

REQUEST FOR WATER TESTING
(326 FIELD HOSPITAL)

Appx

- | | | | |
|----|--|---|-------------------------|
| 1 | Sample of water collected from | : | Pump House APS Damana |
| 2 | The reason for the exact nature of examination required | : | Bacteriological Exam |
| 3 | Date & hour of sample | : | 22 Sep 2022 at 0900 hrs |
| 4 | Nature and location of sources of water | : | MES water |
| 5 | Nature & distance of any sources From which an inflow of pollution Appear problem. | : | NA |
| 6 | Geological strata likely to affect the water constituents | : | NA |
| 7 | If the sources be a well:- | | |
| | (i) Depth of the water | : | NA |
| | (ii) Staining | : | NA |
| | (iii) Capping | : | NA |
| | (iv) Covering | : | NA |
| | (v) Started penetrated | : | NA |
| | (vi) Method of raising water | : | NA |
| 8 | If stored surface water, nature of Collecting surface and conditions of storage. | : | NA |
| 9 | Meteorological condition heavy Rainfall / drought. | : | Clear |
| 10 | Any treatment the water has received:- | | |
| | (a) Clarification | : | Yes |
| | (b) Chlorination | : | |
| | (c) Softening | : | NA |
| | (d) Boiling | : | NA |

Stn C/o 56 APO

Dated: 22 Sep 2022

Sudim for Capt Prayanshu

OIC Health Sec
For SMO

Sample Name

Date of Collection

Time

Temp

pH

DO

TDS

Hardness

WATER PRESUMPTIVE COLIFORM COUNT

Probable number of organisms

in 100 ml of water is 03

Remarks Satisfactory/Suspicious/Unsat/Unsafe

NO

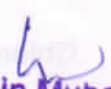
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CO

BY

AM

AM


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MO (Microbiology)
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Signature for safe purposes

Dr. Hudaib
19/08/2011