

Total Coliform Analysis of Drinking Water (Present / Absent) Submission Form
 See back of form for paperwork and sampling instructions



<input type="checkbox"/> Public Drinking Water System <input type="checkbox"/> Private Drinking Water		Public Water System ID Number:	
Public Water System Name:		PWS Only: If repeat sample date of original positive:	
Client Name:		Attention:	
Mailing Address for final report and invoice:		Phone Number:	
City:	State	Zip Code	Sample Collected by (if different than above):
Request an additional copy of report sent to (Name):	Report Copy - Mailing Address :		
City:	State	Zip Code	Comments:
Person Transporting Sample to Lab:	Condition of Transport	Cooled Mail	Carrier Other _____

State of Idaho
Bureau of Laboratories
 2220 Old Penitentiary Rd.
 Boise, ID 83712
 208-334-2235
 EPA Lab No. ID00018

LABORATORY USE ONLY		SAMPLE DESCRIPTION (Up to 5 samples may be entered on this form)			
CLIENTS- Do not fill in darkened areas	Arrival Temp.	Sample Type Code	Sample Location	Date/Time Collected	Cl ₂ / PPM

Sample Type Codes: RS- Routine Sample RP-Repeat Sample (At original tap) U – Upstream Repeat D – Downstream Repeat
 X – Other Repeat W- Untreated (source) C – Construction/Special E – Enforcement (Evidence Receipt Form)

Relinquished by:	Date:	Time:	Received by:	Date:	Time:
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Samples must reach the laboratory within 30 hours of collection. It is recommended the samples be kept at <10°C while in transit. Please read instructions on back of page before sampling.

Sample Collection

1. Select a clean non-mixing faucet which is not swiveled or hinged. Remove any screens or strainer. Allow the water to run until the temperature becomes uniform which usually takes about 3-5 minutes. Reduce the flow to minimize splashing while taking the sample.
2. Unopened bottles will have a small amount of liquid in them; this is a chemical (Sodium Thiosulfate- harmless at this amount) that will neutralize any chlorine if it is present but does not interfere with the test. **REMOVE THE LID FROM THE BOTTLE IMMEDIATELY BEFORE TAKING THE SAMPLE.** While filling the bottle, handle the lid so that neither the lip of the lid nor the inside surface of the lid touch anything.
3. Fill the bottle to the shoulder, leaving a 1" head space. If you are collecting the sample using a larger laboratory approved bottle, make sure to leave the one inch head space also. This is critical as **samples with less than 100 mL total volume cannot be tested.**
4. **Fill in the label on the bottle** in ink to maintain the integrity of the sample should the sample and paperwork become separated.

Paperwork (Submission Form)

The person submitting the water sample must legibly fill in the non-shaded areas of the submission form in ink. Failure to provide complete identification could result in the sample being rejected. Please fill out an Idaho Bureau of Laboratories Evidence Receipt Form if you require the sample to be handled as evidence for criminal or civil litigation.

1. Check either the Private or Public Drinking Water box. Public Water Systems (PWS) supply water to more than 25 people and/or are regulated by DEQ.
2. If this is a sample from a PWS, enter the seven digit identification number assigned by DEQ. If this is a private system, skip this box.
3. If you are a PWS, enter the name of the system. If this is a repeat sample for a PWS, please enter the date of the original positive test.
4. If you are a private customer, enter your name. If you are submitting the sample from an agency, enter the name of the agency.
5. Fill in the name of the person to whom the report is to be sent and the mailing address including the city, state, and zip.
6. **Please enter a contact phone number so we may notify you if there is a problem with your sample.**
7. PWS submittals will have a final report sent automatically to the appropriate regulatory agency. If you wish a third party to receive a copy of the report, please enter the name of the person and mailing address in the designated field.
8. Fill in the name of the person collecting the sample, the name of the person or company transporting the sample, and mark the box with the condition of transport.

Sample Description (Up to five samples may be entered on one submission form. If you have additional samples, use another form and list it as page 2.)

9. Select a sample type code from the list immediately under the sample description.
10. Record the sample location or the sample identification which you (the submitter) have assigned.
11. **Fill in the date and time collected. Enter the chlorine residual value for PWS if applicable. Samples must be set-up for analysis by the laboratory within 30 hours of collection. Samples which exceed this holding time will be rejected.**

Explanation of Test Results

Total coliform Present: The sample contains total coliform which indicates an increased probability of opportunistic pathogens and may indicate a problem in the system. Sample does not meet the specification for potable water as established by EPA.

E. coli Present: The sample is contaminated by fecal material and may contain disease causing organisms. Water which contains *E. coli* should not be used for drinking, showering, brushing teeth, or other personal hygiene activities or in the preparation of food. Sample does not meet the specification for potable water as established by EPA

Total coliform or E. coli Absent: This type or group of bacteria was not found in the sample. Sample meets the specifications for potable water as established by EPA.

Please contact your local health district or regulatory agency for directions as to how to decontaminate your well. Additional information can be found at:

<http://www.healthandwelfare.idaho.gov/Health/EnvironmentalHealth/WellWater/tabid/1128/Default.aspx>

Additional sample submission documents and fees charged by the state laboratory may be found at:

<http://www.statelab.idaho.gov> ; select 'Environmental Analysis' for submission forms