3. PWS Name:   Hanover Water Dept.   4. PWS Class (circle one)   COM   NTS	on.
Description	
LABORATORY ANALYTICAL INFORMATION:  Lab Name:ANALYTICAL BALANCE CORP Lab Cert.#:M-MA02: Subcontracted? Yes [ ] No [ x ]	
MCL	
Lab sample ID  Date Analyzed  Analytical Method  EPA 524.2  EPA 52	
Analytical Method  EPA 524.2  Bromoform  D.5  PA 524.2  EPA 524.2	D
Analytical Method  Bromoform	
Bromoform 0.5 9.3  Chloroform 0.5 ND  Bromodichloromethane 0.5 1.3  Dibromochloromethane 0.5 5.5  Total Trihalomethanes 80.0 16.1  Surrogate Recoveries (as required by EPA method 524.2):  Compound % Recovered QC Limits (%)  4-bromofluorobenzene 98 70-130  1,2-dichlorobenzene 4 97 70-130  1,2-dichlorobenzene d4 97 70-130  1,2-dichlorobenzene d5 97 70-130  1,2-dichlorobenzene Director Signature and Date:	
Chloroform	EPA 524.2
Bromodichloromethane 0.5 1.3  Dibromochloromethane 0.5 5.5  Fotal Trihalomethanes 80.0 16.1  Surrogate Recoveries (as required by EPA method 524.2):  Compound % Recovered QC Limits (%)  1-bromofluorobenzene 98 70-130  1.2-dichlorobenzene 4 97 70-130  1.2-dichlorobenzene d4 97 70-130  1.2-dichlorobenzene d5 98 70-130  1.3-dichlorobenzene d6 97 70-130  1.4-dichlorobenzene d9 97 70-130  1.5-dichlorobenzene d9 98 70-130  1.5-dichlorobenzene d9 97 70-130  1.6-dichlorobenzene d9 98 70-130  1.7-dichlorobenzene d9 97 70-130  1.8-dichlorobenzene d9 98 70-130  1.9-dichlorobenzene d9 97 70-130  1.9-dichlorobenzene d9 98 70-130  1.9-dichlorobenzene d9 97 70-130  1.9-dichlorobenzene d9 98 70-130  1.9-dichl	
Dibromochloromethane	
Total Trihalomethanes 80.0 16.1  Surrogate Recoveries (as required by EPA method 524.2):  Compound % Recovered QC Limits (%)  1-bromofluorobenzene 98 70-130  2,2-dichlorobenzene d <sub>4</sub> 97 70-130  2,2-dichlorobenzene d <sub>4</sub> 97 70-130  3,2-dichlorobenzene d <sub>4</sub> 97 70-130  4,2-dichlorobenzene d <sub>4</sub> 97 70-130  4,2-dichlo	
Compound  Sequence S	
Compound  Note Recovered  Proposed Section 198  Application of the proposed sequence of this quarter and three prior consecutive quarterly averages (μg/L):  Learning Annual Average = Average of this quarter and three prior consecutive quarterly averages (μg/L):  Learning Annual Average = Average of this quarter and three prior consecutive quarterly averages (μg/L):  Learning Annual Average and belief.  Note of the proposed sequence of the person authorized to fill out this form and the information contained herein is true, the best of my knowledge and belief.	
-bromofluorobenzene 4 97 70-130  2-dichlorobenzene d4 97 70-130  2-QA/QC required matrix spike sample information in on file at our office.  aboratory Director Signature and Date:   Aboratory Director	
Aboratory Director Signature and Date:  DBPR Compliance Reporting: [This section mandatory for Public Water Systems regulated under 3100 CHM Monitoring Frequency: (choose one)  QUARTER  YEAR  3 YEARS  Intal number of TTHM Samples collected during the monitoring period:  Verage result for ALL locations sampled during the monitoring period (µg/L):  Jamining Annual Average = Average of this quarter and three prior consecutive quarterly averages (µg/L):  Jamining Annual Average are authorized to fill out this form and the information contained herein is true, the best of my knowledge and belief.	
aboratory Director Signature and Date:	
THM Monitoring Frequency: (choose one) QUARTER YEAR 3 YEARS of tall number of TTHM Samples collected during the monitoring period: we rage result for ALL locations sampled during the monitoring period ( $\mu$ g/L): unning Annual Average = Average of this quarter and three prior consecutive quarterly averages ( $\mu$ g/L): we retify under penalty of law that I am the person authorized to fill out this form and the information contained herein is true, the best of my knowledge and belief.	
