TEXAS COMMISSION ON ENVIRONMENTAL QUALITY WATER QUALITY PARAMETER MONITORING FORM (WQPMF) 20679

| COMPLETED BY PWS (OR AGENT) | | COMPLETED BY LABORATORY | |
|-----------------------------|----|-----------------------------|--|
| PWS Name: | | Laboratory Name | |
| PWS ID: | тх | TCEQ Lab ID #: | |
| PWS Address: | | Laboratory Address: | |
| PWS Contact: | | Laboratory Contact: | |
| PWS Contact Phone #: | | Laboratory Contact Phone #: | |

Inhibitor or Stabilizer Used ($\sqrt{}$)

silica

phosphate

calcium carbonate

| | SAMPLE INFORMATION | | | | | | | | | | | | | | | | | | | | | | | |
|---|---|-----------|---|------------------------------------|---------------------------------------|--|---|---|----------------------------|---------------------------|--|-----------------|---|------|-------------------|----------------|-----------------|---------------------|-----------------|------------------|---------------|----------------|--|--|
| Sample Colle | ector Name: | | | Sample Collector Organization: | | | | | : | | | | | | | | | | | | | | | |
| Sample Colle | ector (√): | | | Public Water | System | Acc | Accredited Lab 3 rd Party Contractor | | | | LAB ID#: | | | | | | | | | | | | | |
| Temperature | e and pH (Y or | N) | Are temperatur entity's Laborate | e and pH includ ory Approval Fo | ed on the sam rm on file at th | npling he TCEQ? | Were tempe of sample co | erature and pH me ollection? | easured | in the field wit | nin 15 minutes | | meters Requested: Analys ining phosphate or silica are | | | | | | | | | | | |
| Facility ID entry point (PBCU###) or distribution (DS01) | Sample Point ID entry point (EWQP) or distribution (DSTWQP) | | Sample Location | oint) | ample ilection Date 1/DD/YY) | Sample Collection Time-24 Hr (HHMM) | Field Measured Sample pH | Field Measured Sample Temp (°C) | Replacement Indicator ($$ | Original Sample ID# | Original Sample Date (MM/DD/YY) | | Lab Sample ID | | alkalinity (1927) | calcium (1919) | chloride (1017) | conductivity (1064) | iron (1028) | manganese (1032) | sodium (1052) | sulfate (1055) | TDS (1930) orthophosphate (as P) (1044) * | |
| | | | | | | | | | | | | | | | | | | | | | | | | |
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| Sample Collec | tion Acknowled | gement | | | | | | | | | | | Sample | Conc | litio | ns | Upon | Rec | eipt (| (√) | | | | |
| Water Quality P | arameters. This inc | ludes, bu | n is true and correct, a t is not limited to the and/or federal law. (1 | measurement o | f pH and temp | erature immedia | tely upon collect | | | | | | Samples received unpreserved? | | | | Iced | I | | | | Amb | ient | |
| Name of Aut | horized PWS R | eprese | ntative (Print) | PWS Repre | sentative S | Signature | Organi | ization | | Da | te | Rejec (if ap | tion Code plicable): | | | | Actua | al/cor | recte ture (| d sar °C): | nple | | | |
| | | | | | | | | | | | | | time of sample rvation (acidified): | | | | The | rmon | neter | ID # | : | | | |
| CHAIN OF C | USTODY | | | | | | | | | | | Labo | ratory Comments: | | | | | | | | | | | |
| Relinquished | By Sampler (Sig | nature) | | Date/Time | e: Relind | quished By Cou | ırier (Signatur | e) | | Da | te/Time: | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | | | | | | | | | | | |
| Received By (| Courier (Signatu | re) | | Date/Time | e: Recei | ived By Lab (Si | gnature) | | | Da | te/Time: | | | | | | | | | | | | | |
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INSTRUCTIONS FOR COMPLETING THE WATER QUALITY PARAMETER MONITORING FORM 20679

