Microbial Reporting Form

Form instructions: www.tceq.texas.gov/drinkingwater/microbial/revised-total-coliform-rule

Red River Authority of Texas
Environmental Services Laboratory
P.O. Box 240, Wichita Falls, TX 76307-0240
3000 Hammon Rd, Wichita Falls, TX 76310-7500
Phone: 940 723 1717 Fax: 940 723 6529
Website: www.rra.texas.gov Email: lab@rra.texas.gov

Laboratory Use Only COC#:

TCEQ Laboratory ID: T104704274

Water System Identification & Sample Collection Information (Please print or type the information)

Public Water System ID: (Must be 7 digits; include all zeros)	TX	
Public Water System Name:		

Report Results To:

Name:					
Address:					
City:		State:		Zip Code:	
Phone #:		PWS Email:			

*** SAMPLES MARKED AS SPECIAL OR CONSTRUCTION CANNOT BE USED AS ROUTINE OR REPEAT SAMPLES**

Sample Identification/Location	Sample Type (√ one)					Collected		Chlorine Residual			
Use sample site location/address identified in the system's RTCR Sample Siting Plan Raw Wells: Use Well Source ID (Ex: G1234567A)	Routine (Distribution)	Repeat	Raw Well	*Special**	*Construction **	Date (MM/DD/YY)	Time Military Time (HHMM)	Free mg/L	Total mg/L	Replacement	Original Sample Info: Sample ID and Date of Collection (Repeat, TSM Raw Well, Replacement)

Laboratory Analysis

Sample Iced?				Temperature (°C)				Thermometer ID	Lab Comments
Yes	☐	No	☐	Actual Temp:		Corrected Temp:			

Incubation Date and Time				Lab Rejected Code (LR) - Document Reason:
Start Date and Time:		Analyst:		
End Date and Time:		Analyst:		

Result Reporting and Approval

Laboratory Approval:		Date:		Time:	
Reported to PWS By:		Date:		Time:	

Laboratory Analysis Results

Rejection Code (if applicable) - Please Recollect	Test Method: SM9223						Analysis Results meet all accreditation requirements unless stated otherwise.
	Chlorine Check		Total Coliform		*E. coli*		
	Absent	Present	Absent	Present	Absent	Present	Laboratory Sample ID Number
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	☐	☐	☐	☐	☐	☐	
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	☐	☐	☐	☐	☐	☐	

I acknowledge that samples were handled appropriately and all information is accurate. Falsification of this form or tampering with water samples is a crime punishable under state and/or federal law. (Texas Penal Code, Title 8, Chapter 37.10)

Sampler Name (Print):		Sampler Signature:		Sampler Phone #:	
Sampler Email:				Operator License # (if applicable):	

Relinquished By Sampler:		Date and Time:		Received By Courier (if applicable):		Date and Time:	
Relinquished By Courier (if applicable):		Date and Time:		Received By Courier (if applicable):		Date and Time:	
Relinquished By Courier:		Date and Time:		Received By Lab:		Date and Time:	