

## Total Trihalomethanes Report

PWS Information: Please refer to your DEP Water Sampling Schedule (WQSS) to help complete this form.

PWS ID #: 4122000

City/Town: Hanover

PWS Name: Hanover Water Dept.

PWS Class: COM X NTNC NC

DEP Location (LOC) ID#	DEP Location Name	Sample Acidified?	Date Collected	Collected by
A 10380	640 King St.	X Yes	03/13/2012	T. Flynn
B 10383	Fire Station # 3	X Yes	03/13/2012	T. Flynn
C 10385	70 Ponderosa	X Yes	03/13/2012	T. Flynn
D		Yes		

Routine or Special Sample	Original or Resubmitted Report	If resubmitted report, list below:	
		Reason for resubmission	Collection date of original sample
A x RS SS	x Original Resubmitted Confirmation	Resample Reanalysis Report Corr.	
B x RS SS	x Original Resubmitted Confirmation	Resample Reanalysis Report Corr.	
C x RS SS	x Original Resubmitted Confirmation	Resample Reanalysis Report Corr.	
D x RS SS	x Original Resubmitted Confirmation	Resample Reanalysis Report Corr.	

Sample notes - (Such as manifold/multiple sample, list any sources that were on line during collection).

A
B
C
D

## II. Analytical Laboratory Information:

Primary Lab MA Cert. # M-MA022

Primary Lab Name: Analytical Balance Corp.

Subcontracted? Y x N

Analysis Lab MA Cert. # M-MA022

Analysis Lab Name: Analytical Balance Corp.

Contaminant	MCL (µg/L)	MDL (µg/L)	Results <sup>1</sup> (µg/L)			
			A	B	C	D
Total THMs	80	----	40.6	67.6	69.4	
Bromoform		0.5	6.3	2.9	2.9	
Chloroform		0.5	14.4	28.2	30.1	
Bromodichloromethane		0.5	10.7	22.7	22.7	
Dibromochloromethane		0.5	9.2	13.8	13.7	
Lab method			EPA 524.2	EPA 524.2	EPA 524.2	
Date extracted (551.1 only)			----	----	----	
Date analyzed			03/14/2012	03/14/2012	03/14/2012	
Lab Sample ID			45190-01	45190-02	45190-03	
Surrogate # 1	1,2-dichlorobenzene d <sub>4</sub>		101%	103%	101%	
Surrogate # 2	4-bromofluorobenzene		98%	101%	99%	

<sup>1</sup> Report results as a number greater than 0 or ND (not a <MDL value).

Lab sample notes:
A
B
C
D

I certify under penalties of law that I am the person authorized to fill out this form and the information contained herein is true, accurate and complete to the best extent of my knowledge.

Primary Lab Director Signature: 

Date: 22 March '12

If not submitting these results electronically, mail TWO copies of this report to your DEP Regional Office no later than 10 days after the end of the month in which you received this report or no later than 10 days after the end of the reporting period, whichever is sooner.

DEP REVIEW STATUS (Initial & date) Accepted _____ Disapproved _____	Review comments	WQTS data entered
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## Total Trihalomethanes Report

PWS Information: Please refer to your DEP Water Sampling Schedule (WQSS) to help complete this form.

PWS ID #: 4122000

City/Town: Hanover

PWS Name: Hanover Water Dept.

PWS Class: COM X NTNC NC

DEP Location (LOC) ID#	DEP Location Name	Sample Acidified?	Date Collected	Collected by
A 10380	640 King St.	X Yes	06/05/2012	T. Flynn
B 10383	Fire Station # 3	X Yes	06/05/2012	T. Flynn
C 10385	70 Ponderosa	X Yes	06/05/2012	T. Flynn
D		Yes		

Routine or Special Sample	Original or Resubmitted Report	If resubmitted report, list below:	
		Reason for resubmission	Collection date of original sample
A x RS SS	x Original Resubmitted Confirmation	Resample Reanalysis Report Corr.	
B x RS SS	x Original Resubmitted Confirmation	Resample Reanalysis Report Corr.	
C x RS SS	x Original Resubmitted Confirmation	Resample Reanalysis Report Corr.	
D RS SS	Original Resubmitted Confirmation	Resample Reanalysis Report Corr.	

