

NEW MAIN SAMPLE SHEET

This form to be used in areas where an Illinois American Representative has approved the samples to be collected by the contractor or inspector.

Section 1 - Project Information

Date:	Completed by:	
Notes:		
Date of Flushing:		
Mobile Number:		
Method of Disinfection:		
Project Foreman:		
Date of Disinfection:		
Turbidity:	_	
Total Chlorine:	mg/l	
Free chlorine:	mg/l	
Chlorine Residual		
City, State, Zip:		
IAWC Sample Location:		
Sample Bottle Number:		
Section 2 - Sample Infor	rmation	
Contract Number:		
Prepared by:		
Contractor:		
IEPA Permit #:		
Project Name:		