# DRINKING WATER SAMPLING

Alloway®
Your Resource for Defensible Data

# AVAILABLE RESOURCES

- EPA's "Quick Guide to Drinking Water Sample Collection"
- EPA's "Lead and Copper Rule Monitoring and Reporting Guidance for Public Water Systems"
- Ohio EPA Division of Drinking and Ground Waters (https://epa.ohio.gov/ddagw/pws)
- Alloway (www.alloway.com)

# MONITORING SCHEDULES

approximately 11 million people daily. Public water systems are required to monitor their water regularly for contaminants. Currently, more than 95 percent of community water systems meet all health-based standards. When a system doesn't meet a standard, consumers are notified.


Search for public water system monitoring schedules


View current public drinking water advisories

Basics | Advisories and Apparent Violations | Monitoring and Reporting | Consumer Confidence Reports | Asset Management | Resources | Spigot Newsletter

## Monitoring and Reporting

View monitoring schedules using the drop-down list below. The list will be updated whenever revised schedules are generated. If you have any questions regarding specific monitoring requirements, please contact one of the following staff at (614) 644-2752:

- Sara Starr - disinfection by-products (DBPs)
- Emilie Eskridge - volatile organic compounds (VOCs); synthetic organic compounds (SOCs)
- Kathy Pinto - inorganics; asbestos; radiologicals
- Anne Speakman - nitrate / nitrite
- Local Ohio EPA district office - total coliform bacteria; lead and copper

### Current Monitoring Schedules

#### 2018 MONITORING SCHEDULES BY COUNTY

| | | | | |
|---|---|---|---|---|
| Adams | Darke | Hocking | Miami | Scioto |
| Allen | Defiance | Holmes | Monroe | Seneca |
| Ashland | Delaware | Huron | Montgomery | Shelby |
| Ashtabula | Erie | Jackson | Morgan | Stark |
| Athens | Fairfield | Jefferson | Morrow | Summit |
| Auglaize | Fayette | Knox | Muskingum | Trumbull |
| Belmont | Franklin | Lake | Noble | Tuscarawas |
| Brown | Fulton | Lawrence | Ottawa | Union |
| Butler | Gallia | Licking | Paulding | Van Wert |
| Carroll | Geauga | Logan | Perry | Vinton |
| Champaign | Greene | Lorain | Pickaway | Warren |
| Clark | Guernsey | Lucas | Pike | Washington |
| Clermont | Hamilton | Madison | Portage | Wayne |
| Clinton | Hancock | Mahoning | Preble | Williams |
| Columbiana | Hardin | Marion | Putnam | Wood |
| Coshocton | Harrison | Medina | Richland | Wyandot |
| Crawford | Henry | Meigs | Ross | |
| Cuyahoga | Highland | Mercer | Sandusky | |

#### 2018 REVISED SCHEDULES BY MONTH

**Revised Total Coliform Rule**
Forms and Instructions

**Operator Certification**
Exam Information, Contact Hours, Operator Lists

**Rules**
Rules, Laws, Policies and Guidance

**Engineering and Plan Approval**
Current versions of related documents and forms

**Reporting**
eDWR, eBusiness Center, Forms

**Drinking Water Watch**
Drinking water data and public water system inventory

**Laboratory Certification**
Certified Labs and Sample Analysis

**Enforcement**
PWSs, Operators, UIC, Labs, Certified Analysts

DDAGW Site Links

Select an item and click "Go" to navigate
Go

Ohio Environmental Protection Agency

**Effective Date: 01/01/2018**

*2018 ENTRY POINT SCHEDULE*

**OH510[redacted]**

System Type: Community

Operating Period: 1/1 to 12/31

## ENTRY POINT MONITORING SCHEDULE

**Sampling Location** Facility ID: [redacted] Facility Name: [redacted]

SMP ID: **EP001** Facility Source: **Ground Water** Facility Class: **CLASS A**

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule.

Also, monitoring schedules may be revised during the year based on sampling results.

**For water emergencies that occur after hours, please call 800-282-9378**

**** REMINDER: ** Consumer Confidence Report (CCR) is due July 1, 2018**

| Chemicals | Monitoring Requirements |
|---|---|
| INORGANICS | 1 Sample(s) Required between 6/1/2018 and 10/31/2018 |
| ***Sample for all the analytes listed below:*** | |
| ***ANTIMONY, TOTAL - 1074 ARSENIC - 1005 BARIUM - 1010 BERYLLIUM, TOTAL - 1075 CADMIUM - 1015 CHROMIUM - 1020 CYANIDE - 1024 FLUORIDE - 1025 MERCURY - 1035 NICKEL - 1036 SELENIUM - 1045 THALLIUM, TOTAL - 1085*** | |
| NITRITE - 1041 | Not Required |
| NITRATE - 1040 | 1 Sample(s) Required between 6/1/2018 and 10/31/2018 |
| RADIOLOGICALS | Not Required |
| SYNTHETIC ORGANIC CHEMICALS (SOC) GROUP 1 | Not Required |
| VOLATILE ORGANIC CHEMICALS (VOC) | 1 Sample(s) Required between 7/1/2018 and 9/30/2018 |

Ohio Environmental Protection Agency

**Effective Date: 05/25/2018**

*2018 DISTRIBUTION SCHEDULE*

**OH510** [redacted]

System Type: Community

Operating Period: 1/1 to 12/31

*Ground Water Rule Substantial System*

**THIS SCHEDULE MAY NOT INCLUDE ALL MONITORING REQUIREMENTS FOR YOUR SYSTEM.**

Contact your district office to review additional monitoring for operating parameters, and/or other monitoring requirements not included on this schedule. Also, monitoring schedules may be revised during the year based on sampling results.

**For water emergencies that occur after hours, please call 800-282-9378**

** **REMINDER**: ** **Consumer Confidence Report (CCR) is due July 1, 2018**

## DISTRIBUTION MONITORING SCHEDULE

**Sampling Location** Facility ID: **DS1** SMP ID: **DS202** Facility Name: [redacted] Facility Class: **CLASS 1**

| Chemicals | Monitoring Requirements |
|---|---|
| DISINFECTION BYPRODUCTS | Dual Sample Required between 7/1/2018 and 9/30/2018 at: DS202 |

***Sample for all the analytes listed below:***

1) ***TOTAL HALOACETIC ACIDS (HAA5) – 2456***
2) ***TTHM - 2950***

**Sampling Location** Facility ID: **DS1** SMP ID: **LC###** Facility Name: [redacted] **Refer to your Lead and Copper plan for SMP IDs** Facility Class: **CLASS 1**

| Chemicals | Monitoring Requirements |
|---|---|
| LEAD - 1030 AND COPPER - 1022 | 10 Sample(s) Required between 6/1/2018 and 9/30/2018 |

***Lead consumer notice must be completed no later than two business days after receipt of the sample results. The verification form for consumer notice must be submitted to Ohio EPA no later than five business days after receipt of the sample results. Lead and copper sample monitoring point (SMP) IDs (LC###) must be current and reflect properly tiered sites according to OAC Rule 3745-81-86. Submit lead and copper SMP ID revisions to your Ohio EPA District Office. Forms and templates are available online at http://epa.ohio.gov/ddagw/pws/leadandcopper.aspx. For questions contact your Ohio EPA District Office representative.***

# BOTTLE ORDERS

- How to place a bottle order
  - Call Alloway at (800)-436-1243
  - Email Julie Bigford(julie.bigford@alloway.com) or Amanda Retterer(amanda.webb@alloway.com)
  - Fax bottle order to (740)389-1481
  - Know what bottles you need when you place your order. Use your Monitoring Schedule as a reference. Bottles require specific preservation and volume according to analysis.

**Always verify bottle order when you receive it**

# SPECIFIC SAMPLING PROTOCOLS

# SAMPLING

- Wear nitrile gloves when sampling
- Be aware of the preservatives in the containers you are working with
- Have paperwork ready to fill out after sampling is completed
  - Fill out as much as you can prior to going to your sampling site
- Know the temperature requirements of samples being drawn

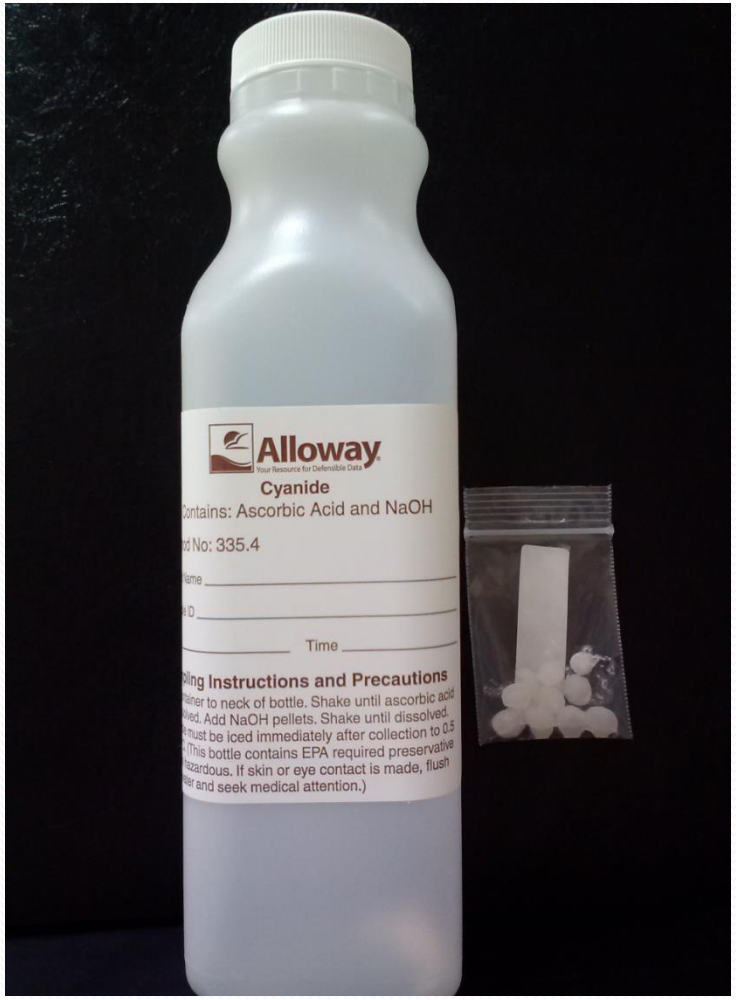
# MICROBIOLOGICAL

- Need at least 100 ML of sample (fill to line)
- Total Coliform has a hold time of 30 hours
- A completed SSR form should accompany any sample that is being submitted to the EPA
- Check with the Laboratory for acceptance days and times!

