

# Disinfectants/Disinfection Byproduct Rule Monitoring Plan

System Name: \_\_\_\_\_ System Number: \_\_\_\_\_

Address: \_\_\_\_\_

Contact Person: \_\_\_\_\_ Phone: \_\_\_\_\_

Population: \_\_\_\_\_

Source Type: \_\_\_\_\_ Groundwater \_\_\_\_\_ Surface Water \_\_\_\_\_ Both \_\_\_\_\_

(Circle all that apply)

Source Name(s), Location(s) and Seasonal Variability: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Type of Treatment Plant Facility: \_\_\_\_\_

Chemical Disinfectant Used: \_\_\_\_\_

Treatment Plant Location(s): \_\_\_\_\_

Storage Tank(s) Identification: \_\_\_\_\_

Storage Tank(s) Location(s): \_\_\_\_\_

Number of Pressure Zones: \_\_\_\_\_

## TTHM/HAA5 Monitoring Frequency

- **Routine:** One sample per year during month of warmest water temperature
- **Increased:** One sample per quarter
- **Reduced:** One sample every three years during month of warmest water temperature

Attach map of distribution system with sources, treatment plants, storage tanks and pressure zones and sample locations marked

Sample Location(s): \_\_\_\_\_

Sample Time: \_\_\_\_\_

Certified Laboratory to Analyze Samples: \_\_\_\_\_

Calculating MCL Compliance: Compliance is based on concentration of annual sample result unless quarterly monitoring is required.

TTHM MCL: 0.080 mg/l      HAA5 MCL: 0.060 mg/l

## Distribution System Disinfectant Residual Monitoring

Sample Location and Frequency: Same time and location as Coliform bacteriological monitoring. (Attach system bacteriological sample siting plan)

Test Kit to be used for on-site Chlorine Residual Analysis: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_  
Signature

\_\_\_\_\_  
Date