



Total Coliform Analysis of Drinking Water (Present / Absent) Submission Form

See back of form for instructions.

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

1. Public Water System (PWS) or Client Name:		2. PWS ID #:	
3. Attention:		4. Phone Number:	
5. Do not leave positive sample results on voicemail at this number.			
6. Mailing Address for final report and invoice:			
7. City:	8. State:	9. Zip:	10. Email:
11. Send copy to: Public Health District Department DEQ Idaho Department of Health and Welfare			
12. Request an additional copy of report sent to (Name and Mailing Address):			
13. City:	14. State:	15. Zip:	16. Comments:
17. Sample Collected by (if different than above):		18. Person Transporting Sample to Lab:	19. PWS Only: If repeat sample date of original positive:

LABORATORY USE ONLY Clients - Do not fill in darkened areas		SAMPLE DESCRIPTION (Up to 5 samples may be entered on this form.)			
Laboratory Sample ID #:	Arrival Temp.	20. Sample Code	21. Sample Location	22. Date/Time Collected	23. Cl ₂ (ppm)

24. Sample Codes (PWS Only): S – Routine Sample P – Repeat Sample (At original tap) U – Upstream Repeat D – Downstream Repeat
X – Other Repeat W – Untreated (source) C – Construction/Special E – Enforcement (Chain of Custody required)

Chain of Custody Information – When Requested by Submitter

Received Date and Time:	By:	Relinquished by:	Date:	Time:
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Samples must reach Idaho Bureau of Laboratories (IBL) within 30 hours of collection. It is recommended the samples be kept at <10°C while in transit. Please read instructions on the back of this page before sampling.

Scanned by:	Date:	Follow up by:	Date:	Reviewed by:	Date:
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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.
2. Unopened bottles will have a small amount of liquid or white powder in them – this is a chemical that will neutralize any chlorine if it is present but does not interfere with the test. Do not rinse it out.
3. Do not remove the lid from the bottle until immediately before taking the sample. While filling the bottle, neither lip of the lid or the inside surface of the lid should touch anything.
4. Be sure to fill the bottle to its shoulder, leaving a 1-inch head space. This is critical as samples with less than 100 mL total volume cannot be tested.
5. Fill in the label on the bottle with your name, date and time of collection and the sample location.

Submission Form

Submitter Information – 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 (IBL) Chain of Custody form if you require the sample to be handled as evidence for criminal or civil litigation, and notify IBL before arriving with the sample.

- If this is a private well, go to Box 3. If you are submitting the sample for a Public Water system (PWS), agency, or company, enter the name of the entity in Box 1.
- Box 2 – If this is a sample from a PWS, enter the seven-digit identification number.
- Box 3 – Enter the name and phone number of the person the report will be sent to.
- Box 4 – Enter a contact phone number so IBL may notify you if there is a problem with the sample.
- Box 5 – Check this box if you do not want IBL to leave positive results on your voicemail. Negative results will be mailed.
- Boxes 6-10, fill in the name of the person to whom the report is to be sent and the mailing address, including the city, state, zip and email. If you need the report emailed, then note this in Box 16, otherwise the report will be mailed to the address specified in Boxes 6-10.
- Use Box 11 if you need a report sent to a specific agency. PWS submittals will have a final report sent automatically to the appropriate agency.
- Complete Boxes 12-15 if you wish a third party to receive a copy of the report.
- Box 17 – Fill in the name of the person collecting the sample,
- Box 18 – Fill in the name of the person or agency transporting the sample.
- Box 19 – If this is a repeat sample for a PWS enter the date of the original positive sample.

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.

- Box 20 – For PWS only, enter the appropriate sample type code (see Box 24). Please make sure this is correct. Once the sample is received by IBL this cannot be changed.
- Box 21 – Fill in the sample location or the sample identification which you (the submitter) have assigned.
- Box 22 – Fill in the date and time collected (required for analysis at IBL).
- Box 23 – Enter the chlorine (Cl₂) residual value for PWS, if applicable.

Samples must be received by IBL within 30 hours of collection. Samples exceeding this holding time are 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. The 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. The sample does not meet the specification for potable water as established by EPA.

Total Coliform and E. coli Absent: The 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: <https://bit.ly/2RhitL1>

Additional sample submission documents and fees charged by IBL may be found at www.statelab.idaho.gov; select 'Environmental Testing' for submission forms.

Please contact IBL with any questions.