Attention: Mail <u>TWO</u> copies of this report to your <b>DEP Regional Office</b> within 30 days of receipt of results and anys after the end of the reporting period.  or DEP/DWS use only: Please initial and date as completed.	e, accurate and co.
Accepted: Disapproved: Data entered into WQTS:	

I PWS INFORMATION: I 1. PWS ID#: 4122000	-	ur DEP Water Qu					ction.	
3. PWS Name: Hanover Water Dept. 4. PWS Class (circle one) COM NTNC 5. Source ID# 6. Sample Location 7. Date Collected 8. Collected by								
	A: 4122000 HFD #3 3/25/2002 R. Sides B: 4122000 70 Ponderosa Drive 3/25/2002 R. Sides							
C: 4122000 HFD #1 3/25/2002 R. Sides								
D: 4122000 Hanover Mall Office 3/25/2002 R. Sides  9. Routine / Special (explain) 10. Notes:								
9. Routine / Special (ex A: _x_ or	kpiain) 10. Notes	:						
B:x or								· -
C: _ x or D:x or								-
II LABORATORY ANALY Lab Name: _ ANALYTI	CAL BALANCI				Lab	Cert.#: _ <b>M-M</b> A	.022	
Subcontracted? Yes [ ] ? Sub. Lab Name: Notes:					Sub.	Lab Cert. #		- <del>-</del>
	MCL (µg/L)	Detection Limit (μg/L)		_	Results	(μg/L)		]
	(µg/L)	Lillit (μg/L)	A	E	3	С	D	1
Lab sample ID			33776-05	3377	6-06	33776-07	33776-08	
Date Analyzed			3/27/2002	3/27/	2002	3/27/2002	3/27/2002	_
Analytical Method			EPA 524.2	EPA	524.2	EPA 524.2	EPA 524.2	-
Bromoform		0.5	1.3	N	D	ND	ND	4
Chloroform		0.5	41.5	55.3		51.7	59.3	4
Bromodichloromethane		0.5	14.4	20	). 1	18.6	21.6	4
Dibromochloromethane		0.5	4.1	4.	.6	4.0	4.9	_
Total Trihalomethanes	80.0		61.3	80	0.0	74.3	85.8	}
Surrogate Recoveries (as 1	required by EPA			η				7
Compound		% F	Recovered			QC Limits (	<u>%)                                    </u>	4
1,2-dichlorobenzene d <sub>4</sub>		93,	93, 93, 92			70-130	· · · · · · · · · · · · · · · · · · ·	4
4-bromofluorobenzene	ple information in on file		76, 76, 74			70-130		
The QA/QC required matrix spike sample information in on file at our office.  Laboratory Director Signature and Date:  19April '02								
III. DBPR Compliance Ro	ncy: (choose one)	) QUAF	RTER 🗶	ater Sys		gulated under 3 3 YEARS		E.]
Total number of TTHM Sa Average result for ALL loc		-	<u> </u>	<i>b</i> / 11	a			
Running Annual Average =					erly aver	 ages (μg/L): 2	3, 3	
I certify under penalty of law	that I am the perso							complete
to the best of my knowledge at Primary Certified Operat		d Date:	1/1	162	4	~ 6/25/	62	
Attention: Mail TWO cop	ies of this report		gional Office w	ithin 30 d	days of r	eceipt of results	and no later thar	n 10
days after the end of the rej For DEP/DWS use only: Please is		mpleted.						
Accepted:	Disapproved		Data en	tered into	WQTS:			
Comments:						-	<u>-</u>	
I .								1

I PWS INFORMATION: 1 1. PWS ID#: 412200		our DEP Water Q		Schedule to he ty/Town: H		ection.
