TCEQ				v					NTAL QUALITY RING FORM 20	679												
Completed by PWS (or Agent)														Completed by Laboratory								
	PWS Name:							Laboi	ratory Name:	LCRA Environmental Laboratory Services												
	PWS ID#:	TX						тс	EQ Lab ID #:	T104704218												
P	WS Address:										3505 Montopolis Drive, Austin, TX 78744											
Р	WS Contact:								Laborat	ory Address:												
PWS Conta	act Phone #:								Labora	tory Contact:	≕ Bhanu Acharya											
Inhibitor or Stablizer U		sed (√): Phosphate Silica				Calcium ca	rbonate															
TREATMENT			Alkalinity Dosage Rate:	Inhibitor Do	sage Rate:				Laboratory Co	ontact Phone	877-362-5272 / 512-730-6072											
			Sample Information																			
	Sample 1	Гуре (√):	pe (√): Compliance Non-compliance								Parameters Requested: Analyses are required for the parameters checked. * If inhibitors containing phosphate or silica are used, then these parameters should also be analyzed depending on which is in use.											
	Sample Colle	ector (√):	Public Water System		Accredited Lab		3rd Party Contractor> LAB ID															
Tempe	erature and pH	(Y or N):	Are temperature and pH included on the sampling entity's Laboratory Approval Form on file at the TCEQ?			Were tempera collection?	Were temperature and pH measured in the field within 15 minutes of samp collection?						u	se.								
				Sample	Collection	Field Measurements)) 064)	5)		132)			1044) *			
Facility ID	Sample Point ID (e.g.							lacement?		Original		Alkalinity (1927)	Calcium (1919)	Chloride (1017) Conductivity (1064)	Hardness (1915)	Iron (1028)	Manganese (1032)	Sodium (1052)	TDS (1930)	O-Phosphate (1044) Silica (1049) *		
(e.g. DS01, PBCU001)	DSTWQP, EWQP)		Sample Location	Date (MMDDYY)	Time - 24 h (HHMM)	pH	Temp (°C)	Repla (\sqrt)	Original Sample	Sample Date (MMDDYY)	Lab Sample ID	Alkal	Calci	Chlo	Hard	Iron	Mang	Sodii	Suns	O-Pr Silice		
												√	√	√ v	/ 1	′ √			√			
												√	√	√ v	/ √	′ √	√	√ ,	√ √			
												√	√	√ v	/ √	′ √	√	√ ,	√			
												√	√	√ v	/ √	′ √	√	√ ,	√			
												√	√	√ v	/ √	′ √	√	√ ,	√			
												√	✓	√ v	/ √	′ √	√	√ -	√ √			
			ue and correct and sites selected								Sample											
Parameters. This includes, but not limited to the measurement of pH and temperature immediately upon collection. Falsification of this form or tampering with under state and/or federal law. (Texas Penal Code, Title 8, Chapter 37.10)									T water samples is a c	Time punisnable	Samples received unpreserved?						Ambie	ent				
Name of Authorized PWS Representative (Print) Signature					Organization				Date		Rejection Code (if applicable)	Actual / Corrected sample temperature:										
Chain of Custody											Date & Time of Sample Preservation (Acidified):		Thermometer ID #:									
Relinquished By (Signature)				Date/Time:	Date/Time: Relinquished By Courier (Signa) Date/Time:			Laboratory Comments:											
Received By Courier (Signature)			Date/Time:	Date/Time: Received By Lab (Signature)					Date/Time:													
TCEO 20679 (Rev	01/2018)										<u> </u>		_	_								



INSTRUCTIONS FOR COMPLETING THE WATER QUALITY PARAMETER MONITORING FORM 20679

The PWS (or agent) completes the following fields. See additional information at https://www.tceq.texas.gov/drinkingwater/chemicals/lead-copper.html under "Water Quality Parameter Sampling." **PWS Name:** Name of the Public water system PWS ID: Public water system identification number (seven digits preceded by the letters "TX") **PWS Address:** Public water system address PWS Contact Name: PWS contact person (or agent) responsible for the samples PWS Contact #: PWS contact (or agent) phone number Check the box indicating the type of inhibitor or stablizer used by the water system; phosphate, silica, or calcium carbonate. (If applicable) Inhibitor or Stablizer Used: IMPORTANT NOTE: The laboratory must analyze for orthophosphate or silica if either of those the inhibitors is checked. **TREATMENT:** Fill