

ANALYSIS REPORT SUMMARY

PURSUANT TO N.J.A.C. 8:21-5.15(b)

Submit a summary form as cover for each analysis report. All analysis reports must be submitted together with a Bulk or Bottled Water Establishment Application. Analysis reports are not accepted without a separate summary cover. Complete all information.

FACILITY INFORMATION

Name of Applicant Bottling Plant or Bulk Water Facility	NJ Permit # (if applying for a new permit, write "NEW")		
Address of Applicant Bottling Plant or Bulk Water Facility	City	State	ZIP

ANALYSIS REPORT INFORMATION

Name and address of certified laboratory (approved by New Jersey Department of Environmental Protection) performing analysis		
Laboratory certification number	Analysis date	Sample collection date

SAMPLE DESCRIPTION

☐ Source Water ☐ Finished Product

SOURCE WATER

If you checked *Source Water* above, enter the name and origin location of sampled source water.

Name of source
Full location street address of source (if there is no street address, enter coordinates in latitude, longitude)

FINISHED PRODUCT TYPE

If you checked *Finished Product* above, check the type of sampled finished product water.

<input type="checkbox"/> Artesian Water	<input type="checkbox"/> Ground Water	<input type="checkbox"/> Mineral Water	<input type="checkbox"/> Well Water	<input type="checkbox"/> Sparkling Water
<input type="checkbox"/> Spring Water	<input type="checkbox"/> Sterilized Water			
<input type="checkbox"/> Purified Water (check one below)				
<input type="checkbox"/> Deionized Water	<input type="checkbox"/> Distilled Water	<input type="checkbox"/> Reverse Osmosis		
<input type="checkbox"/> Other Purified Water (please specify):				

FINISHED PRODUCT BRANDS

If you checked *Finished Product* above, list all product brand names that use the sampled water.

WATER ANALYSIS RESULTS

Enter all analysis results requested within this form. Blank forms are not accepted. Pay close attention to the unit of measurement: the standard limit's unit of measurement may not match the unit of measurement in the analysis report provided by your laboratory. If necessary, convert the unit of measurement before entering the result here.

Attach a copy of the original analysis report as documentation and evidence of accuracy. Forms which are submitted without the original analysis report are not accepted.

INORGANICS

ANALYSIS PERFORMED	STANDARD LIMIT	ANALYSIS RESULT
Antimony	6 ppb (ug/L)	
Arsenic	10 ppb (ug/L)	
Asbestos	7x10 ⁶ fibers/L > 10µm	
Barium	2000 ppb (ug/L)	
Beryllium	4 ppb (ug/L)	
Cadmium	5 ppb (ug/L)	
Chromium	100 ppb (ug/L)	
Copper	1000 ppb (ug/L)	
Cyanide	200 ppb (ug/L)	
Fluoride	2000 ppb (ug/L)	
Lead	5 ppb (ug/L)	
Mercury	2 ppb (ug/L)	
Nitrate	10000 ppb (ug/L)	
Nitrite	1000 ppb (ug/L)	
Nitrate/Nitrite combined	10000 ppb (ug/L)	
Selenium	50 ppb (ug/L)	
Thallium	2 ppb (ug/L)	

SYNTHETIC ORGANIC COMPOUNDS

ANALYSIS PERFORMED	STANDARD LIMIT	ANALYSIS RESULT
Alachlor	2 ppb (ug/L)	
Atrazine	3 ppb (ug/L)	
Benzo[a]pyrene	0.2 ppb (ug/L)	
Carbofuran	40 ppb (ug/L)	
Chlordane	0.5 ppb (ug/L)	
Dalapon	200 ppb (ug/L)	
DBCP (Dibromochloropropane)	0.2 ppb (ug/L)	
Di[2-ethylhexyl] adipate	400 ppb (ug/L)	
Di[2-ethylhexyl] phthalate	6 ppb (ug/L)	
Dinoseb	7 ppb (ug/L)	
Diquat	20 ppb (ug/L)	
Endothall	100 ppb (ug/L)	
Endrin	2 ppb (ug/L)	
Ethylene Dibromide (EDB)	0.05 ppb (ug/L)	
Glyphosate	700 ppb (ug/L)	
Heptachlor	0.4 ppb (ug/L)	
Heptachlor Epoxide	0.2 ppb (ug/L)	
Hexachlorobenzene	1 ppb (ug/L)	
Hexachlorocyclopentadiene	50 ppb (ug/L)	

