

# AQUEOUS

## Surface Water Test

### Laboratory Details

Att:.....

Laboratory: .....

### Customer & Sample Details

Name: .....

Address: .....

Telephone: ..... Fax: .....

Sample taken from: ..... Date:.....

### Please test the accompanying sample for the following and forward the results to customer and

#### Aqueous:

- |   |   |
|---|---|
| <input type="checkbox"/> pH   | <input type="checkbox"/> Silica (SiO <sub>2</sub> )                 |
| <input type="checkbox"/> Total Suspended Solids (TSS)                 | <input type="checkbox"/> Aluminium (Al)                             |
| <input type="checkbox"/> Total Dissolved solids (TDS)                 | <input type="checkbox"/> Iron total (Fe)                            |
| <input type="checkbox"/> Ammonium (NH <sub>4</sub> <sup>+</sup> )     | <input type="checkbox"/> Manganese (Mn <sup>2+</sup> )              |
| <input type="checkbox"/> Potassium (K <sup>+</sup> )                  | <input type="checkbox"/> Strontium (Sr)                             |
| <input type="checkbox"/> Sodium (Na <sup>+</sup> )                    | <input type="checkbox"/> Barium (Ba)                                |
| <input type="checkbox"/> Magnesium (Mg <sup>2+</sup> )                | <input type="checkbox"/> Phosphate (PO <sub>4</sub> <sup>3-</sup> ) |
| <input type="checkbox"/> Calcium (Ca <sup>2+</sup> )                  | <input type="checkbox"/> Turbidity                                  |
| <input type="checkbox"/> Carbonate (CO <sub>3</sub> <sup>2-</sup> )   | <input type="checkbox"/> COD  |
| <input type="checkbox"/> Bicarbonate (HCO <sub>3</sub> <sup>-</sup> ) | <input type="checkbox"/> TOC  |
| <input type="checkbox"/> Nitrate (NO <sub>3</sub> <sup>-</sup> )      | <input type="checkbox"/> Total Colony Count                         |
| <input type="checkbox"/> Chloride (Cl <sup>-</sup> )                  | <input type="checkbox"/> Total Coliform Count                       |
| <input type="checkbox"/> Fluoride (F <sup>-</sup> )                   | <input type="checkbox"/> E. Coli                                    |
| <input type="checkbox"/> Sulphate (SO <sub>4</sub> <sup>2-</sup> )    | <input type="checkbox"/> TKN  |

### Surface Water Testing Procedure

1. Take sample for under the water surface.
2. Please advise any observations regarding the water e.g.:
  - Clarity of water - i.e. cloudy, milky, hazy, colour tint, obvious sediment, odour, or other.
  - Does the water cause staining, red, white or black, on fixtures or on the ground when regularly used?
3. Get sample bottles from lab for water analysis and micro sampling
4. Get sampling and deliver instruction from the laboratory