| The PWS (or agent) completes the following fields. ¹ | | | | | | | | | |
|--|---|--|--|--|--|--|--|--|--|
| PWS Name: | Name of the public water system (PWS) | | | | | | | | |
| PWS ID: | PWS identification number (seven digits preceded by the letters "TX") | | | | | | | | |
| PWS Address: | PWS address | | | | | | | | |
| PWS Contact Name: | PWS contact person (or agent) responsible for the samples | | | | | | | | |
| PWS Contact #: | PWS contact (or agent) phone number | | | | | | | | |
| Inhibitor or Stabilizer Used: | Check the box indicating the type of inhibitor or stabilizer used by the water system: phosphate, silica, or calcium carbonate. (If applicable) IMPORTANT NOTE : The laboratory must analyze for orthophosphate or silica if either of those inhibitors is checked. | | | | | | | | |
| Sample Collector Name: | Name of sample collector | | | | | | | | |
| Sample Collector Organization: | Name of sample collector's organization | | | | | | | | |
| Sample Collector ($$): | include sample collector's Lab ID number from Form 10450 . | | | | | | | | |
| Are temperature and pH included on the sampling entity's laboratory approval form on file at the TCEQ? (Y or N) | Yes (Y) or No (N). Sampling entity must complete a Laboratory Approval Form 10450 and submit to TCEQ for approval prior to sampling. EPA allowed methods must be used to measure pH and temperature in the field. | | | | | | | | |
| Were temperature and pH measured in the field upon sample collection (i.e., within 15 minutes of sample collection? (Y or N) | Yes (Y) or No (N). Field measurements must be completed as soon as possible but no more than 15 minutes after sample collection. | | | | | | | | |
| Facility ID #: | Facility ID number found in Texas Drinking Water Watch (DWW). "DS01" for distribution, "PBCU001", etc. for entry points. Refer to "Sample Poin link on the DWW webpage at http://dww2.tceq.texas.gov/DWW/ | | | | | | | | |
| Sample Point ID #: | Sample point ID number found in Texas DWW. For example, "DSTWQP" for distribution, "EWQP" for entry points. Refer to "Sample Points" link on the DWW webpage at http://dww2.tceq.texas.gov/DWW/ | | | | | | | | |
| Sample Location: | Address of sample point. For example, 123 Main Street | | | | | | | | |
| Sample Collection Date: | Date of sample collection by PWS (or agent) in MM/DD/YY format. | | | | | | | | |
| Sample Collection Time: | Time of sample collection by PWS (or agent) in 24-hour HHMM format. | | | | | | | | |
| Sample pH: | Record the sample pH at time of collection in the field. | | | | | | | | |
| Sample Temp: | Record the sample temperature at time of collection in °C in the field. | | | | | | | | |
| Replacement Indicator ($$): | Check ($$) 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. | | | | | | | | |
| Original Collection Date: | If the "Replacement Indicator" box is checked fill out the "Original Sample Collection Date" column. Otherwise leave blank. Can be added by the laboratory. | | | | | | | | |
| Sample collection acknowledgement: | Responsible PWS representative (or agent) who vouches for correct sample collection procedure and documentation. Fill out name, signature, 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. ² | | | | | | | | | |
| Lab Name: | Laboratory name | | | | | | | | |
| TCEQ Lab ID # | Laboratory ID number, unique to the Safe Drinking Water Information System (SDWIS). Usually, the first ten digits of the accreditation ID | | | | | | | | |
| Lab Address: | Laboratory 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. | | | | | | | | |
| | Check boxes that apply. Record the actual and corrected sample temperature separated by a "/". Provide the serial number of the thermometer. Provide rejection code(s) as | | | | | | | | |
| Sample Conditions Upon Receipt: Rejection Code (if applicable): | applicable. Additional rejection information can be provided under laboratory comments. If a sample is rejected, fill in the code for the reason. See QAPP Addendum 3 for codes. Additional information can be provided under laboratory | | | | | | | | |
| , , , | comments. | | | | | | | | |
| Actual/corrected sample temperature: | Record the actual and corrected sample temperature separated by a "/". | | | | | | | | |
| Thermometer ID#: | Record the serial number or other unique identifier of thermometer used to measure temperature. | | | | | | | | |
| 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. | | | | | | | | |

¹ See additional information at <u>www.tceq.texas.gov/drinkingwater/chemicals/lead_copper/lead-copper.html</u> under "Water Quality Parameter Sampling."

² 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 <u>https://www.tceq.texas.gov/drinkingwater/pwss.html#QAPP</u>

For Water Quality Parameter questions, contact the TCEQ Water Supply Division Lead and Copper Monitoring Team at PWSLCR@tceq.texas.gov or (512) 239-4691.