



**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 <sup>-</sup> 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)**



**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) :

Sl. No.	Sample Code	Total Mercury Concentration ( $\mu\text{g/l}$ )

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)**



**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 :
9. Sampling plan reference :
10. Test method reference :
11. Report sent to :  
(Name & Address)

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



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

**TOC 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	Total Organic Carbon (TOC) in (mgC/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)**