

# Water Test Report

Date:  Sender:  To:

Lot No.:  Suburb/Town:

Digital Chlorine Test Meter Type:  Chlorine Test Meter Serial No:  Chlorine Test Meter Calibration Date:

## Initial chlorine test

Date:  Time:

Quantity of Water:  Litres pH:  pH Scale Free chlorine:  mg/L Total chlorine:  mg

Comments and Test Results:

## Second chlorine test

Date:  Time:

Quantity of Water:  Litres pH:  pH Scale Free chlorine:  mg/L Total chlorine:  mg

Comments and Test Results:

## Final chlorine test (after flushing)

Date:  Time:

Quantity of Water:  Litres pH:  pH Scale Free chlorine:  mg/L Total chlorine:  mg

Comments and Test Results:

## Declaration

I hereby certify that the above measurements are true and correct and test results have been obtained as outlined in Power and Water's Connection Code.

Certifying Engineer:  Name Company:

Signed:  PWC Accreditation No.:  Date:

## Send to us

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