3. PWS Name: Hanove 5. Source ID# A: 4122000 B: 4122000 C: 4122000 D: 4122000 9. Routine / Special (e. A: _x_ or		3/25 Store 3/25 3/25 3/25		WS Class (circ		<u>d by</u> <u>s</u> <u>s</u> <u>s</u>
B: _x_ or C: _x_ or D: _x_ or						
II LABORATORY ANAL Lab Name: _ ANALYTI Subcontracted? Yes [ ] Sub. Lab Name: Notes:	CAL BALANC		_		ab Cert.#: _ <b>M-M</b> .a	<del></del>
Notes:	MCL	Detection		Resi	ılts (μg/L)	
	(μg/L)	Limit (µg/L)	A	В	C	D
Lab sample ID			33776-01	33776-02	33776-03	33776-04
Date Analyzed			3/27/2002	3/27/2002	3/27/2002	3/27/2002
Analytical Method			EPA 524.2	EPA 524.2	EPA 524.2	EPA 524.2
Bromoform		0.5	3.3	4.4	6.3	13.3
Chloroform		0.5	ND	ND	17.6	8.4
Bromodichloromethane		0.5	0.9	1.2	7.2	5.3
Dibromochloromethane		0.5	2.9	3.7	6.7	9.4
Total Trihalomethanes	80.0		7.1	9.3	37.8	36.4
Surrogate Recoveries (as	required by EPA	A method 524.2):				
Compound		% I	Recovered		QC Limits	(%)
1,2-dichlorobenzene d <sub>4</sub>		91,	92, 94, 93		70-130	
4-bromofluorobenzene			78, 79, 77		70-130	
The QA/QC required matrix spike sam  Laboratory Director Signa		ile at our office	30	) 	Apr. 02	
III. DBPR Compliance R TTHM Monitoring Freque Total number of TTHM Sa Average result for ALL loc Running Annual Average I certify under penalty of law to the best of my knowledge a Primary Certified Opera Attention: Mail TWO cop days after the end of the re For DEP/DWS use only: Please to	ncy: (choose one imples collected cations sampled = Average of thi that I am the pers nd belief. tor Signature a bies of this repor porting period.	during the monitor during the monitor squarter and three on authorized to fill and Date:  t to your DEP Re	RTER X  pring period: / pring period (//g/ e prior consecution out this form and	YEAR	3 YEARS verages (μg/L): _c contained herein is	23. 3 true, accurate and comple
Accepted:	Disapprove	ed:	Data er	itered into WQTS	:	
Comments:						

## ${\bf MASSACHUSETTS~DEP/DIVISION~OF~WATER~SUPPLY}$

I PWS INFORMATION: I	Please refer to yo	ur DEP Water Qu					ction.	
