**- PLEASE READ THESE INSTRUCTIONS BEFORE COLLECTING A SAMPLE -**

Samples are being collected to determine lead and copper levels in your tap water. Thissampling effort is required by the U.S. Environmental Protection Agency and the New Jersey Department of Environmental Protection (NJDEP) under the Federal and State Safe Drinking Water Acts. These samples must be collected from our service area and help assess the need for, or the effectiveness of, corrosion control treatment to minimize consumers’ exposure to lead and/or copper through drinking water.

A consumer notice of the results from this sampling effort and information about lead are required to be visibly posted as soon as possible but no later than 30 days of receiving the results from the laboratory. In the event of a lead action level exceedance, public education material must be visibly posted and distributed to persons served by the water system (e.g., employees, customers). Templates can be found at: <http://www.nj.gov/dep/watersupply/dws-sampreg.html>.

You must sample from a sample site outlined in your Lead and Copper Sampling Plan. If any revisions have been made to your sample sites, such as plumbing repairs or site changes, a new sample site may be required to be sampled from. If your Lead and Copper Sampling Plan has been approved by the NJDEP a revised PbCu Sample Location Spreadsheet (BWSE-18 form) must be submitted to the NJDEP and your laboratory prior to sample collection.

The sample collection procedure described below must be followed to ensure accurate and acceptable lead and copper samples are collected.

1. Do not use any water within your home or building(s) (restrict access to the building if possible) for a minimum of 6 hours prior to sample collection. This includes irrigation, toilets and other outlets even if they are not to be sampled. If sample taps are tempered, turn the hot water off at least 6 hours prior to sampling. Either early mornings prior to using any water within the home/building or, in residential situations, the evenings upon returning home from work are the best sampling times. Do not intentionally flush the tap before the start of the 6-hour stagnation period. OPTIONAL: Since the facility operates 24 hours per day, make arrangements to implement the procedure(s) outlined in your Lead and Copper Sampling Plan for meeting the minimum 6-hour stagnation time OR longest standing time approved by NJDEP.
2. Samples must be collected from the sample sites outlined in your Lead and Copper Sampling Plan starting with the designated standard sites. These are taps typically used for human consumption (e.g., kitchen sink, water fountain).
	1. If a standard site is not available, then an alternate site must be used; if possible, the alternate site should be in close proximity to the standard site. If a different site is sampled from the previous monitoring period, NJDEP must be notified within 10 days following the end of the monitoring period using the Sample Site Change Form (BSDW-56).
3. Do not collect a sample from sites that have a point of use treatment unit, such as a water softener or filter designed to remove inorganic compounds, unless previously approved by the NJDEP. If you do, be sure to document it properly in the table below.
4. Do not sample a site not in use or that has not been used for a significant period of time (e.g., the building is closed for the season, vacant building, resident on vacation).
5. Do not collect the sample if the minimum 6-hour stagnation time has not been met (refer to #1).
6. Do not remove or clean the aerator/screen prior to sampling. Place the opened wide-mouth sample bottle below the faucet and open the **cold** water tap as you would do to fill a glass of water. Fill the sample bottle to the line marked “1000-mL” and turn off the water.
7. Follow any additional procedures outlined in your Lead and Copper Sampling Plan regarding system-specific details and the laboratory sampling protocols.
8. Tightly cap the sample bottle OPTIONAL: and place it in the sample kit provided. Please review the sample kit label now to ensure that all information contained on the label is correct.
9. **Complete the table labeled “TO BE COMPLETED BY: Water System Representative Collecting the Sample” on the attached Chain of Custody Sign Off Page for each sample site location.**

Call [WATER SYSTEM] at [PHONE NUMBER] if you have questions regarding these instructions, if you have had plumbing or sample sites changes, if there is a point of use treatment unit installed, or if a site has not been used for a significant period of time.

**- CHAIN OF CUSTODY SIGN OFF PAGE –**

|  |
| --- |
| **TO BE COMPLETED BY: Responsible Party that Dropped Off the Sample Bottle to the Water System** |
| Print Name: | Title/Affiliation: |
| Signature: | Date and Time (Dropped Off): |
| Public Water System Identification Number (7 digits): **NJ** | Water System Name: |

|  |
| --- |
| **TO BE COMPLETED BY: Water System Representative Collecting the Sample** |
| Sample Site Address/Location:  |
| Does the water system have NJDEP approved PBCU sample sites? Yes [ ]  No [ ] If yes, PBCU#: \_\_\_\_\_\_\_\_\_\_; Standard [ ]  Alternate [ ] If no, Sample Faucet/Tap Type: Kitchen/Food Prep [ ] Bathroom [ ]  Other [ ] Describe: |
| Was a point of use filter/treatment unit in operation at the site being sampled? Yes [ ]  No [ ] If yes, indicate the type of treatment unit: |
| Do you have a whole house/building treatment unit? Yes [ ]  No [ ] If yes, indicate the type of treatment unit: |
| Does the facility operate 24-hours per day? Yes [ ]  No [ ] If yes, were procedures completed to ensure that the 6-hour stagnation period or NJDEP approved longest standing time was met? Yes [ ]  No [ ]  |
| Have there been any interior plumbing changes since the last sampling event? Yes [ ]  No [ ]  N/A [ ] If yes, explain: |
| **Water in the home/building was last used at:**Date: Time: AM [ ]  PM [ ]  | **Sample was collected at:** Date: Time: AM [ ]  PM [ ]  |
| How will the sample bottle and instructions be provided to the laboratory (select one)?Called responsible party to pick up [ ]  Dropped off at laboratory [ ]  Other [ ] Explain:  |
| When were the sample bottle and these instructions provided to your laboratory/responsible party? Date: Time: AM [ ]  PM [ ]  |
| **I have read and collected a sample in accordance with the provided directions.** |
| Print name: | Phone number/email: |
| Signature: | Date: |
| Title: | Affiliation: |

|  |
| --- |
| **TO BE COMPLETED BY: Responsible Party that Obtained the Sample Bottle After Sample Collection** |
| Print Name: | Title/Affiliation: |
| Signature: | Date and Time (Obtained): |

|  |
| --- |
| **TO BE COMPLETED BY: Responsible Party that Dropped Off the Sample Bottle to the Laboratory** |
| Print Name: | Title/Affiliation: |
| Signature: | Date and Time (Dropped Off): |

|  |
| --- |
| **TO BE COMPLETED BY: Laboratory Personnel that Received the Sample Bottle** |
| Print Name: | Title/Affiliation: |
| Signature: | Date and Time (Received): |