



Authorized Dealer for Maytag® Water Products

SECOND WATER TEST CHECKLIST

Customer's name _____

Address _____

Email _____ Phone number _____

Date _____

WATER TEST RESULTS

PARAMETER

RESULT

pH Level For Drinking Water	
Precipitation Scale/Sediment	
Hardness	

Notes _____

CUSTOMER SIGNATURE

REPRESENTATIVE NAME

X _____

X _____