1. PWS ID#:4122000_	2. City/Town:Hanover 4. PWS Class (circle one) COM NTNC							
	<ul><li>3. PWS Name: <u>Hanover Water Dept.</u></li><li>5. <u>Source ID#</u></li><li>6. <u>Sample Location</u></li></ul>			4. PWS Class (circle one) COM NTNC  7. <u>Date Collected</u> 8. <u>Collected by</u>				
A: 4122000				5/07/2002 8. Collected by R. Sides				
B: 4122000	70 Ponderosa	Dr.	5/07/200					
C: 4122000	HFD #1	<del></del>	<u>5/07/2002</u> <u>R. Sides</u> <u>5/07/2002</u> <u>R. Sides</u>					
D: 4122000						R. Sic		
	kplain) 10. Notes						<del></del>	
A:x or								-
B:x or								
C:x or								-
D:x or					<del> </del>			
II LABORATORY ANALY Lab Name: _ ANALYTI Subcontracted? Yes [ ] I Sub. Lab Name:	CAL BALANCI No [ x ]	E CORP.	_			Cert.#: _ <b>M-M</b>	A022	_
Notes:	<u></u>			-				┭
	MCL (μg/L)	Detection Limit (µg/L)		<del>, =</del>	Results	(μg/L)	<del>,</del>	
	(µg/L)	Lillit (µg/L)	A		3	С	D	_
Lab sample ID			35056-05	3505	6-06	35056-07	35056-08	
Date Analyzed			5/10/2002	5/10/	/2002	5/10/2002	5/10/2002	4
Analytical Method			EPA 524.2	EPA	524.2	EPA 524.2	EPA 524.2	_
Bromoform		0.5	2.5	0	.6	ND	ND	_
Chloroform		0.5	32.7	83	3.2	62.3	104	1
Bromodichloromethane		0.5	8.9	22	2.2	18.5	24.9	4
Dibromochloromethane		0.5	3.9	3.9 4.4 3.8 4.2				<u> </u>
Total Trihalomethanes	80.0	•	48.0	1	10	84.6	133.1	
Surrogate Recoveries (as 1	required by EPA	method 524.2):		<del></del>				7
Compound		% F	Recovered			QC Limits (	%)	_
1,2-dichlorobenzene d <sub>4</sub>		88,	89, 87, 87	9, 87, 87				
4-bromofluorobenzene			81, 81, 79			70-130		
The QA/QC required matrix spike sam	ple information in on file	e at our office.	P = =					
Laboratory Director Signa	ture and Date:			1/_	1	5 June . 0:	<u> </u>	
III. <b>DBPR Compliance R</b> TTHM Monitoring Frequen			ry for Public W	ater Sy XEA			======= 310CMR 22.07F	E.]
Total number of TTHM Sa				> / EA		3 YEARS _	<del></del>	
Average result for ALL loc	•	•	<u> </u>	1) 0	8.1			
Running Annual Average =						ages (µg/L): 3	6	
I certify under penalty of law	that I am the perso							complete
to the best of my knowledge at		.D. Q	1 n. C	10	<i>1</i> ^	chol	<u> </u>	
Primary Certified Operat			$\gamma = 11$	Well and	<del></del>	6/05/0	<i>d</i>	10
Attention: Mail TWO cop days after the end of the rep	porting period.		gionai Office wi	unin 30 (	uays of re	eccipt of results	and no later than	1 10
For DEP/DWS use only: Please in Accepted:	nitial and date as cor Disapproved		Data en	tered into	WOTS:			7
Comments:	Бізарріочей		Data en					1
,								

I PWS INFORMATION: I	Please refer to yo	ur DEP Water Qu					ction.
1. PWS ID#:4122000 3. PWS Name: <u>Hanove</u>	2. City/Town:Hanover 4. PWS Class (circle one) COM NTNC						
5. Source ID#	7. Date Co		CHOIC OIL	8. <u>Collect</u>			
A: <u>4122000</u>	HFD #2	<del></del>	5/07/200			R. Sid	
B: <u>4122000</u>	Town Hall	<u>5/07/200</u>			R. Sid		
C: <u>4122000</u>	Myrtle's Country Store 5/07/2002					R. Sid	
D: <u>4122000</u> 9. Routine / Special (ex	HFD #6 5/07/2002 R. Sides (explain) 10. Notes:						<u>les</u>
A: _x_ or	xpiaiii) 10. Notes	•					
B: _x_ or	-						
C:x or							
D:x or						····	
II LABORATORY ANAL Lab Name: _ ANALYTI Subcontracted? Yes [ ] I Sub. Lab Name:	CAL BALANCI No [ x ]	E CORP.	_			ert.#: _ <b>M-M</b> A	Δ022
