

Arizona Department of Environmental Quality  
**Drinking Water Synthetic Organic Chemical Analysis Reporting Form**  
 \*\*\* Entry Point to the Distribution System (EPDS) Only \*\*\*

PWS ID#: AZ04 \_\_\_\_\_

PWS Name: \_\_\_\_\_

\_\_\_\_\_: \_\_\_\_\_ (24 hr clock)  
 Sample Date Sample Time

(\_\_\_\_\_) \_\_\_\_\_  
 Owner/Contact Person

(\_\_\_\_\_) \_\_\_\_\_  
 Owner/Contact Fax Number

(\_\_\_\_\_) \_\_\_\_\_  
 Owner/Contact Phone Number

Sample Type:  
 Compliance Monitoring

Sample Collection Point:  
 EPDS # \_\_\_\_\_

\_\_\_\_\_  
 Sampling Site ID

<p><b>For MCL or Composite Sample Level Exceedance</b>          _____ Original Violation Specimen Number</p> <p>Sample Type:</p> <p><input type="checkbox"/> Confirmation <input type="checkbox"/> Re-analysis  <input type="checkbox"/> Confirmation Composite <input type="checkbox"/> Re-sample</p>
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**SYNTHETIC ORGANIC CHEMICAL ANALYSIS**  
 >>>To be completed by laboratory personnel<<<

Analysis Method	MCL	Reporting Limit	Contaminant Name	Cont. Code	Analysis Run Date	Result	Exceeds MCL	Exceeds Reporting Limit
_____	0.07	.0001	2,4-D	2105	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.05	.0002	2,4,5-TP (Silvex)	2110	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.003	.001	Toxaphene	2020	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.002	.0002	Alachlor (Lasso)	2051	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.003	.0001	Atrazine	2050	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.04	.0009	Carbofuran	2046	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.001	.00004	Pentachlorophenol	2326	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.002	.0002	Chlorodane	2959	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.0002	.00002	Dibromochloropropane (DBCP)	2931	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.00005	.00001	Ethylene Dibromide (EDB)	2946	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.0004	.00004	Heptachlor	2065	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.0002	.00002	Heptachlor epoxide	2067	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.0002	.00002	Lindane	2010	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.0002	.00002	Benzo(a)pyrene	2306	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.2	.001	Dalapon	2031	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.006	.0006	Di(2-ethylhexyl)phthalate	2039	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.4	.0006	Di(2-ethylhexyl)adipate	2035	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.007	.0002	Dinoseb	2041	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

Specimen Number: \_\_\_\_\_  
 DWAR-3: Revised 1/2010

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**Drinking Water Synthetic Organic Chemical Analysis Reporting Form**  
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PWS ID#: AZ04 \_\_\_\_\_

PWS Name: \_\_\_\_\_

Sample Collection Point:

EPDS # \_\_\_\_\_

\_\_\_\_\_  
 Sampling Site ID

**SYNTHETIC ORGANIC CHEMICAL ANALYSIS**

>>>To be completed by laboratory personnel<<<

Analysis Method	MCL	Reporting Limit	Contaminant Name	Cont. Code	Analysis Run Date	Result	Exceeds MCL	Exceeds Reporting Limit
_____	3x10 <sup>-8</sup>	5x10 <sup>-9</sup>	2,3,7,8-TCDD (Dioxin)	2063	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.02	.0004	Diquat	2032	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.1	.009	Endothall	2033	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.002	.00001	Endrin	2005	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.7	.006	Glyphosate	2034	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.001	.0001	Hexachlorobenzene	2274	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.05	.0001	Hexachlorocyclopentadiene	2042	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.2	.002	Oxamyl	2036	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.5	.0001	Picloram	2040	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.004	.00007	Simazine	2037	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.04	.0001	Methoxychlor	2015	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.0005	.0001	PCB:Polychlorinated Biphenyls	2383	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>
_____	0.001	.00004	Pentachlorophenol	2326	_____	_____	<input type="checkbox"/>	<input type="checkbox"/>

