	TCEQ Microbial Reporting Form (TCEQ-10525)																												
Form instructions: www.tceq.texas.gov/drinkingwater/microbial/revised-total-coliform-rule															Lab Logo/Image														
Water System Identification & Sample Collection Information (Please print or type the information)																						O Labo	ratory ID:	_					
Public Water System ID: (Must be 7 digits; include all zeros) TX																													
Public Water System Name:																I	_aborator	y Analysis											
																Sampl	e Iced	?		Ter	nperature		Lab Comments						
.: <u>0</u>	Name:											Yes No Actual Corrected Temp:																	
ort Results To	Address:																						b Rejected Co	cted Code (LR) - Document Reason:					
	City:			State:					Zip Code:								Start Date and Time:			A	Analyst:								
Rep	·									·					End Date	and Ti	ime:		Analyst										
	Phone #:			PV	VS Er	mail:											Result Reporting and App				roval								
		* SAMPLES MARKED AS SPECIAL OR CONSTRUCTION CANNOT BE USED AS ROUTINE OR REPEAT SAMPLES												Laboratory	aboratory Approval:							Date	:		Time:		_		
Sample Identification/Location					Sample Type (√ one)				Co	Collected		Chlorine Residual		Original Sa	inal Sample	Reported to PWS By:								Date	:		Time:		_
ι		location/address ide	ution)						Time				Info: Sample ID and Date of	ple ID						Labo	oratory Ar	alysis Resu	ults						
system's RTCR Sample Siting F			riaii	Routine (Distribution)				tion *	Date (MM/DD/YY)	Military Time	Free mg/L	Total mg/L	ement	Collection (Repeat, TSM Raw	ion	Rejection Code (if applicable) -		Test Met				orm <i>E. coli</i>			Analysis Results meet all accreditation r unless stated otherwise.				
Raw Wells: Use Well Source ID (Ex: G1234567A)			1234567A)		Raw Well	Special *	Construction	(IVIIVI/DD/11)	(HHMM)	IIIg/L	mg/L	Replacen			Please Recollect		Chlorine Check		Total Coliform Absent Present		Absent	Present	Laboratory Sample ID						
				8	Repeat	Ra	Sp	ပိ					Re			recone	,ot	Absent	Present	Absent	Flesent	Absent	riesent		Laboratory	Sampi	e ID Nu	mber	L
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		I acknowledge th	hat samples w	ere ha	andle	d app	oropri	iately	and all inforn	nation is accurat	e. Falsifica	tion of th	is for	m or tamperin	ng with t	vater sam	ples is	a crime p	ounishabi	e under sta	ate and/or	federal lav	v. (Texas Pe	enal Code	, Title 8, Chapt	er 37.	10)		
Sampler Name (Print):					Sampler Signature:										Samı				#:										
5	ampler Email:										-			_		Operator License # (if applicable):											_		
Relinquished By Sampler:										Date and Time	:					eived By if applica	Зу							Date	and Time:				-
Relinquished By Courier:										Date and Time	:	Reco				ed By La	b:							Date	and Time:				