Notes:	_						
	MCL	Detection			Results (µ	ıg/L)	
	(μg/L)	Limit (μg/L)	A	В		С	D
Lab sample ID			35056-01	35056	-02	35056-03	35056-04
Date Analyzed			5/10/2002	5/10/2	002	5/10/2002	5/10/2002
Analytical Method			EPA 524.2	EPA 52	24.2	EPA 524.2	EPA 524.2
Bromoform		0.5	6.6	3.5		4.3	9.0
Chloroform		0.5	ND	17.0		ND	14.6
Bromodichloromethane		0.5 .	1.3	6.0		1.5	6.4
Dibromochloromethane		0.5	4.7	4.3		4.2	8.9
Total Trihalomethanes	80.0		12.6	30.8	8	10.0	38.9
Surrogate Recoveries (as	required by EPA	method 524.2):					
Compound		% I	Recovered			QC Limits (	%)
1,2-dichlorobenzene d <sub>4</sub> 90, 89, 90, 89 70-130							
4-bromofluorobenzene		82,	81, 83, 82			70-130	
The QA/QC required matrix spike sam	ple information in on fil	e at our office.	h - F	9/1	1		
Laboratory Director Signa	ture and Date:	feet l	15 2	1/-	<u> </u>	5 June · Co	2
III. <b>DBPR Compliance R</b> TTHM Monitoring Frequent Total number of TTHM Sa Average result for ALL loc	ncy: (choose one mples collected of	) QUAF during the monito	RTER <u>×</u> oring period:	YEAR		llated under 3 3 YEARS _	
Running Annual Average = I certify under penalty of law is to the best of my knowledge a	= Average of this that I am the perso nd belief.	quarter and three n authorized to fill	prior consecuti	ve quarter	ly averag	es (μg/L): ained herein is t	36 true, accurate and com
Primary Certified Operate Attention: Mail TWO copulays after the end of the reserved by the DEP/DWS use only: Please is	oies of this report porting period.	to your DEP Re	gional Office wi	thin 30 de	ays of rec	eipt of results	and no later than 10
Accepted:	Disapproved		Data en	tered into W	'QTS:		
Comments:							

# MASSACHUSETTS DEP/DIVISION OF WATER SUPPLY TRIHALOMETHANE REPORT

I PWS INFORMATION:	Please refer to ye	our DEP Water Qu				ection.	
1. PWS ID#: _4122000 2. City/Town:Hanover 3. PWS Name: <u>Hanover Water Dept.</u> 4. PWS Class (circle one) <u>COM</u> NTNC						NTNC	
5. Source ID#	6. Sample Locat	ion 7	. Date Collected	`	Collected by	NTINC	
A: 4122000	HFD #2		9/10/2002	· ·	R. Sides		
B: 4122000	HFD #3		9/10/2002		R. Sides		
C: 4122000	HFD #6		9/10/2002		R. Sides		
D: 4122000	70 Pondersoa		9/10/2002	\	R. Sides		
9. Routine / Special (	explain) 10. Note	s:					
A:x or							
B: _x_ or							
C: _x_ or							
D: _x_ or	0						
II LABORATORY ANAI Lab Name:ANALYT Subcontracted? Yes [ ] Sub. Lab Name: Notes:	ICAL BALANC No [ x ]	E CORP.	<b>-</b> :		Cert.#: _ <b>M-M</b> .A	A022	
Notes.	MCL	Detection		Results	: (μg/L)		
	(μg/L)	Limit (μg/L)	A	В	С	D	
Lab sample ID			39711-01	39711-02	39711-03	39711-04	
Date Analyzed			9/12/2002	9/12/2002	9/12/2002	9/12/2002	
Analytical Method			EPA 524.2	EPA 524.2	EPA 524.2	EPA 524.2	
Bromoform	9 1 1 1 1	0.5	5.6	3.4	19.0	1.2	
Chloroform		0.5	ND	17.4	1.2	37.8	
Bromodichloromethane	<u> </u>	0.5	1.1	9.6	3.2	23.4	
Dibromochloromethane		0.5	4.0	6.0	10.7	10.1	
Total Trihalomethanes	80.0		10.7	36.4	34.1	72.5	
Surrogate Recoveries (as							
Compound		% F	Recovered		QC Limits (	(%)	
1,2-dichlorobenzene d <sub>4</sub>		92,	, 91, 92, 91 70-13			0	
4-bromofluorobenzene The QA/QC required matrix spike sa	mple information in on f		83, 85, 83		70-130		
