		VCPHD Microbial Monitoring Form																							LahLo	go/Image	
													-									Lub Lo	go/image				
									TCEQ Laboratory ID:																		
	Name:															Laboratory Analysis											
																Sample Iced? Temp			nperature	erature (°C)			Lab Comments				
Report Results To:	Name:															Yes No	No Actual Temp:				Corrected Temp:						
	Address:														Incubation Date and T				nd Time	ime			Lab Rejected Code (LR) - Document Reason:				
	City:						State:				Zip Code:						Start Date and 1					Analyst:					
ž	Phone #:						PWS Email:										End Date and Time:				Analyst: Result Reporting and Approva						
		*													Laboratory Appro						Date: Time:						
	Sample	Identificatio	n/Locat	ition Sample				Type (√ one)			Collected						7 11										
																					Labo	aboratory Analysis Results					
(Example: Well at 308 Kitty Lane)									uc	Date	Time Military Time						Rejection Code	Test Me									
			ine)		Routine	Repeat	Raw Well	Special	Construction	(MM/DD/YY)	(HHMM)						(if applicable) - Please		ne Check			E. coli					
					Rou	Rep	Rav	Spe	Con								Recollect	Absent	Present	Absent	Present	Absent	Present		Laboratory	Sample ID N	umber
		l acknowl	edge th	at samples	were h	andle	d app	ropri	iately	and all info	ormation is accura	te. Falsif	fication of	this fo	rm or tamp	ering with	water samples is	s a crime	punishable	under sta	te and/or	federal lav	v. (Texas P	Penal Code	e, Title 8, Chap	er 37.10)	
Sampler Name (Print):				Sampler Signature:														Sampler Phone #:									
ş	ampler Email:																										
													Rec				ived By Lab:	Date						e and Time:			