

DISINFECTION BYPRODUCTS SAMPLE PLAN QUESTIONNAIRE

THIS SPACE FOR OFFICE USE ONLY			
Multiple Wells Determination provided: Yes <input type="checkbox"/> No <input type="checkbox"/>	Multiple Wells complete: Yes <input type="checkbox"/> No <input type="checkbox"/>		
Sample Plan complete: Yes <input type="checkbox"/> No <input type="checkbox"/>	Monitor for Bromate: Yes <input type="checkbox"/> No <input type="checkbox"/>		

1. Public Water System ID number: _____ County: _____

2.

Public Water System	Water System Type	Number of Treatment Plants	Number of Wells Springs	Population	Required Samples

¹This is the maximum sampling required. Actual samples required may be reduced if wells/springs are drawing from the same aquifer.

3. Is it possible that your water system may be approved for fewer samples based on multiple wells and/or springs drawing from the same aquifer? **Yes/No**
 If yes, please continue.
 If no, please skip to **Item 6.**
4. Do you have information that can prove the wells/springs are drawing from the same aquifer? Yes No
 If yes, please supply this documentation as a part of the **Multiple Wells Questionnaire.**
 If no, please continue.
5. Provide the following information about your wells/springs on the attached sheet entitled **Multiple Wells Questionnaire.**
- a. What is the distance between the wells? Please provide a sketch.
 - b. Are there any watercourses that separate the wells? Yes No
 If yes, please indicate on sketch.
 - c. In what hydrographic basin is each well? You may contact the Division of Water Resources for this information at (775) 687-4380, extension 5.
 - d. What is the depth of each well?
 - e. What is the water temperature of the source water from each well/spring?
 - f. Is the water blended prior to disinfection? Yes No
 If yes, please indicate blending and disinfection location(s) on sketch.
 - g. How frequently is the water blended?
6. Provide a Sample Plan on the attached sheet entitled **Disinfection Byproducts Sample Plan.**
7. Does the water system use ozone? Yes No
 If yes, the water system will be required to monitor for Bromate.

8. _____ (_____) _____
 Print Name Telephone Number

 Signature Date

For Questions Please Contact:
 State of Nevada: Andrea Seifert (775) 687-9526
 Washoe County: Bryan Tyre (775) 328-2430
 Clark County: Mark Bergtholdt (702) 759-0677