

### **BACTERIOLOGICAL WATER ANALYSIS – PUBLIC WATER SYSTEMS**

NORTH DAKOTA DEPARTMENT OF ENVIRONMENTAL QUALITY DIVISION OF MUNICIPAL FACILITIES SFN 53438 (3/2023)

### See Reverse for Instructions

*LEFT SIDE OF FORM TO BE COMPLETED BY COLLECTOR			FOR LABORATORY USE ONLY	
Last Name of Collector				
First Name of Collector	Telephone Nu	umber		
Date Collected	Time Collecte	d		
Date Conceled		<sup>i</sup> u		
Collection Point and Address				
			Lab Name	
Remarks				
DUBLIC WATER SYSTEM (Coliform Analysis)			Lab Number	
Name of Public Water System				
			Date of Receipt	Time of Receipt
			Time of Receipt	
Enter Your Assigned Public Water System & Sampling Site ID Numbers				
NDRTCR			Date on Analysis	Time of Analysis
Send Report To				
			Date Results Reported	Date Results Completed
Address			Analyst	
			Analyst	
City	State	Zip Code		~
			Colilert	Membrane Filter
Type of Sample Check (Check One):			Colisure	Fermentation
□ Routine □ Replacement □ Repeat (Alt.Fixed)			Colilert 18	□ Other
Repeat (same tap) Repeat Repeat			Colitag	
(upstream) (downstream)				
□ Special Purpose (explain)				
			COLIFORM ANALYSIS	
Wells/Source ID's in use during routine RTCR Sample			SATISFACTORY – No Coliforms Present	
Collection				
Ground Water			UNSATISFACTORY – Colifo	orms Present
□ Surface Water			□ No <u><i>E.coli</i></u> Found	
Purchased Ground Water			□ <u>E.coli</u> Present	
Purchased Surface Water			SEND REPEAT SAMPLES	
Li i dicinascu Sullace Walei				
			SAMPLE REJECTED- <u>R</u>	
One-Site Measurements			□ Sample Too Old	□ Sample Frozen
Total Chlorine Residual			□ Sample Leaked in Transit	Laboratory Accident
			□ Insufficient Sample Volume	□ No Date/Time
mg/l Other (explain)			Other	
			SAMPLE VOIDED – <u>Send Replacement</u>	
STOP! RIGHT SIDE OF FORM IS FOR LABORATORY USE ONLY.				ding to method requirements and no coliform
			1	result reported.

#### INSTRUCTIONS

## SAMPLE COLLECTION

Care must be exercised to obtain samples that will be representative of the water being tested and avoid contamination of the sample at the time of collection. The sample tap must be free of any aerator, strainer, hose attachment, or water purification devices. If the sample tap is connected to a heated water supply, cool water must be used during sample collection. Leaking taps which allow water to flow over the outside of the tap must be avoided as sampling points. Specific sampling instructions are as follows:

- 1. Do not rinse the sample bottle. It is sterile and contains a chemical additive (either powder or liquid droplets).
- 2. Open the sample tap fully and allow the water to run for 2 to 3 minutes or until the temperature of the water stabilizes.
- 3. Restrict the flow to allow the collection of the sample without splashing.
- 4. Fill the sample bottle to the 100ml fill line, leaving a small air space. Do not overfill.
- 5. It is the responsibility of the Public Water System to collect and ship the sample(s) to ensure arrival at the laboratory within 28 hours. Samples that cannot be tested within 30 hours of collection will be rejected. <u>Samples received on Fridays</u>, one day prior to a holiday, or after 4:00 pm on Thursdays, will not be tested, unless special arrangements have been made with the laboratory.
- 6. Please refer to the sample schedule that is posted at <u>https://www.hhs.nd.gov/Laboratory-</u> services/water-testing for laboratory delivery requirements.
- 7. Use the enclosed mailing label and add the proper postage.

# **COMPLETING THE REPORT FORM**

Please <u>carefully</u> complete the <u>entire</u> left-hand portion of this form. Failure to do so will cause reporting errors, errors on the permanent record, and may cause samples to be rejected.

A public water system includes cities, subdivisions, trailer courts, hotels, motels, cafés, bars, parks, rest and recreational areas, gas stations, golf courses, schools, churches, industries, and other public accommodations which have their own water system and have at least 15 service connections or regularly serve an average of at least 25 individuals daily at least 60 days out of the year. <u>The public water system identification number is a unique and permanent number assigned to all public water systems. This number must be included on the form to assure that the sample results are credited to the proper facility. In addition, public water systems are required to collect all routine bacteriological samples only at sites identified in an approved sample siting plan. The sample site identification number. Questions regarding these identification numbers or compliance with bacteriological monitoring requirements should be directed to the Municipal Facilities Division at 701-328-5211.</u>

# **Definitions:**

RTCR – Revised Total Coliform Rule

Routine – Monthly compliance sample(s)

Repeat (same tap) (upstream) (downstream) – Samples taken after a routine positive result. Replacement – Sample taken to replace a previously submitted sample that was voided. Repeat (alternate fixed) – Repeat sample taken from a fixed repeat site approved by the Department