Sample notes - (Such as manifold/multiple sample, list any sources that were on line during collection).

A
B
C
D

## II. Analytical Laboratory Information:

Primary Lab MA Cert. # M-MA022

Primary Lab Name: Analytical Balance Corp.

Subcontracted? Y x N

Analysis Lab MA Cert. # M-MA022

Analysis Lab Name: Analytical Balance Corp.

Contaminant	MCL (µg/L)	MDL (µg/L)	Results <sup>1</sup> (µg/L)			
			A	B	C	D
Total THMs	80	-----	67.5	106	109	
Bromoform		0.5	3.8	1.0	0.7	
Chloroform		0.5	35.6	60.8	63.0	
Bromodichloromethane		0.5	18.5	32.8	33.9	
Dibromochloromethane		0.5	9.6	10.9	11.0	
Lab method			EPA 524.2	EPA 524.2	EPA 524.2	
Date extracted (551.1 only)			-----	-----	-----	
Date analyzed			06/05/2012	06/05/2012	06/05/2012	
Lab Sample ID			47506-01	47506-02	47506-03	
Surrogate # 1	1,2-dichlorobenzene d <sub>4</sub>		107%	109%	110%	
Surrogate # 2	4-bromofluorobenzene		109%	111%	113%	

<sup>1</sup> Report results as a number greater than 0 or ND (not a <MDL value).

Lab sample notes:	
A	
B	Sample # 47506-02 exceeds the MCL for Total Trihalomethanes.
C	Sample # 47506-03 exceeds the MCL for Total Trihalomethanes.
D	

I certify under penalties of law that I am the person authorized to fill out this form and the information contained herein is true, accurate and complete to the best extent of my knowledge.

Primary Lab Director Signature: 

Date: 15 June 12

If not submitting these results electronically, mail TWO copies of this report to your DEP Regional Office no later than 10 days after the end of the month in which you received this report or no later than 10 days after the end of the reporting period, whichever is sooner.

DEP REVIEW STATUS (Initial & date) Accepted _____ Disapproved _____	Review comments	WQTS data entered
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Massachusetts Department of Environmental Protection - Drinking Water Program

# Trihalomethane Report

## Data Check - Unsigned

PWS ID #: 4122000 City/Town: HANOVER  
PWS Name: HANOVER WATER DEPT  
Primary Lab MA Cert #: M-MA022 Primary Lab Name: ANALYTICAL BALANCE CORP

PWS Class: COM

<b>Location ID</b>	<b>Location</b>	<b>Routine/ Special:</b>	<b>Collected By:</b>	<b>Collection Date:</b>	<b>O/R/C:</b>	<b>Resubmit Reason:</b>	<b>Original Collection:</b>
10380	640 KING STREET	RS	W. MILLS	9/18/2012	O		
<b>Sample Comments:</b>		<b>Analysis Comments:</b>		<b>Lab Sample ID:</b>			
				125108001			

<b>Contaminant:</b>	<b>Result:</b>	<b>UOM:</b>	<b>MDL:</b>	<b>Analytical Method:</b>	<b>Analysis Date:</b>	<b>Analytical Lab ID:</b>	<b>Analytical Lab:</b>
BROMODICHLOROMETHANE	9.6	UG/L	0.5	EPA 524.2	9/18/2012	M-MA022	ANALYTICAL BALANCE CORP
BROMOFORM	2.6	UG/L	0.5	EPA 524.2	9/18/2012	M-MA022	ANALYTICAL BALANCE CORP
CHLOROFORM	12.9	UG/L	0.5	EPA 524.2	9/18/2012	M-MA022	ANALYTICAL BALANCE CORP
DIBROMOCHLOROMETHANE	6.4	UG/L	0.5	EPA 524.2	9/18/2012	M-MA022	ANALYTICAL BALANCE CORP
TOTAL TRIHALOMETHANES	31.5	UG/L	0.5	EPA 524.2	9/18/2012	M-MA022	ANALYTICAL BALANCE CORP

