/02	0.59	11/18/02
41953-03	11/15/02	2	371 Silver Street	ND	11/18/02	0.05	11/18/02
41953-04	11/15/02	2	33 Kingston Road	ND	11/18/02	0.44	11/18/02

Sample Code	PLEASE NOTE THE FOLLOWING:
1 First Sampling Period	Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period. ¹ This section is to be filled out by the water supplier. ² See DEP Lead & Copper sampling plan for approved sampling locations.
2 Second Sampling Period	
3 Reduced - Annual	
4 Reduced - Every Three Years	
5 LSL Replacement Program	
6 Demonstration	

Remarks: _____


 20 Nov. 02
 Water Supplier or Laboratory Director Signature / Date

**DEPARTMENT OF ENVIRONMENTAL PROTECTION
LEAD AND COPPER ANALYSIS REPORT**

PWS I.D.: 4122000 PWS Name: Hanover Water Dept. Town: Hanover Sample Code¹:

State Certified Laboratory: **ANALYTICAL BALANCE CORP.**

Certified Lab #: **M-MA022**

Lead Anal. Method: SM 3113 B

Lead Detection Limit: 0.001 mg/L

Copper Anal. Method: EPA 200.8

Copper Detection Limit: 0.02 mg/L

of Samples Required: 4

of Samples Submitted¹: 4

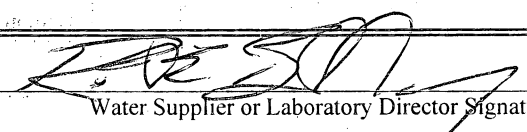
90th Percentile Lead¹:

90th Percentile Copper¹:

Lab Sample ID	Collection Date	Sample Collection Code ¹	DEP Approved Sample Site ²	Lead Result (mg/L)	Lead Analysis Date	Copper Result (mg/L)	Copper Analysis Date
42375-01	12/03/02		Center School-bubbler	ND	12/05/02	0.34	12/05/02
42375-02	12/03/02		Center School-kitchen faucet	0.004	12/05/02	0.30	12/05/02
42375-03	12/03/02		Cedar School-kitchen faucet	ND	12/05/02	0.08	12/05/02
42375-04	12/03/02		Cedar School-water fountain by office	ND	12/05/02	0.17	12/05/02

Sample Code		PLEASE NOTE THE FOLLOWING:
1	First Sampling Period	<p>Water suppliers should mail TWO COPIES of this form to the DEP Regional Office within 10 days after the end of the reporting period.</p> <p>¹ This section is to be filled out by the water supplier.</p> <p>² See DEP Lead & Copper sampling plan for approved sampling locations.</p>
2	Second Sampling Period	
3	Reduced - Annual	
4	Reduced - Every Three Years	
5	LSL Replacement Program	
6	Demonstration	

Remarks: School samples


Water Supplier or Laboratory Director Signature / Date 11 Dec 02