S C LC USPS FedEx UPS

DRINKING WATER (P/A) COLIFORM SUBMISSION FORM

City of Houston Health Department
Water & Dairy Laboratory
2250 Holcombe Blvd, Houston, TX 77030
P (832)393-3939 F (832)393-3989
www.houstontx.gov/health/water.html
WaterLab.info@houstontx.gov
TCEQ Lab ID: 48012 / USEPA Lab ID: TX00006

Test results meet all requirements of NELAC unless stated otherwise.

NELAP Certificate #: T104704253

Public/Private Water System Identification & Sample Collection Information (Please PRINT legibly in black ink)

TCEQ Public Water System ID (Must be 7 digits; include all zeros)	
Public Water System Name	
County	
COH Acct #, check or MO #, cc approval code	

Send Results To

Name	
Address	
City	
State	
Zip Code	-
Phone #	
Fax # or Email	
Sampler Name	
Sampler Contact #	☐ Owner ☐ Operator ☐ Other: _____

Laboratory Use Only - Do not mark to the right of the bold black line

Date/Time Received	
Received by	
Sample Iced?	Yes No Temp °C

Client Notification of Positive or Unsuitable Sample - Lab Use Only

Client or Sampler notified		Notified by
Date/Time notified		
Notes:		

System Type (Circle one)			Water Source (Circle one)		
PUBLIC	PRIVATE	BOTTLED/ VENDED	GROUNDWATER (WELL)	SURFACE (LAKE, RIVER)	GROUND W/ SURFACE INFLUENCE

Sample Identification	Collected		Sample Type : (X) Mark ONLY ONE box					CHLORINE RESIDUAL MANDATORY on ALL TCEQ Compliance samples including Routine, Raw & Repeat		LABORATORY USE ONLY	
Use Specific Address/Location/Description ***DO NOT USE SITE #*** Raw Wells Use Source ID for Well Sampled; Ex. G1234567A	Date M/D/Y	Time *Please circle AM or PM*	DIST/RT	CONST	RAW WELL	SPECIAL	REPEAT Include Sample # for Previous Positive	Free Chlorine mg/L	Total Chlorine mg/L	Unsuitable sample Please re-submit Rejection Code	Laboratory Sample ID Number
		am pm	☐	☐	☐	☐	☐				
		am pm	☐	☐	☐	☐	☐				
		am pm	☐	☐	☐	☐	☐				
		am pm	☐	☐	☐	☐	☐				
		am pm	☐	☐	☐	☐	☐				
		am pm	☐	☐	☐	☐	☐				

Coliform P/A Form: Rev 0514

***Unsuitable Sample Analysis- Rejection Criteria Definitions**

EH = Exceeds holding time. Not received within 28 hours of collection; **LT** = Leaked in transit; **CL** = Chlorine present in sample; **LR** = Lab Rejected; **VO** = Volume insufficient for analysis; **IN** = Form Incomplete; **BR** = Broken; **FZ** = Frozen; **LA** = Lab Accident; **NC** = No Chlorine Residual recorded