

**Arizona Department of Environmental Quality
Total Coliform Rule Distribution System Monitoring
Drinking Water Microbiological Analysis Report**

PWS ID Number: AZ 04 -	PWS Name:
Sample Date:	Owner / Contact Person:
Sample Time (24-hr. clock):	Phone Number:

**Repeat Samples Only - Check One
Use if Initial Sample was Positive**

Lab Specimen ID # of Initial Sample

Original Location (Distribution System)
 Upstream Location (Distribution System)
 Downstream Location (Distribution System)
 Other Location (Distribution System)
 4th Repeat "Other" Sample Taken at Well
 (raw water) if PWS serves 1,000 people or less

Sampling Distribution Site ID:	OR	Well 55- xxxxxx
		55-
		Cl₂ mg/L

(Not for MRDL reporting)

Microbiological Analysis (To be filled out by lab personnel)

Lab Specimen ID	3100 Total Coliform		3013 Fecal Coliform		3014 E. coli		Analysis Start		Analysis Complete	
	Method	Result	Method	Result	Method	Result	Date	Time	Date	Time
Only report below for Ground Water Rule, 4 th Repeat "Other" (raw water sample). Must use method that provides E. coli as a result.										

MCL: If system is ≤ 33,000, then MCL is 2 or more total coliform-positive.
 If system is > 33,000, then no more than 5% of the samples may be total coliform-positive.

Laboratory Information (To be filled out by lab personnel)

Lab Name:	Lab Certified ID Number:
Lab Contact, printed name:	Lab Phone Number:
Signature:	
Date PWS Notified:	PWS Person Notified:
Any positive routine or increased routine TCR sample triggers the GWR and requires ADEQ notification.	
Date ADEQ Notified:	ADEQ Person Notified:

Comments:

Please mail completed form to:
 Arizona Department of Environmental Quality
 Water Quality Data Unit, 5415B-1
 1110 West Washington Street
 Phoenix, AZ 85007

Questions Regarding the Total Coliform Rule:
 Call (602) 771-4560
 within AZ (800) 234-5677, ext. 771-4560

Instructions for the AZ Drinking Water Microbiological Analysis Reporting Form

Public Water System (PWS) ID Number

A unique 9-digit code assigned to each PWS by ADEQ. The code begins with AZ04 followed by a 5-digit number beginning with the county code.

Public Water System Name

The legal name the water system has registered with the Arizona Corporation Commission (ACC). If the system is a municipality or other non-ACC regulated entity, this should reflect the legal structure (e.g. XYZ Water Improvement District). Always notify ADEQ of any change in name or ownership.

Sample Date

Date the sample was collected in mm/dd/yy format.

Owner / Contact Person

Name of the owner or owner's representative (contact person) who can be contacted.

Sample Time

Time the sample was collected in hh:mm format, use 24-hour time clock.

Sampling Distribution Site ID Or Well Number 55-xxxxxx

This is the identifier for where the sample was taken. It may be an address or other descriptive as referenced by the PWS if sampled OUT IN THE DISTRIBUTION SYSTEM.

If a raw water sample was taken at the well, the identifier must be the ADWR 55-xxxxxx well number. Well registration number assigned by ADWR. Begins with 55- followed by 6-digits.

Total Cl₂

A chlorine residual reading is required for all GWR 4th Repeat "Other" Sample results regardless of whether chlorination is routine. A chlorine residual in the distribution system is required if a PWS chlorinates. This is not for MRDL reporting.

Repeat Samples Only, Use if Initial Sample was Positive

Use this box if this analysis is a REPEAT sample. Make sure to enter the Lab Specimen ID Number from the initial sample. Please check the repeat sample location.

Note: 4th Repeat "Other" Sample is a raw well water sample for a PWS serving 1,000 people or less.

Microbiological Analysis

Lab Specimen ID Number: A unique 15 character (maximum) alphanumeric code that identifies a particular sample used to test one contaminant or one category of contaminants. If the sample analysis is positive, then you are required to take repeat samples. This number will be used as the Lab Specimen ID # in the Repeat Samples Only box, for the follow-up samples.

Method & Result: List the EPA approved method citation and give result.

Analysis Start, Date & Time: Date and time the laboratory analysis starts.

Analysis Complete, Date & Time: Date and time the laboratory analysis ends.

Laboratory Information

To be filled out by lab personnel.

Comments

Any pertinent comments regarding sample(s). Examples: sample >30 hours; no date or time, etc.

Form available: ADEQ Ground Water website, http://www.azdeq.gov/environ/water/dw/gw_rule.html and ADEQ Publications & Forms site, <http://www.azdeq.gov/function/forms/appswater.html#sdw> (scroll down to Safe Drinking Water - Laboratory Forms, DWAR - 1)

These definitions are general in nature.

For specific questions regarding your laboratory submittal, call (602) 771-4560 or within AZ (800) 234-5677, ext. 771-4560