CENTRAL POLLUTION CONTROL BOARD Parivesh Bhawan, East Arjun Nagar, Delhi-110 032



INSTRUMENTATION LABORATORY

AOX Analysis Report

1.	Report no. & issue date	:
2.	Name of the Project	:
3.	Sample matrix	:
4.	Date & time of sample collection	:
5.	Samples collected by	:
6.	Date & time of sample receipt	:
7.	Date of sample analysis	:
8.	Sample registration no. & date	:
9.	Sampling plan reference	:
10.	Test method reference	:
11.	Report sent to (Name & Address)	:

S. No.	Sample Code AOX as Cl ⁻ µg/I		

Statement:

- 1. The results relate only to the samples tested.
- 2. The report shall not be reproduced except in full, without the written approval of the laboratory.

Analyst Supervisor I/c Instrumentation Lab. (Authorized Signatory)

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CENTRAL POLLUTION CONTROL BOARD Parivesh Bhawan, East Arjun Nagar, Delhi-110 032

INSTRUMENTATION LABORATORY

Mercury Analysis Report

1.	Report no. & issue date	:
2.	Name of the Project	:
3.	Sample matrix	:
4.	Date & time of sample collection	:
5.	Samples collected by	:
6.	Date & time of sample receipt	:
7.	Date of sample analysis	:
8.	Sample registration no. & date	:
9.	Sampling plan reference	:
10.	Test method reference	:
11.	Report sent to (Name & Address)	:

SI. No.	Sample Code	Total Mercury Concentration (μg/l)

Statement:

- 1. The results relate only to the samples tested.
- 2. The report shall not be reproduced except in full, without the written approval of the laboratory.

Analyst Supervisor I/C Instrumentation Lab. (Authorized Signatory)

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CENTRAL POLLUTION CONTROL BOARD Parivesh Bhawan, East Arjun Nagar, Delhi-110 032

INSTRUMENTATION LABORATORY

Trace Metals Analysis Report

1. Report no. & issue date 2. Name of the Project 3. Sample matrix 4. Date & time of sample collection 5. Samples collected by 6. Date & time of sample receipt 7. Date of sample analysis 8. Sample registration no. & date Sampling plan reference 9. 10. Test method reference

S.	Sample	Cd	Cr	Cu	Fe	Mn	Ni	Pb	Zn
No.	Code	(mg / l)	(mg /l)	(mg / l)	(mg / l)	(mg / l)	(mg /l)	(mg / l)	(mg / l)

Statement:

11.

Report sent to (Name & Address)

- 1. The results relate only to the samples tested.
- 2. The report shall not be reproduced except in full, without the written approval of the laboratory.

Analyst Supervisor I/C Instrumentation Lab. (Authorized Signatory)

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Analyst

CENTRAL POLLUTION CONTROL BOARD Parivesh Bhawan, East Arjun Nagar, Delhi-110 032 INSTRUMENTATION LABORATORY

TOC Analysis Report

		full, w	ithout the written approval of the laboratory.
Statem 1. The	nent: e results relate only to the samples tested.		
Chaha			
S.No.	Sample Code		Total Organic Carbon (TOC) in (mgC/L.)
11.	Report sent to (Name & Address)	:	
10.	Test method reference	:	
9.	Sampling plan reference	:	
8.	Sample registration no. & date	:	
7.	Date of sample analysis	:	
6.	Date & time of sample receipt	:	
5.	Samples collected by	:	
4.	Date & time of sample collection	:	
3.	Sample matrix	:	
2.	Name of the project	:	
1.	Report no. & issue date	:	

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I/c. Instrumentation Lab. (Authorized Signatory)

Supervisor