<b>Location ID</b>	<b>Location</b>	<b>Routine/ Special:</b>	<b>Collected By:</b>	<b>Collection Date:</b>	<b>O/R/C:</b>	<b>Resubmit Reason:</b>	<b>Original Collection:</b>
10383	FIRE STATION #3	RS	W. MILLS	9/18/2012	O		
<b>Sample Comments:</b>		<b>Analysis Comments:</b>		<b>Lab Sample ID:</b>			
				125108002			

<b>Contaminant:</b>	<b>Result:</b>	<b>UOM:</b>	<b>MDL:</b>	<b>Analytical Method:</b>	<b>Analysis Date:</b>	<b>Analytical Lab ID:</b>	<b>Analytical Lab:</b>
BROMODICHLOROMETHANE	26.2	UG/L	0.5	EPA 524.2	9/18/2012	M-MA022	ANALYTICAL BALANCE CORP
BROMOFORM	2.2	UG/L	0.5	EPA 524.2	9/18/2012	M-MA022	ANALYTICAL BALANCE CORP
CHLOROFORM	53.6	UG/L	0.5	EPA 524.2	9/18/2012	M-MA022	ANALYTICAL BALANCE CORP
DIBROMOCHLOROMETHANE	10.2	UG/L	0.5	EPA 524.2	9/18/2012	M-MA022	ANALYTICAL BALANCE CORP
TOTAL TRIHALOMETHANES	92.2	UG/L	0.5	EPA 524.2	9/18/2012	M-MA022	ANALYTICAL BALANCE CORP

<b>Location ID</b>	<b>Location</b>	<b>Routine/ Special:</b>	<b>Collected By:</b>	<b>Collection Date:</b>	<b>O/R/C:</b>	<b>Resubmit Reason:</b>	<b>Original Collection:</b>
10385	70 PONDEROSA	RS	W. MILLS	9/18/2012	O		
<b>Sample Comments:</b>		<b>Analysis Comments:</b>		<b>Lab Sample ID:</b>			
				125108003			

<b>Contaminant:</b>	<b>Result:</b>	<b>UOM:</b>	<b>MDL:</b>	<b>Analytical Method:</b>	<b>Analysis Date:</b>	<b>Analytical Lab ID:</b>	<b>Analytical Lab:</b>
BROMODICHLOROMETHANE	29.7	UG/L	0.5	EPA 524.2	9/18/2012	M-MA022	ANALYTICAL BALANCE CORP
BROMOFORM	1.5	UG/L	0.5	EPA 524.2	9/18/2012	M-MA022	ANALYTICAL BALANCE CORP
CHLOROFORM	62.7	UG/L	0.5	EPA 524.2	9/18/2012	M-MA022	ANALYTICAL BALANCE CORP

M/S = Multiple or Single sources represented in sample site.

D/S = Distribution or Source sample site.

R/F = Raw or Finished water sample site.

MDL = Method Detection Limit.

UOM = Unit of Measurement.

O/R/C = Original submittal or Resubmitted submittal or Confirmation sample.

PWS ID #: 4122000

PWS Name: HANOVER WATER DEPT

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Massachusetts Department of Environmental Protection - Drinking Water Program

## Trihalomethane Report

## Data Check - Unsigned

DIBROMOCHLOROMETHANE	10.5	UG/L	0.5	EPA 524.2	9/18/2012	M-MA022	ANALYTICAL BALANCE CORP
TOTAL TRIHALOMETHANES	104	UG/L	0.5	EPA 524.2	9/18/2012	M-MA022	ANALYTICAL BALANCE CORP

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EDEP Transaction ID: 508441

M/S = Multiple or Single sources represented in sample site.  
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PWS ID #: 4122000  
PWS Name: HANOVER WATER DEPT

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PWS ID #: 4122000 City/Town: HANOVER  
 PWS Name: HANOVER WATER DEPT  
 Primary Lab MA Cert #: M-MA022 Primary Lab Name: ANALYTICAL BALANCE CORP

PWS Class: COM

Location ID	Location	Routine/ Special:	Collected By:	Collection Date:	O/R/C:	Resubmit Reason:	Original Collection:
10380	640 KING STREET	RS	W. MILLS	11/6/2012	O		
Sample Comments:		Analysis Comments:		Lab Sample ID: 125250601			

