

**San Diego State University
Environmental Health and Safety**

Chlorination Report

I. Project Manager: Report to EHS the following information 3 working days prior to proposed bacterial sampling date. Submit **Bacteriological Sampling Notification** with this form.

Disinfectant Company: _____

Date of Chlorination: _____

Water System(s) Chlorinated: _____

Was the System Initially Flushed?: _____

Chlorination Method: _____

Chlorine Agent: _____

Chlorine Concentration After Injection: _____

Retention Period (After Injection): _____

Chlorine Residual After Retention Period: _____

Date of Flushing: _____

Chlorine Residual After Flushing: _____

II. Project Manager: Signature and Date: _____

Company Name: _____

Phone Number: _____

Email Address: _____

III. EHS: Date Notification Form Received: _____

Date Program Manager Notified to Proceed w/ Bacteriological Sampling:
