



WATER QUALITY PARAMETER CHAIN OF CUSTODY FORM 20679

Section I (PWS Information)				Section II (Completed by Laboratory)																	
PWS Name: <u>HARROK POINT</u>		PWS Type: ☒ Community ☐ NTNC		Lab Name: <u>7104704511</u>		North Water District Laboratory Services, Inc. (NWDLS) <u>SGS</u>															
PWS ID #: <u>2280035</u>		Population: ☒ <50,000 ☐ 50,001 to 100,000 ☐ >100,000		PWS Contact Name: <u>LARRY CLARK</u>		Laboratory Address: <u>8225 Fawn Trail, The Woodlands, TX 77385</u>															
PWS Contact Number: <u>936-200-0032</u>		☒ Compliance ☐ Noncompliance		Tap Copper Exceedance ☐ Tap Lead Exceedance		Laboratory Contact Name: <u>Janet Mulnoland</u>															
☒ Distribution System		# DS Samples Required: <u>4</u>		# EP Samples Submitted: <u>4</u>		Lab Phone: <u>936-321-6060</u>															
☒ Entry Point		# EP Samples Required: <u>2</u>		# EP Samples Submitted: <u>2</u>		Parameters Requested: *Analyses are required for the parameters checked. If inhibitors containing PO4 or silicate are used, then these parameters should also be tested depending on which is used.															
Inhibitor or stabilizer used: ☐ phosphate ☐ calcium carbonate ☐ silica																					
PWS Address: <u>140 TRINITY DR</u>																					
Source ID (e.g. DS01, EP001)	Sample Location	Sample Collection Date (MMDDYY)	Sample Collection Time (HHMM)	pH (1925)	pH method	Temp (°C) (1996)	Temp Method	Lab Sample ID	Alkalinity (1927)	Calcium (1919)	Chloride (1017)	Conductivity (1064)	Hardness (1915)	Iron (1028)	Manganese (1032)	Sodium (1052)	Sulfate (1055)	TDS (1930)	O-phosphate (1044)	Silica (1049)	
EP001	140 Trinity Dr (P.O.E)	6/5/18	1130 AM	7.22	SM 4500-H+ B	26.6°	SM 2550 B	DA604-1	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
DS02	444 Ridgewood Trl.	6/5/18	1100 AM	6.90	✓	27.9°	✓	DA604-2	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
DS04	137 Oakwood Ln.	6/5/18	1115 AM	6.87	✓	28.6°	✓	DA604-3	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
									✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
									✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
									✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
									✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	✓	
I acknowledge that the information on this form is true and correct and was selected for sampling following TCEQ instructions including but not limited to the measurement of pH and temperature according to approved methods immediately upon collection (within 15 minutes)																					
Name: <u>MICHAEL JACOBS JR</u>		Signature: <u>[Signature]</u>		Date: <u>6/5/18</u>				Containers: ☒ 2 L plastic bottles ☐ 1 L preserved upon receipt		Conditions Upon Receipt: ☒ Ice ☐ Ambient		Temp Upon Receipt: <u>2.10C</u>									
Relinquished By (Name, Signature)				Date				Received By (Name, Signature)				Date				Time					
(For TCEQ use only) ☐ Disapproved ☐ Accepted Comments:																					