CORRECT INCORRECT

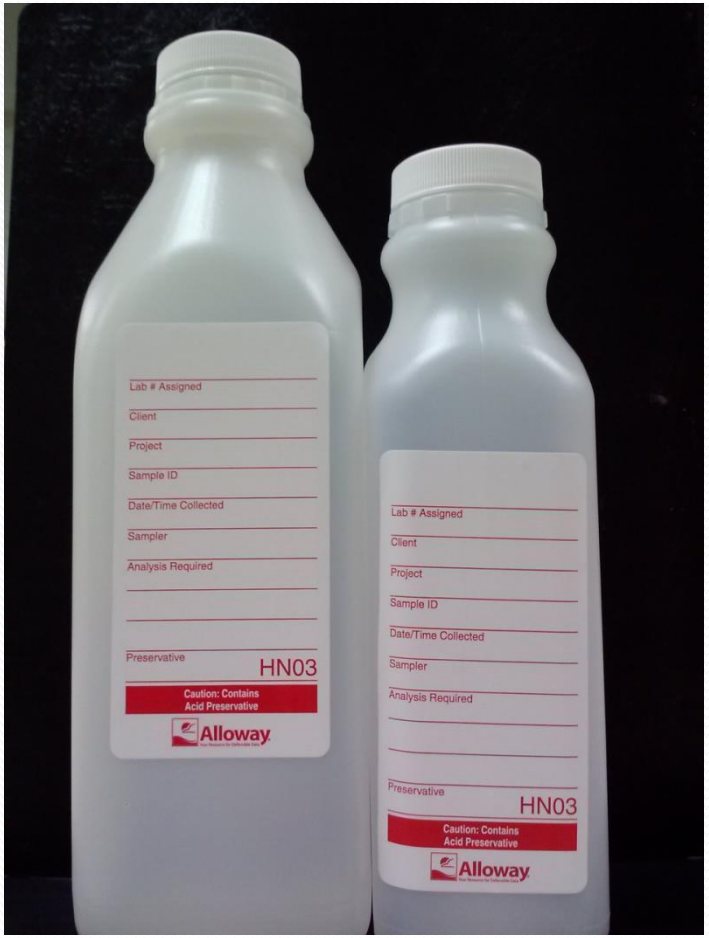
# CYANIDE

- Sample hold time is 14 days
- Sample needs to be collected in a 500 ml plastic container preserved with ascorbic acid
- After sample is collected shake to distribute ascorbic acid
- Sodium hydroxide pellets attached to side of bottle then need to be added and shake until dissolved
- Ice sample immediately



# METALS

- Metals have a 6-month hold time when preserved with nitric acid
- **EXCEPTION: Mercury has a hold time of 28 days**
- Dissolved metals must be collected in a non-preserved container and filtered in the laboratory
- Metals are digested if the turbidity is greater than 1 NTU

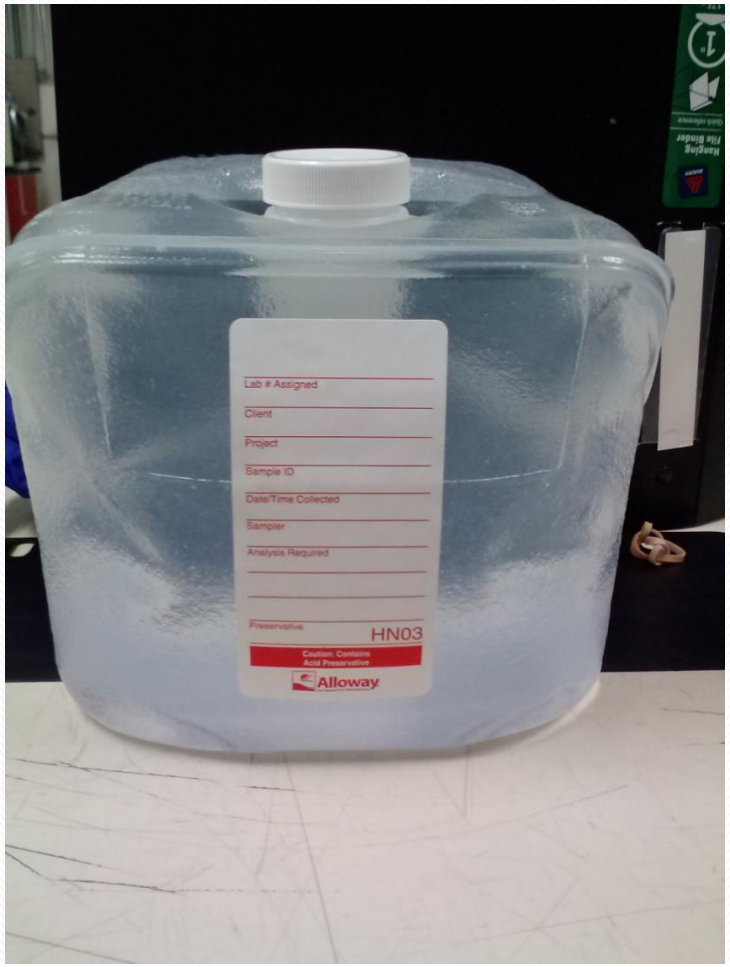


# LEAD AND COPPER

- Lead and Copper must be collected in a quart-size (1L) container for compliance purposes
- Per EPA requirements, these samples must be first draw
- Currently, laboratories are required to submit results directly to the EPA for lead and copper
- ALL OPERATORS AND PWS STAFF RESPONSIBLE FOR COMPLIANCE MONITORING SHOULD BE WELL VERSED ON THE EPA GUIDANCE DOCUMENTS AND REPORTING REQUIREMENTS CONCERNING LEAD AND COPPER!

# RADIOLOGICALS

- Similar to metals
- Preserved with nitric acid
- Stable up to 6 months
- Collect in a plastic gallon-size container
- This covers gross alpha, beta and radium 226-228



# VOLATILE ORGANICS AND TRIHALOMETHANES (THM's)

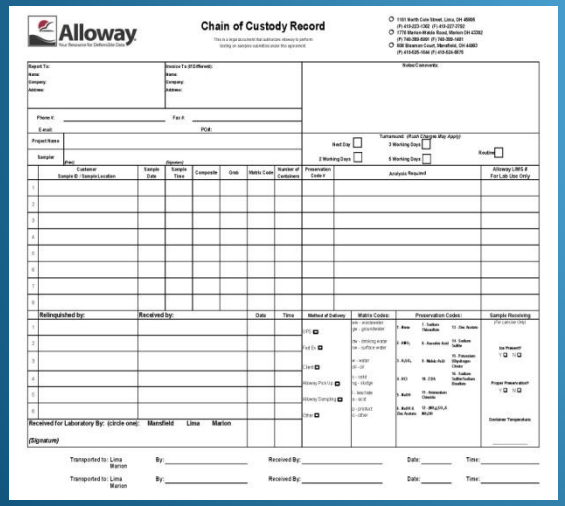
- It is key that you do not have any air bubbles and that the preservative does not overflow
- Recommend filling 3-4 vials per sample with zero headspace
- Keep chilled to below 6 °C

# VOLATILE ORGANICS AND TRIHALOMETHANES (THM's)


# SYNTHETIC ORGANICS

- Includes a wide variety of test methods,
  - Methods for drinking water: 504.1, 508, 515.1, 525.2, 531.2, 547, 548 and 549.2
    - Other methods exist to cover additional compounds
    - This includes pesticides, herbicides, semi-volatiles, and other contaminants
    - Method 552.2 is for the determination of haloacetic acids (HAA5s), which are disinfectant by-products
    - Most of the synthetic organics require sodium thiosulfate as a preservative

# PAPERWORK



Alloway

Chain of Custody Record

| Customer Sample ID / Sample Location | Sample Date | Sample Time | Composite | Grab | Matrix Code | Number of Containers | Preservation Code # | Analysis Required | Alloway LIMS # For Lab Use Only |
|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | |
| 2 | | | | | | | | | |
| 3 | | | | | | | | | |
| 4 | | | | | | | | | |
| 5 | | | | | | | | | |
| 6 | | | | | | | | | |
| 7 | | | | | | | | | |
| 8 | | | | | | | | | |

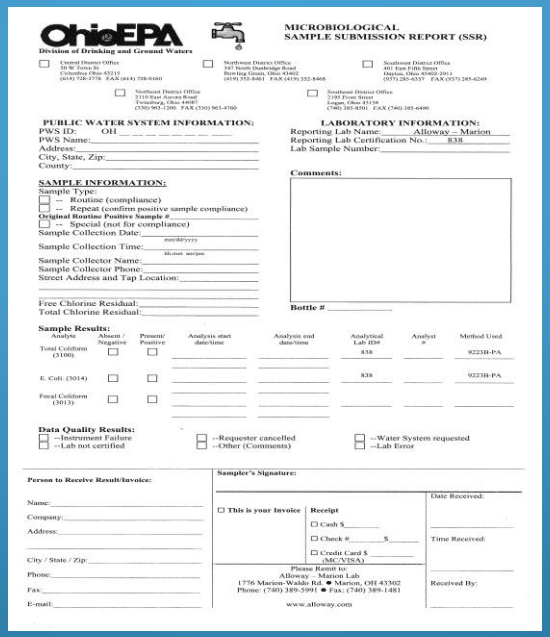
| Relinquished by: | Received by: | Date | Time | Method of Delivery | Matrix Codes: | Preservation Codes: | Sample Receiving |
|---|---|---|---|---|---|---|---|
| 1 | | | | UPS | | | Ice Present? Y / N |
| 2 | | | | Fed Ex | | | |
| 3 | | | | Client | | | |
| 4 | | | | Alloway Pick Up | | | Proper Preservation? Y / N |
| 5 | | | | Alloway Sampling | | | |
| 6 | | | | Other | | | Container Temperature |

Received for Laboratory By: (circle one): Mansfield Lima Marion

(Signature)

Transported to: Lima Marion By: Received By: Date: Time:

Transported to: Lima Marion By: Received By: Date: Time:



OhioEPA

Division of Drinking and Ground Waters

MICROBIOLOGICAL SAMPLE SUBMISSION REPORT (SSR)

Central District Office, 50 W. Town St., Columbus Ohio 43215, (614) 728-3778 FAX (614) 728-3168

Northwest District Office, 347 North Dunbridge Road, Bowling Green, Ohio 43402, (419) 352-8461 FAX (419) 352-8468

Southwest District Office, 401 East Fifth Street, Dayton, Ohio 45402-2911, (937) 285-6357 FAX (937) 285-6249

Northeast District Office, 2110 East Aurora Road, Twinsburg, Ohio 44087, (330) 963-1200 FAX (330) 963-1160

Southeast District Office, 2195 Front Street, Logan, Ohio 43138, (740) 385-8501 FAX (740) 385-6490

**PUBLIC WATER SYSTEM INFORMATION:**

PWS ID: OH
PWS Name:
Address:
City, State, Zip:
County:

**LABORATORY INFORMATION:**

Reporting Lab Name: Alloway – Marion
Reporting Lab Certification No.: 838
Lab Sample Number:

**SAMPLE INFORMATION:**

Sample Type:
-- Routine (compliance)
-- Repeat (confirm positive sample compliance)
Original Routine Positive Sample #:
-- Special (not for compliance)
Sample Collection Date: mm/dd/yyyy
Sample Collection Time: hh:mm am/pm
Sample Collector Name:
Sample Collector Phone:
Street Address and Tap Location:
Free Chlorine Residual:
Total Chlorine Residual:

**Comments:**

Bottle # _____

**Sample Results:**

| Analyte | Absent / Negative | Present / Positive | Analysis start date/time | Analysis end date/time | Analytical Lab ID# | Analyst # | Method Used |
|---|---|---|---|---|---|---|---|
| Total Coliform (3100) | | | | | 838 | | 9223B-PA |
| E. Coli. (3014) | | | | | 838 | | 9223B-PA |
| Fecal Coliform (3013) | | | | | | | |

**Data Quality Results:**

--Instrument Failure
--Lab not certified
--Requester cancelled
--Other (Comments)
--Water System requested
--Lab Error

**Person to Receive Result/Invoice:**

Name:
Company:
Address:
City / State / Zip:
Phone:
Fax:
E-mail:

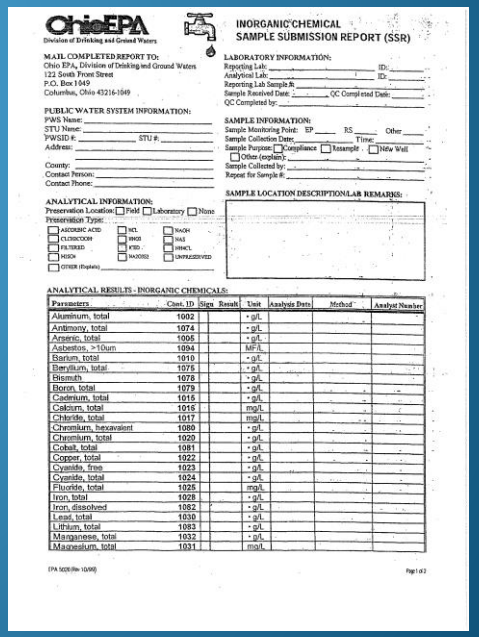
**Sampler's Signature:**

This is your Invoice

Receipt
Cash $
Check # $
Credit Card $ (MC/VISA)

Please Remit to:
Alloway – Marion Lab
1776 Marion-Waldo Rd. • Marion, OH 43302
Phone: (740) 389-5991 • Fax: (740) 389-1481
www.alloway.com

Date Received:
Time Received:
Received By:



OhioEPA

Division of Drinking and Ground Waters

INORGANIC CHEMICAL SAMPLE SUBMISSION REPORT (SSR)

**MAIL COMPLETED REPORT TO:**

Ohio EPA, Division of Drinking and Ground Waters
122 South Front Street
P.O. Box 1049
Columbus, Ohio 43216-1049

**LABORATORY INFORMATION:**

Reporting Lab: ID:
Analytical Lab: ID:
Reporting Lab Sample #:
Sample Received Date: QC Completed Date:
QC Completed by:

**PUBLIC WATER SYSTEM INFORMATION:**

PWS Name:
STU Name:
PWSID #: STU #:
Address:
County:
Contact Person:
Contact Phone:

**SAMPLE INFORMATION:**

Sample Monitoring Point: EP RS Other
Sample Collection Date: Time:
Sample Purpose: Compliance Resample New Well
Other (explain):
Sample Collected by:
Repeat for Sample #:

**SAMPLE LOCATION DESCRIPTION/LAB REMARKS:**

**ANALYTICAL INFORMATION:**

Preservation Location: Field Laboratory None
Preservation Type:
ASCORBIC ACID
CLOSCODIM
FILTERED
HNO3
NaOH
NaS
HNO3
UNPRESERVED
OTHER (Explain)

**ANALYTICAL RESULTS - INORGANIC CHEMICALS:**

| Parameters | Const. ID | Sign | Result | Unit | Analysis Date | Method | Analyst Number |
|---|---|---|---|---|---|---|---|
| Aluminum, total | 1002 | | | • g/L | | | |
| Antimony, total | 1074 | | | • g/L | | | |
| Arsenic, total | 1005 | | | • g/L | | | |
| Asbestos, >10um | 1094 | | | MFL | | | |
| Barium, total | 1010 | | | • g/L | | | |
| Beryllium, total | 1075 | | | • g/L | | | |
| Bismuth | 1078 | | | • g/L | | | |
| Boron, total | 1079 | | | • g/L | | | |
| Cadmium, total | 1015 | | | • g/L | | | |
| Calcium, total | 1016 | | | mg/L | | | |
| Chloride, total | 1017 | | | mg/L | | | |
| Chromium, hexavalent | 1080 | | | • g/L | | | |
| Chromium, total | 1020 | | | • g/L | | | |
| Cobalt, total | 1081 | | | • g/L | | | |
| Copper, total | 1022 | | | • g/L | | | |
| Cyanide, free | 1023 | | | • g/L | | | |
| Cyanide, total | 1024 | | | • g/L | | | |
| Fluoride, total | 1025 | | | mg/L | | | |
| Iron, total | 1028 | | | • g/L | | | |
| Iron, dissolved | 1082 | | | • g/L | | | |
| Lead, total | 1030 | | | • g/L | | | |
| Lithium, total | 1083 | | | • g/L | | | |
| Manganese, total | 1032 | | | • g/L | | | |
| Magnesium, total | 1031 | | | mg/L | | | |

EPA 5020 (Rev. 10/99)

Page 1 of 2

# CHAIN OF CUSTODY

- The chain of custody is a legal document that relinquishes samples from the client to the laboratory.
- It is critical to complete all dates, times and pertinent sampling information.
- Sign and date the Chain of Custody.
- If necessary, public water supplies may need to provide the laboratory with the respective Sample Submission Report (SSR)

# Chain of Custody Record

This is a legal document that authorizes Alloway to perform testing on samples submitted under this agreement.


- 1101 North Cole Street, Lima, OH 45805
  (P) 419-223-1362 (F) 419-227-3792
- 1776 Marion-Waldo Road, Marion OH 43302
  (P) 740-389-5991 (F) 740-389-1481
- 508 Bissman Court, Mansfield, OH 44903
  (P) 419-525-1644 (F) 419-524-5575


| Report To: | Invoice To (If Different): | Notes/Comments: |
|---|---|---|
| Name: | Name: | |
| Company: | Company: | |
| Address: | Address: | |

Phone #: _____ Fax #: _____

E-mail: _____ PO#: _____

Project Name: _____

Sampler: _____ (Print) _____ (Signature)

Turnaround: (*Rush Charges May Apply*)

Next Day ☐ 3 Working Days ☐ Routine ☐

2 Working Days ☐ 5 Working Days ☐

| | Customer Sample ID / Sample Location | Sample Date | Sample Time | Composite | Grab | Matrix Code | Number of Containers | Preservation Code # | Analysis Required | Alloway LIMS # For Lab Use Only |
|---|---|---|---|---|---|---|---|---|---|---|
| 1 | | | | | | | | | | |
| 2 | | | | | | | | | | |
| 3 | | | | | | | | | | |
| 4 | | | | | | | | | | |
| 5 | | | | | | | | | | |
| 6 | | | | | | | | | | |
| 7 | | | | | | | | | | |
| 8 | | | | | | | | | | |

| | Relinquished by: | Received by: | Date | Time |
|---|---|---|---|---|
| 1 | | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |
| Received for Laboratory By: (circle one): Mansfield Lima Marion *(Signature)* | | | | |

**Method of Delivery**

- UPS ☐
- Fed Ex ☐
- Client ☐
- Alloway Pick Up ☐
- Alloway Sampling ☐
- Other ☐

**Matrix Codes:**

- ww - wastewater
- gw - groundwater
- dw - drinking water
- sw - surface water
- w - water
- oil - oil
- s - solid
- sg - sludge
- l - leachate
- a - acid
- p - product
- o - other

**Preservation Codes:**

| | | |
|---|---|---|
| 1 - None | 7 - Sodium Thiosulfate | 13 - Zinc Acetate |
| 2 - $HNO_3$ | 8 - Ascorbic Acid | 14 - Sodium Sulfite |
| 3 - $H_2SO_4$ | 9 - Maleic Acid | 15 - Potassium Dihydrogen Citrate |
| 4 - HCl | 10 - EDA | 16 - Sodium Sulfite/Sodium Bisulfate |
| 5 - NaOH | 11 - Ammonium Chloride | |
| 6 - NaOH & Zinc Acetate | 12 - $(NH_4)_2SO_4$ & $NH_4OH$ | |

**Sample Receiving**

*(For Lab Use Only)*

Ice Present? Y ☐ N ☐

Proper Preservation? Y ☐ N ☐

Container Temperature: _____

Transported to: Lima Marion By: _____ Received By: _____ Date: _____ Time: _____

Transported to: Lima Marion By: _____ Received By: _____ Date: _____ Time: _____

If you don't specify who to send the invoice to, you will receive both the invoice and the report.