Contaminant:	Result:	UOM:	MDL:	Analytical Method:	Analysis Date:	Analytical Lab ID:	Analytical Lab:
BROMODICHLOROMETHANE	12.2	UG/L	0.5	EPA 524.2	11/6/2012	M-MA022	ANALYTICAL BALANCE CORP
BROMOFORM	0.8	UG/L	0.5	EPA 524.2	11/6/2012	M-MA022	ANALYTICAL BALANCE CORP
CHLOROFORM	20.2	UG/L	0.5	EPA 524.2	11/6/2012	M-MA022	ANALYTICAL BALANCE CORP
DIBROMOCHLOROMETHANE	3.9	UG/L	0.5	EPA 524.2	11/6/2012	M-MA022	ANALYTICAL BALANCE CORP
TOTAL TRIHALOMETHANES	37.1	UG/L	0.5	EPA 524.2	11/6/2012	M-MA022	ANALYTICAL BALANCE CORP

Location ID	Location	Routine/ Special:	Collected By:	Collection Date:	O/R/C:	Resubmit Reason:	Original Collection:
10383	FIRE STATION #3	RS	W. MILLS	11/6/2012	O		
Sample Comments:		Analysis Comments:		Lab Sample ID: 125250602			

Contaminant:	Result:	UOM:	MDL:	Analytical Method:	Analysis Date:	Analytical Lab ID:	Analytical Lab:
BROMODICHLOROMETHANE	21.1	UG/L	0.5	EPA 524.2	11/6/2012	M-MA022	ANALYTICAL BALANCE CORP
BROMOFORM	3.1	UG/L	0.5	EPA 524.2	11/6/2012	M-MA022	ANALYTICAL BALANCE CORP
CHLOROFORM	42.2	UG/L	0.5	EPA 524.2	11/6/2012	M-MA022	ANALYTICAL BALANCE CORP
DIBROMOCHLOROMETHANE	10.6	UG/L	0.5	EPA 524.2	11/6/2012	M-MA022	ANALYTICAL BALANCE CORP
TOTAL TRIHALOMETHANES	77.0	UG/L	0.5	EPA 524.2	11/6/2012	M-MA022	ANALYTICAL BALANCE CORP

Location ID	Location	Routine/ Special:	Collected By:	Collection Date:	O/R/C:	Resubmit Reason:	Original Collection:
10385	70 PONDEROSA	RS	W. MILLS	11/6/2012	O		
Sample Comments:		Analysis Comments:		Lab Sample ID: 125250603			

Contaminant:	Result:	UOM:	MDL:	Analytical Method:	Analysis Date:	Analytical Lab ID:	Analytical Lab:
BROMODICHLOROMETHANE	26.7	UG/L	0.5	EPA 524.2	11/6/2012	M-MA022	ANALYTICAL BALANCE CORP
BROMOFORM	1.0	UG/L	0.5	EPA 524.2	11/6/2012	M-MA022	ANALYTICAL BALANCE CORP
CHLOROFORM	54.9	UG/L	0.5	EPA 524.2	11/6/2012	M-MA022	ANALYTICAL BALANCE CORP

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PWS ID #: 4122000

PWS Name: HANOVER WATER DEPT

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DIBROMOCHLOROMETHANE	10.6	UG/L	0.5	EPA 524.2	11/6/2012	M-MA022	ANALYTICAL BALANCE CORP
TOTAL TRIHALOMETHANES	93.2	UG/L	0.5	EPA 524.2	11/6/2012	M-MA022	ANALYTICAL BALANCE CORP

Primary Lab Signature: Robert Bentley

Date: 11/29/2012

Certified Signer User Name: ANALYTICAL

EDEP Transaction ID: 523709

M/S = Multiple or Single sources represented in sample site.  
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R/F = Raw or Finished water sample site.  
MDL = Method Detection Limit.  
UOM = Unit of Measurement.  
O/R/C = Original submittal or Resubmitted submittal or Confirmation sample.

PWS ID #: 4122000  
PWS Name: HANOVER WATER DEPT

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