Laboratory Director Sign		R.	5 SC	7 4	Oct. 02		
III. <b>DBPR Compliance I</b> TTHM Monitoring Freque	ency: (choose one	e) QUAR	TER X	ater Systems re	gulated under 3 3 YEARS	-	
Total number of TTHM S Average result for ALL lo				14. 38.4			
Running Annual Average	= Average of this	s quarter and three	prior consecuti	ve quarterly aver	ages (μg/L):	10.9	
certify under penalty of law o the best of my knowledge o	and belief.	on aumorizea to jill	out inis form and	ine injormation co	ontained herein is i	true, accurate and comp	
Primary Certified Opera		nd Date:	1/0/3	China	10/10/07		
Attention: Mail TWO co			gional Office wi	thin 30 days of r	eceipt of results	and no later than 10	
days after the end of the re For DEP/DWS use only: Please	eporting period.				r		
Accepted:	Disapprove		Data en	tered into WQTS:			
Comments:							

### ${\bf MASSACHUSETTS\ DEP/DIVISION\ OF\ WATER\ SUPPLY}$

I PWS INFORMATION: F  1. PWS ID#:4122000  3. PWS Name: Hanover  5. Source ID#  A: 4122000  B: 4122000  C: 4122000  D: 4122000  9. Routine / Special (extended to be a constant)  A:x or  B:x or  C:x or  D:x or	Water Dept.  5. Sample Location HFD #2 HFD #3 HFD #6 70 Pondersoa Explain) 10. Notes:	or DEP Water Qu	2. Ci 4. PV . <u>Date Collected</u> 11/26/2002 11/26/2002 11/26/2002	Schedule to help ty/Town: _Hanov WS Class (circle 8. ©	/er	NTNC		
II LABORATORY ANALY Lab Name:ANALYTIC Subcontracted? Yes [ ] N Sub. Lab Name: Notes:	C <mark>AL BALANCE</mark> No [ x ]	CORP.	-		Cert.#: _ <b>M-M</b> / Lab Cert. #	A022		
	MCL	Detection		Results	(μg/L)			
	(μg/L)	Limit (μg/L)	A	В	С	D		
Lab sample ID			42261-01	42261-02	42261-03	42261-04		
Date Analyzed			12/06/2002	12/06/2002	12/06/2002	12/06/2002		
Analytical Method			EPA 524.2	EPA 524.2	EPA 524.2	EPA 524.2		
Bromoform	*	0.5	3.4	3.6	10.1	ND		
Chloroform	<b>****</b>	0.5	ND	39.5	13.7	67.5		
Bromodichloromethane	****	0.5	1.0	9.9	5.0	16.6		
Dibromochloromethane		0.5	3.0	3.5	6.0	3.0		
Total Trihalomethanes	80.0		7.4	56.5	34.8	87.1		
Surrogate Recoveries (as a	equired by EPA	method 524.2):						
Compound		% I	Recovered		QC Limits	(%)		
1,2-dichlorobenzene d <sub>4</sub>		77,	77, 80, 78		70-130			
4-bromofluorobenzene The QA/QC required matrix spike sam	ola information in an file	76,		70-130				
Laboratory Director Signat		at our office.	2 5	Def	2 Dec. 0	2		
III. DBPR Compliance ReTTHM Monitoring Frequer Total number of TTHM Sat Average result for ALL loc Running Annual Average = I certify under penalty of law to the best of my knowledge ar Primary Certified Operat Attention: Mail TWO cop days after the end of the refor DEP/DWS use only: Please in Accepted:	ncy: (choose one) mples collected d ations sampled d Average of this that I am the person ad belief. or Signature and ies of this report porting period.	QUAR uring the monito uring the monito quarter and three a authorized to fill d Date: to your DEP Re	ering period: 4 pring period (µg/n) pring period (µg/n) prior consecution out this form and prior consecution out the prior consecution out th	YEAR	3 YEARS ages (μg/L): ntained herein is	48.   true, accurate and complet 24  02		
Comments:		· .	Data Off	1 7 1 7 1 7 1 7 1 7 1 7 1 7 1 7 1 7 1 7				