Lindane	0.2 ppb (ug/L)	
Methoxychlor	40 ppb (ug/L)	
Oxamyl	200 ppb (ug/L)	
PCBs (Polychlorinated Biphenyls)	0.5 ppb (ug/L)	
Pentachlorophenol	1 ppb (ug/L)	
Picloram	500 ppb (ug/L)	
Simazine	4 ppb (ug/L)	
Toxaphene	3 ppb (ug/L)	
2,3,7,8-TCDD (Dioxin)	3x10 ⁻⁵ ppb (ug/L)	
2,4,5-TP (Silvex)	50 ppb (ug/L)	
2,4-D (2,4-Dichlorophenoxyacetic Acid)	70 ppb (ug/L)	
Benzene	1 ppb (ug/L)	
Carbon Tetrachloride	2 ppb (ug/L)	
meta-Dichlorobenzene	600 ppb (ug/L)	
ortho-Dichlorobenzene	600 ppb (ug/L)	
para-Dichlorobenzene	75 ppb (ug/L)	
1,1-Dichloroethane	50 ppb (ug/L)	
1,2-Dichloroethane	2 ppb (ug/L)	
1,1-Dichloroethylene	2 ppb (ug/L)	
cis-1,2-Dichloroethylene	70 ppb (ug/L)	
trans-1,2-Dichloroethylene	100 ppb (ug/L)	
1,2-Dichloropropane	5 ppb (ug/L)	
Ethylbenzene	700 ppb (ug/L)	
Methyl Tertiary Butyl Ether	70 ppb (ug/L)	
Phenols	1 ppb (ug/L)	
Perfluorononanoic Acid	0.013 ppb (ug/L)	
1,2,3 Trichloropropane	0.03 ppb (ug/L)	
Methylene Chloride	3 ppb (ug/L)	
Monochlorobenzene	50 ppb (ug/L)	
Napthalene	300 ppb (ug/L)	
Styrene	100 ppb (ug/L)	
1,1,2,2-Tetrachloroethane	1 ppb (ug/L)	
Tetrachloroethylene	1 ppb (ug/L)	
Toluene	1000 ppb (ug/L)	
1,2,4-Trichlorobenzene	9 ppb (ug/L)	
1,1,1-Trichloroethane	30 ppb (ug/L)	
1,1,2-Trichloroethane	3 ppb (ug/L)	
Trichloroethylene	1 ppb (ug/L)	
Vinyl Chloride	2 ppb (ug/L)	
Xylenes	1000 ppb (ug/L)	
Perfluorooctanesulfonic Acid	0.013 ppb (ug/L)	
Perfluorooctanoic Acid	0.014 ppb (ug/L)	

PHYSICAL AND CHEMICAL CHARACTERISTICS

ANALYSIS PERFORMED	STANDARD LIMIT	ANALYSIS RESULT
Color	10 color units	
pH	6.5 to 8.5	
Odor	3 TON (threshold odor number)	
Taste	Non objectionable	

Turbidity	5 NTU	
Foaming Agents (MBAS)	0.5 ppm (mg/L)	
Aluminum	0.2 ppm (mg/L)	
Chloride	250 ppm (mg/L)	
Hardness	250 ppm (mg/L)	
Iron	0.3 ppm (mg/L)	
Manganese	0.05 ppm (mg/L)	
Silver	0.1 ppm (mg/L)	
Sodium	50 ppm (mg/L)	
Sulfate	250 ppm (mg/L)	
Total Dissolved Solids (TDS)	500 ppm (mg/L)	
Zinc	5 ppm (mg/L)	

DISINFECTANT/DISINFECTANT BY-PRODUCTS

ANALYSIS PERFORMED	STANDARD LIMIT	ANALYSIS RESULT
Haloacetic Acids	60 ppb (ug/L)	
Chlorite	1000 ppb (ug/L)	
Bromate	10 ppb (ug/L)	
Chlorine	4000 ppb (ug/L)	
Chloramine	4000 ppb (ug/L)	
Chlorine Dioxide	800 ppb (ug/L)	

TRIHALOMETHANES/RADIONUCLIDE

ANALYSIS PERFORMED	STANDARD LIMIT	ANALYSIS RESULT
Total Trihalomethanes (THMs) (Bromoform, Dibromochloromethane, Chloroform, Dichlorobromomethane)	80 ppb (ug/L)	
Gross Alpha	15 pCi/L	
Gross Beta	50 pCi/L	
Radium 226	5 pCi/L	
Radium 228	5 pCi/L	
Combined Radium 226 and 228	5 pCi/L	

MICROBIOLOGICAL

ANALYSIS PERFORMED	STANDARD LIMIT	ANALYSIS RESULT
Total Coliform	Absent by Presence/Absence Method	
Fecal Coliform	Absent by Presence/Absence Method	

CERTIFICATION TO BE SIGNED BY THE DESIGNATED REPRESENTATIVE OF THE APPLICANT FACILITY

With my signature below, I certify that a complete microbiological, physical, chemical, radiological, and hazardous contaminants analysis is attached. I certify that I have reviewed all information provided in this summary and that all information is true and complete. I understand that the furnishing of fraudulent information will be subject to penalty.

Full Name of Designated Representative	Title
Signature	Direct Contact Email Address