in the dosage rate for alkalinity and/or inhibitor if applicable. Sample Type - Compliance or Non-compliance: Check whether samples are to be used for compliance or not. Sample Collector: Check whether samples are collected by the PWS, your accredited lab or a 3rd party/contractor (include 3rd party's Lab ID number). Are temperature and pH included on the sampling Yes (Y) or No (N). Sampling entity must complete a laboratory approval form and submit to TCEQ for approval prior to sampling. EPA allowed entity's laboratory approval form on file at the TCEQ? methods must be used to field measure pH and temperature. Were temperature and pH measured in the field upon sample collection (i.e., within 15 minutes of sample Yes (Y) or No (N). Field measurements must be completed as soon as possible but no later than than 15 minutes after sample collection. collection? (Y or N) Facility ID number found in Texas Drinking Water Watch (DWW). "DS01" for distribution, "PBCU001", etc. for entry points. Refer to "Sample Points" Facility ID #: link on the Texas DWW Webpage: Sample point ID number found in Texas Drinking Water Watch (e.g. "DSTWQP" for distribution, "EWQP" for entry points). Refer to "Sample Points" Sample Point ID # link on the Texas DWW Webpage: **Sample Location:** Address of sample point. (Ex. 123 Main Street) Sample Collection Date: The date of sample collection by PWS (or agent) in MM/DD/YY format. Sample Collection Time: The time of sample collection by PWS (or agent) in 24 hour clock, HH:MM format. Sample pH: Record the sample pH at time of collection. Sample temp: Record the sample temperature at time of collection in °C **Replacement Indicator:** Check $(\sqrt{})$ if the sample replaces a previously rejected sample. Otherwise, leave blank. Original Sample ID #: If the "Replacement Indicator" box is checked fill out the "Original Sample ID #" column". Otherwise leave blank. (Can be added by the laboratory) If the "Replacement Indicator" box is checked fill out the "Original Sample Collection Date" column. Otherwise leave blank. (Can be added by the **Original Collection Date:** Responsible PWS representative (or agent) who vouches for correct sample collection procedure and documentation. Fill out name, signature, Sample collection acknowledgement organization, and date. Chain of Custody (COC): Indicate sample transfer by signature and date if the form is used to document COC. Several lines are provided for multiple transfers. The Laboratory completes the following fields. See additional information in the QAPP Addendum 3 - Guidance for the Analysis and Reporting of Water Quality Parameters under the Lead and Copper Rule at https://www.tceq.texas.gov/drinkingwater/chemicals/lead_copper/lead-copper.html **Lab Name:** Laboratory name TCEQ Lab ID # Laboratory ID number, unique to the Safe Drinking Water Act Information System (SDWIS). Usually the first ten digits of the accreditation ID Lab Address: Laboratory's address Lab Phone: Laboratory phone number Lab Contact Name: Laboratory contact name Lab Sample ID: Laboratory generated sample ID number Parameters Requested: Check analyses to be performed. Orthophosphate or silica may be required depending on the inhibitor used. Rejection Code: If sample is rejected, fill in the code for the reason. See QAPP Addendum 3 for codes. Check boxes that apply. Record the actual and corrected sample temperature seperated by a "/". Provide the serial number of the thermometer. Sample Conditions upon Recept: Provide rejection code(s) as applicable. Additional rejection information can be provided under laboratory comments. Date/Time of sample preservation (acidification): Provide the date and time that the portion of the sample that requires preservation was acidified in the laboratory. Laboratory Comments: Optional. Any comments the laboratory may want to document. Received by Lab: Indicate sample receipt by signature and date, if the form is used to document COC.