

**GROUNDWATER MONITORING:  
COMPLIANCE REPORT FORM**

**REMIT FILES ELECTRONICALLY**

**DEPARTMENT OF ENVIRONMENTAL QUALITY – UST SECTION  
DIVISION OF WASTE MANAGEMENT  
450 W. HANES MILL RD., WINSTON-SALEM, NC 27105-7407**

**FACILITY INFORMATION**

*Please Print Clearly or Type*

Facility Name: \_\_\_\_\_  
 Permit Name (if different): \_\_\_\_\_  
 Facility Address: \_\_\_\_\_  
(Street)  
 \_\_\_\_\_  
(City) (State) (Zip)  
 Contact Person: \_\_\_\_\_ Telephone#: \_\_\_\_\_  
 County: \_\_\_\_\_  
 Well Location/Site Name: \_\_\_\_\_ No. of wells to be sampled: \_\_\_\_\_  
(From Permit)

PERMIT Number: \_\_\_\_\_ Expiration Date: \_\_\_\_\_

Permit Type: \_\_\_\_\_

**IF WELL WAS DRY AT TIME OF SAMPLING, CHECK HERE:**

**SAMPLING INFORMATION**

**WELL ID NUMBER (from Permit):** \_\_\_\_\_ Date Sample Collected: \_\_\_\_\_  
 Well Depth: \_\_\_\_\_ ft. Well Diameter: \_\_\_\_\_ in.  
 Depth to Water Level: \_\_\_\_\_ ft. below measuring point Screened Interval: \_\_\_\_\_ ft to \_\_\_\_\_ ft.  
 Measuring Point is \_\_\_\_\_ ft. above land surface Relative M.P. Elevation: \_\_\_\_\_ ft.  
 Volume of water pumped/bailed before sampling: \_\_\_\_\_ gallons

**LABORATORY INFORMATION**

**Laboratory Name:** \_\_\_\_\_

**Certification Name:** \_\_\_\_\_

**Date Sample Analyzed:** \_\_\_\_\_

**FIELD PARAMETERS:**

pH: \_\_\_\_\_ Temperature (°C): \_\_\_\_\_ Spec. Cond. (µMhos): \_\_\_\_\_ Odor: \_\_\_\_\_  
 Appearance: \_\_\_\_\_ Notes: \_\_\_\_\_

**\*Method 625 Required: Yes or No (circle one)**

**PFAS Sampling Required: Yes or No (circle one)**

Attach Laboratory Report and Specify Analytical Method(s) here: \_\_\_\_\_

**RESULTS:**

Total Ammonia (mg/L) _____	Volatile and Semi-volatile Organic Compounds (µg/L): _____
Nitrate (mg/L) _____	_____
Total Dissolved Solids (mg/L) _____	_____
Lead (mg/L) _____	_____
Chromium (mg/L) _____	_____

I certify that, to the best of my knowledge and belief, the information submitted in this report is true, accurate, and complete, and that the laboratory analytical data was produced using approved methods of analysis by a DWR-certified laboratory. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations.

\_\_\_\_\_  
 Permittee (or Authorized Agent) Name and Title - Please print or type

\_\_\_\_\_  
 Signature of Permittee (or Authorized Agent) (Date)