**Laboratory Information**

>>>To be completed by laboratory personnel<<<

Lab ID Number: \_\_\_\_\_

Specimen Number: \_\_\_\_\_

Name: \_\_\_\_\_

Printed Name and Phone Number of Lab Contact: \_\_\_\_\_

Authorized Signature: \_\_\_\_\_

Date Public Water System Notified: \_\_\_\_\_

Comments: \_\_\_\_\_

All units must be reported in milligrams per liter (mg/L)  
 DWAR-3: Revised 1/2010

**Instructions for Using the Arizona Department of Environmental Quality  
Synthetic Organic Chemical Analysis Reporting Form**

Revised 2010

**SYSTEM ID:** This a unique 5 digit Public Water Identification (PWSID) number assigned to each public water system by ADEQ.

**SYSTEM NAME:** This should be the legal name which the water system has registered with the Arizona Corporation Commission (ACC). If the system is a municipality or other non ACC regulated entity, this should reflect the legal structure, such as XYZ Water Improvement District. Always notify the Department in writing of any name or ownership change. All water system names need to be listed.

**SAMPLE DATE:** The date the specimen was collected in mm/dd/yy format.

**SAMPLE TIME:** The time the specimen was collected in hh:mm format (24 hr clock time).

**OWNER/CONTACT PERSON NAME:** The first and last name of the owner or owner's representative (contact person), who should be contacted with sample results. .

**OWNER/CONTACT PHONE#:** The daytime phone number of the owner, or owner's representative (contact person), who should be contacted with sample results. All phone numbers need to be listed.

**SAMPLE TYPE:** State the compliance reason for specimen collection. Only the relevant sample types for each contaminant group are provided on the ADEQ forms. Mark only one sample type for form.

**EPDS ID:** The location within the water system where the sample was taken and its assigned identifying number. Entry Point to the Distribution System (EPDS) location – use this location for inorganic and organic chemical samples. Each sample is taken at the EPDS, which means the point at which water is discharged into the distribution system from the well, storage tank, pressure tank, or treatment facility. It is after treatment but prior to the first service connection. The three digit number is assigned by ADEQ. All EPDS numbers need to be listed.

**SAMPLING SITE ID:** This is for your convenience so that you may put in an address or other location. This does not need to be completed.

**SPECIMEN NUMBER:** A unique 15 character (max) alphanumeric code that identifies a particular sample used to test one contaminant or one category of contaminants. If reporting on separate reporting forms, a different (unique) number is required for each contaminant group and for each report.

**FOR MCL EXCEEDENCE ONLY/ORIGINAL VIOLATING SPECIMEN NUMBER:** This is the unique 15 character (maximum length) alphanumeric code that identified the original specific sample that initiated the repeat/confirmation sampling requirement (See SPECIMEN# above). For composite sample analysis results that exceed the reporting level and require a confirmation sample, the specimen number of the individual samples comprising the composite sample will be reported as the "Original Violating Specimen number" in this section.

**PLEASE MAIL COMPLETED FORM TO:**

ARIZONA DEPARTMENT OF ENVIRONMENTAL QUALITY  
WATER QUALITY COMPLIANCE DATA UNIT (MC 5415B-1)  
1110 W. WASHINGTON ST.  
PHOENIX, AZ 85007  
Fax: (602) 771-4505

NOTE: These definitions are general in nature. For specific questions regarding your laboratory submittal, please call (602) 771-4513 or within AZ 1-800-234-5677, ext. 4513.

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Copies of this form are available from the ADEQ website at [www.azdeq.gov](http://www.azdeq.gov).

Go to <http://www.azdeq.gov/function/forms/appswater.html#sdw> , scroll down to laboratory reporting forms and click on DWAR-3 Synthetic Organic Chemical Analysis Report.