# Alloway

Your Resource for Defensible Data

## Chain of Custody Record

This is a legal document that authorizes Alloway to perform testing on samples submitted under this agreement.

PLEASE PRINT CLEARLY AND USE BLACK INK


- 1101 North Cole Street, Lima, OH 45805 (P) 419-223-1362 (F) 419-227-3792
- 1776 Marion-Waldo Road, Marion OH 43302 (P) 740-389-5991 (F) 740-389-1481
- 508 Bissman Court, Mansfield, OH 44903 (P) 419-525-1644 (F) 419-524-5575


**Report To:**
Name: John A. Doe
Company: Village of Anywhere
Address: 100 N. River St.
Anywhere Ohio 43801

**Invoice To (If Different):**
Name: Jane M. Smith
Company: Village of Anywhere
Address: P.O. Box 800
Anywhere Ohio 43801

**Notes/Comments:**
Please fax results Thanks!

Use the notes for any additional information that you want the lab to know. The more specific you are, the better service we can provide

Phone #: 123-456-7890 Fax #: 321-456-7899
E-mail: johnadoe@anywhereoh.com PO#:

You may include a purchase order number (PO#)

Project Name: April 2013 Monthly
Sampler (Print): John A. Doe

Name the project anything that makes sense for what you're sampling. This is for your reference

**Turnaround: (*Rush Charges May Apply*)**
Next Day ☐ 3 Working Days ☐
2 Working Days ☐ 5 Working Days ☐ Routine ☐

If anything other than standard TAT, please call lab first. Not all test can be rush. There may be a charge associated with a rush sample

| | Customer Sample ID / Sample Location | Sample Date | Sample Time | Composite | Grab | Matrix Code | Number of Containers | Preservation Code # | Analysis Required | All For |
|---|---|---|---|---|---|---|---|---|---|---|
| 1 | Outfall 001 | 4/1/13 | 1021am | x | | ww | 3 | 1.2.3 | BOD,COD,NH3,TSS,Cd,Cr,Cu,Pb | |
| 2 | EP001 | 4/1/13 | 1055am | | x | dw | 6 | 2.3.7.11 | TTHM's/HAA5's,Nitrate,Pb,Cu | |

If you have multiple bottles for one sample, you can keep it on one line if you filled the bottles within a few minutes of each other. Record the latest time as the sample time. If they were filled more than a few minutes apart, use different lines.

Indicate if it was a composite or a grab. Please be accurate with sample date and time.

It is important to specify the matrix. Some tests can be performed on multiple matrices. Use the appropriate code.

Be specific. For example, don't just write "metals" specify which metals. If you abbreviate, use standard chemical abbreviations.

| | Relinquished by: | Received by: | Date | Time |
|---|---|---|---|---|
| 1 | Amanda Welch | | | |
| 2 | | | | |
| 3 | | | | |
| 4 | | | | |
| 5 | | | | |
| 6 | | | | |

Everyone who handles the sample must sign and date the COC.

**Method of Delivery:** UPS ☐ Fed Ex ☐ Client ☐ Alloway Pick Up ■ Alloway Sampling ☐ Other ☐

**Matrix Codes:** ww - wastewater; gw - groundwater; dw - drinking water; sw - surface water; w - water; oil - oil; s - solid; sg - sludge; l - leachate; a - acid; p - product; o - other

**Preservation Codes:** 1 - None; 2 - $HNO_3$; 3 - $H_2SO_4$; 4 - HCl; 5 - NaOH; 6 - NaOH & Zinc Acetate; 7 - Sodium Thiosulfate; 8 - Ascorbic Acid; 9 - Maleic Acid; 10 - EDA; 11 - Ammonium Chloride; 12 - $(NH_4)_2SO_4$ & $NH_4OH$; 13 - Zinc Acetate; 14 - Sodium Sulfite; 15 - Potassium Dihydrogen Citrate; 16 - Sodium Sulfite/Sodium Bisulfate

**Sample Receiving** (For Lab Use Only)
Ice Present? Y ☐ N ☐
Proper Preservation? Y ☐ N ☐
Container Temperature: _____

Received for Laboratory By: (circle one): Mansfield Lima Marion
(Signature)

