12:20:48 p.m



Revised Total Coliform Rule (RTCR) Microbial Monitoring POSITIVE Result Report Form

Instructions

Laboratory Informatic

Use one (1) form per Public Water System (PWS) Microbial Positive result. Please type or print legibly and mark all pertinent check boxes. IMMEDIATELY SEND ALL POSITIVE RESULTS TO: 1-800-252-0237 (fax) or EMAIL to <RTCRPOS@tceq.texas.gov>. Include a copy of the analytical results provided by the laboratory. For questions regarding this form or POSITIVE samples, contact the Revised Total Coliform Rule Program at (512)239-4691.

-morniadon						
Lab Name: City of Round Rock ESL	Accreditation ID: 48159					
Sent By: Ryan Born	Date: 9/26/18 Time: 1220					
Lab Phone Number: (512) 218-5561						
Sample Information						
Lab Sample ID: 18 - 09610	PWS ID Number: TX 2460003					
PWS Name: City of Round Rock						
Collected By: Mickey Swatsell	Date: 9/24/18 Time: 1648					
Collection Point (Location): 1200 Bluff Or						
Disinfectant Residual (check type): 1,2 mg/	/L O Chlorine (Free) Chloramines RECEIVED					
Sample Type: Routine Repeat Raw	Source ID (For Raw): G					
If the sample type is Repeat or Raw, include the lab sam	nple ID of the originating positive below JAN 17 202					
Lab Sample ID (of originating Positive/Raw sample):	TC EQ CENTRAL FILE R					
Sample Results (Include a copy of the analytical resul	lts report)					
Total Coliform Positive E. Coli Positive	Test Method: Colilert					
Reporting Information						
Did your lab call the PWS to notify them of the POSITIV	E result? • Yes NO					
If NO, provide the PWS Contact Information from the Mi	crobial Reporting Form (MRF) below					
PWS Contact Name: Branlon	PWS Phone Number: \$17-218-5550					

Revised: 5/25/2017

052517-01, TCEQ Microbial Monitoring Positive Result Report Form Rev 1 Etf 5-25-17

PWS2460003 CO20180926 RTCR

City of Round Rock Environmental Services Laboratory - Water Bacteriology Form

Round Rock, Texas - Phone: (512) 218-5561, Fax: (512) 341-3316 - www.roundrocktexas.gov/waterlab

CUSTOMER INFOR	MATION:			CHAIN	OF CUS	STODY P	ECORD						4	4 /			2)			
Public Water System ID # 2 4 6 0 0 0 3 (seven digits required)							STODY RECORD Page 2 of 2 Sampler Name: 45													
Public Water System Name: City of Round Rock, Texas						Phone: 512-218-5559									TO	Henry				
County: Williamson							* For a Preliminary Report circle either email or fax										TCEQ Lab #48159			
Client Name: City of Round Rock, Texas Mailing Address: 2008 Enterprise Dr. City State Zin: Round Rock, TY Zessa.						Fax:							NELAP# T104704327							
P Mailin	ng Address	2008 Enterprise Dr.				E-mail:	CORR Dietri	hution Sample	o a mail Craw											
Sity, State, 219. [Roding Rock, 1X 76864							K 1. P = Potable drinking water NP = Non-Potable for ambient or wastewater of fluor fluor marked. County with													
Construction Project #	for Name:					E 3.	Test Requested: 24 Presi	ence/Absence, 18 Hour Pr												
	Account #:	9)	Payment Received By:	N/C	- V	CHANGE CLOCKRATEL OU	IDEL IUE IUEN EUCE			41XEU - 24 FA (2)	Wai Be u	-) F1 4044						
Lab Use Only Sample Information							Circle One Item is such actives							PRELIMINARY RESULTS (Key 5) - Lab Use Only						
Lab ID#	Field	Colle	ection	Sample Site	(Key 1)		Sample Type	Sample ID and Date					Coliform	E.c	E.coli		<u></u>			
	Sample ID#	Date (MM/DD/YY) Military Time	Use specific address/location, not site #. Raw wells use source ID for well, example: G1234567A	Potable or Non- Potable	Туре	1,00	of Originating Positive on atl Repeat and Triggered	Chlorine Residual (mg/L) MANDATORY	(Key 3) Test Request	(Key 4) Water Source	Present Colo	Absent asing	Present Colo	Absent sein	anakana	Analyst Initials				
		9,		1220 Created D			Dist Repeat	Samples	Free		21	ď.	₹.	<u>e</u>	₹	Rejection #	IIILIAIS			
18-09-609		9/21/8	1636	1220 Creekview Dr. Pressure: <u>92</u> psi	0	Public				24 PA	Ground		V		v		00			
1001001	82	/ "		Turbidity:NTU	NP	Private	Construction		1.8 =	18 PA	Surface		χ		1		NS			
				raibiaityNTO		-	Special Raw	- MINO.	Total	E.coli#	GWUI									
1809610		9/27/18		1200 Bluff Dr.	P	Public	Dist Repeat		Free	24 PA	Ground	$I^{\mathbb{Z}^n}$					_			
100161		//8	1648	Pressure: 76 psi	NP	Private	Construction		1.2 or	18 PA	Surface	X			0		as			
	83		7 &	Turbidity: 1/6 NTU	147	Filvate	Special Raw		Cotal	DE.coli#	GWUI				\wedge					
1							Dist Repeat	-	Free	24 PA	Ground	3	-		\rightarrow					
				d)	P	Public	Construction		or	18 PA	Surface									
					NP	Private	Special Raw													
			7						Total	E.coli#	GWUI		\rightarrow	\rightarrow						
					Р	Public	Dist Repeat		Free	24 PA	Ground									
					NP	Private	Construction		or	18 PA	Surface									
							Special Raw		Total	E.coli#	GWUI						1			
					P	D. M.	Dist Repeat		Free	24 PA	Ground									
						Public	Construction		or	18 PA	Surface									
					NP	Private	Special Raw		Total	E.coli#	CIMUU				7,750,000		1			
Relinquished By (Signatur	e)/ , o	DATE/TIME		Received By: (Signature)		REJECTION		polic Exceeded hold to			GWUI	Called		\perp						
Mulling 9/24 delinquished By (Signature	1	1730		TE K				nple 4) Heavy sitt tur		orall le		Called	2/2	6/1	011	35 r	rs			
(Signature) 5)						5) Form incomplete/Data discrepancy (Errors circled) Faxed/F-mailed														
AB RECEIPT INFORMATION.		Condition upon red	ceipt / I Ice	ed) Ambient	Votes:	6) Other	***************************************	***************************************						,						
R Thermometer # (2) IR Thermom											Entered	91	26/1	8	NB					
M 9223 ONPG-MUG Cotilent to I Samples in Acceptable Cond	ition? Yes		tal Coliform and E	coli)								Reviewe		11	U	, , ,				
Control of the last of the las				reliminary results as reported on this simplified C	OC form	** These re-	suite are not final													

LT2 E.coli samples require additional paperwork. All results are reported to the TCEQ, as required, for public znetsy, substitutinal_Lab/NELAC Files/Forms/COC's and Labels/CORR Dist Bac-T Sheets 2016. Milhite Copy - Lab