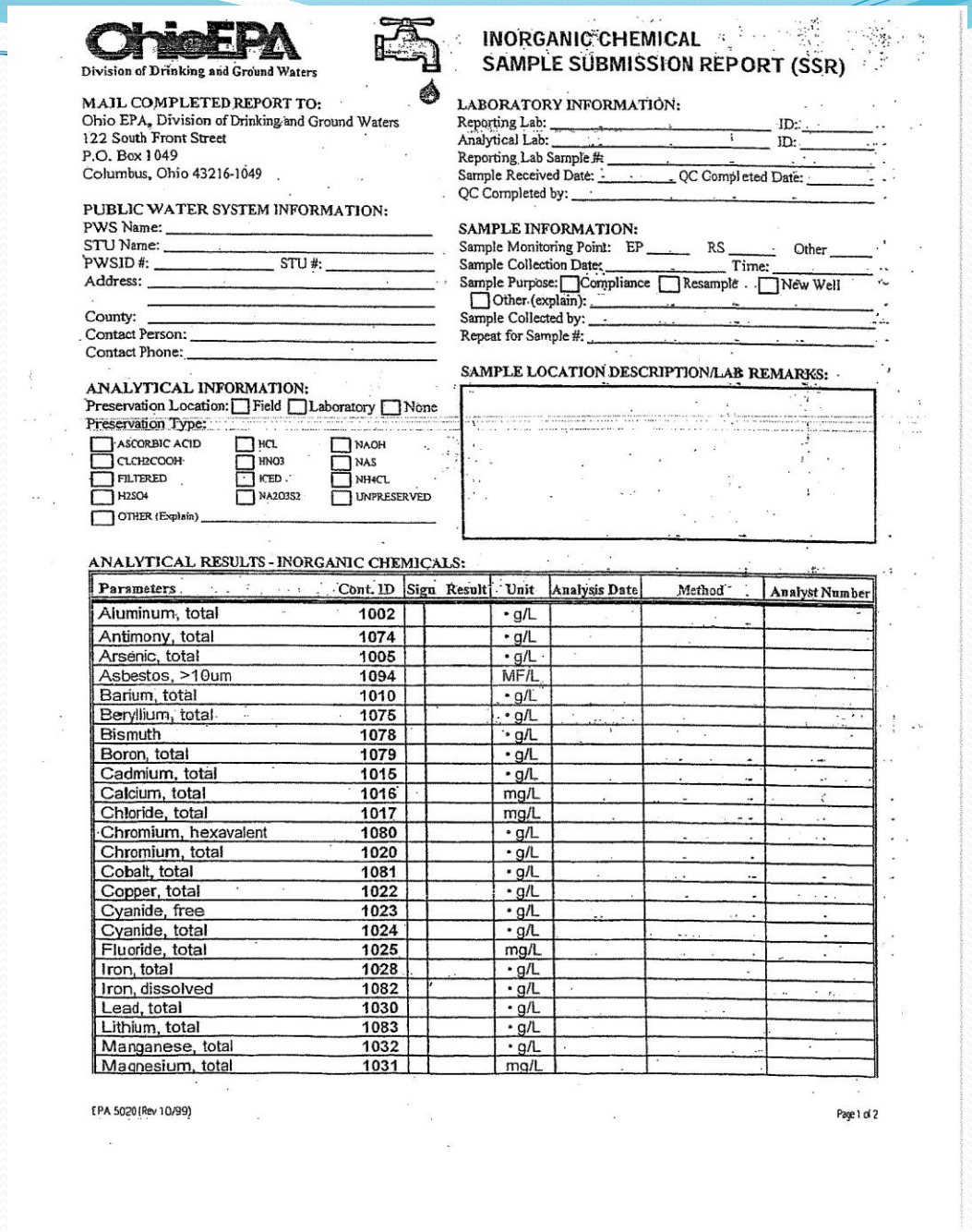
White - Lab Copy Yellow - Client

If you make a mistake, do not white out or scratch out your error. It is easiest to start with a fresh COC. If you do not have another form draw a line through the error, make the correction, note why it was corrected, and write your initials

Transported to: Lima Marion By: _____ Received By: _____

*If you need more than 8 sample lines, use an additional chain of custody.

# Sample Submission Report (SSR)



Ohio EPA
Division of Drinking and Ground Waters

**INORGANIC CHEMICAL SAMPLE SUBMISSION REPORT (SSR)**

**MAIL COMPLETED REPORT TO:**
Ohio EPA, Division of Drinking and Ground Waters
122 South Front Street
P.O. Box 1049
Columbus, Ohio 43216-1049

**PUBLIC WATER SYSTEM INFORMATION:**
PWS Name: _____
STU Name: _____
PWSID #: _____ STU #: _____
Address: _____
_____
County: _____
Contact Person: _____
Contact Phone: _____

**ANALYTICAL INFORMATION:**
Preservation Location: ☐ Field ☐ Laboratory ☐ None
Preservation Type:
☐ ASCORBIC ACID ☐ HCL ☐ NAOH
☐ CLCH2COOH ☐ HNO3 ☐ NAS
☐ FILTERED ☐ ICED ☐ NH4CL
☐ H2SO4 ☐ NA2O3S2 ☐ UNPRESERVED
☐ OTHER (Explain) _____

**LABORATORY INFORMATION:**
Reporting Lab: _____ ID: _____
Analytical Lab: _____ ID: _____
Reporting Lab Sample #: _____
Sample Received Date: _____ QC Completed Date: _____
QC Completed by: _____

**SAMPLE INFORMATION:**
Sample Monitoring Point: EP _____ RS _____ Other _____
Sample Collection Date: _____ Time: _____
Sample Purpose: ☐ Compliance ☐ Resample ☐ New Well
☐ Other (explain): _____
Sample Collected by: _____
Repeat for Sample #: _____

**SAMPLE LOCATION DESCRIPTION/LAB REMARKS:**

**ANALYTICAL RESULTS - INORGANIC CHEMICALS:**

| Parameters | Cont. ID | Sign | Result | Unit | Analysis Date | Method | Analyst Number |
|---|---|---|---|---|---|---|---|
| Aluminum, total | 1002 | | | • g/L | | | |
| Antimony, total | 1074 | | | • g/L | | | |
| Arsenic, total | 1005 | | | • g/L | | | |
| Asbestos, >10um | 1094 | | | MF/L | | | |
| Barium, total | 1010 | | | • g/L | | | |
| Beryllium, total | 1075 | | | • g/L | | | |
| Bismuth | 1078 | | | • g/L | | | |
| Boron, total | 1079 | | | • g/L | | | |
| Cadmium, total | 1015 | | | • g/L | | | |
| Calcium, total | 1016 | | | mg/L | | | |
| Chloride, total | 1017 | | | mg/L | | | |
| Chromium, hexavalent | 1080 | | | • g/L | | | |
| Chromium, total | 1020 | | | • g/L | | | |
| Cobalt, total | 1081 | | | • g/L | | | |
| Copper, total | 1022 | | | • g/L | | | |
| Cyanide, free | 1023 | | | • g/L | | | |
| Cyanide, total | 1024 | | | • g/L | | | |
| Fluoride, total | 1025 | | | mg/L | | | |
| Iron, total | 1028 | | | • g/L | | | |
| Iron, dissolved | 1082 | | | • g/L | | | |
| Lead, total | 1030 | | | • g/L | | | |
| Lithium, total | 1083 | | | • g/L | | | |
| Manganese, total | 1032 | | | • g/L | | | |
| Magnesium, total | 1031 | | | mg/L | | | |

EPA 5020 (Rev 10/99)

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Ohio EPA
Division of Drinking and Ground Waters

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PWSID #: _____ STU #: _____
Address: _____
_____
County: _____
Contact Person: _____
Contact Phone: _____

**ANALYTICAL INFORMATION:**
Preservation Location: ☐ Field ☐ Laboratory ☐ None
Preservation Type:

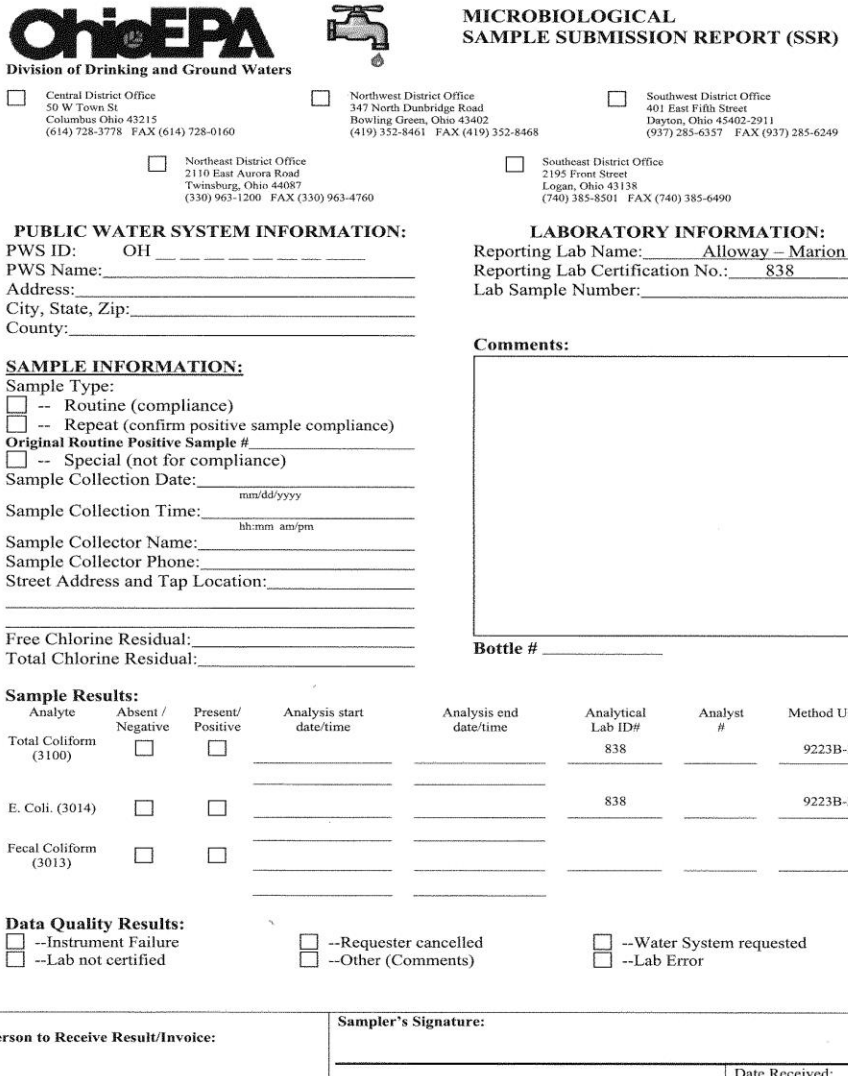
| | | |
|---|---|---|
| ☐ ASCORBIC ACID | ☐ HCL | ☐ NAOH |
| ☐ CLCH2COOH | ☐ HNO3 | ☐ NAS |
| ☐ FILTERED | ☐ ICED | ☐ NH4CL |
| ☐ H2SO4 | ☐ NA2O3S2 | ☐ UNPRESERVED |

☐ OTHER (Explain) _____

**LABORATORY INFORMATION:**
Reporting Lab: _____ ID: _____
Analytical Lab: _____ ID: _____
Reporting Lab Sample #: _____
Sample Received Date: _____ QC Completed Date: _____
QC Completed by: _____

**SAMPLE INFORMATION:**
Sample Monitoring Point: EP _____ RS _____ Other _____
Sample Collection Date: _____ Time: _____
Sample Purpose: ☐ Compliance ☐ Resample ☐ New Well
☐ Other (explain): _____
Sample Collected by: _____
Repeat for Sample #: _____

**SAMPLE LOCATION DESCRIPTION/LAB REMARKS:**



OhioEPA
Division of Drinking and Ground Waters

**MICROBIOLOGICAL SAMPLE SUBMISSION REPORT (SSR)**

☐ Central District Office
50 W Town St
Columbus Ohio 43215
(614) 728-3778 FAX (614) 728-0160

☐ Northwest District Office
347 North Dunbridge Road
Bowling Green, Ohio 43402
(419) 352-8461 FAX (419) 352-8468

☐ Southwest District Office
401 East Fifth Street
Dayton, Ohio 45402-2911
(937) 285-6357 FAX (937) 285-6249

☐ Northeast District Office
2110 East Aurora Road
Twinsburg, Ohio 44087
(330) 963-1200 FAX (330) 963-4760

☐ Southeast District Office
2195 Front Street
Logan, Ohio 43138
(740) 385-8501 FAX (740) 385-6490

**PUBLIC WATER SYSTEM INFORMATION:**
PWS ID: OH __ __ __ __ __ __ __ ____
PWS Name:_____
Address:_____
City, State, Zip:_____
County:_____

**LABORATORY INFORMATION:**
Reporting Lab Name: Alloway – Marion
Reporting Lab Certification No.: 838
Lab Sample Number:_____

**SAMPLE INFORMATION:**
Sample Type:
☐ -- Routine (compliance)
☐ -- Repeat (confirm positive sample compliance)
**Original Routine Positive Sample #**_____
☐ -- Special (not for compliance)
Sample Collection Date:_____ mm/dd/yyyy
Sample Collection Time:_____ hh:mm am/pm
Sample Collector Name:_____
Sample Collector Phone:_____
Street Address and Tap Location:_____
Free Chlorine Residual:_____
Total Chlorine Residual:_____

**Comments:**

**Bottle #** _____

**Sample Results:**

| Analyte | Absent / Negative | Present/ Positive | Analysis start date/time | Analysis end date/time | Analytical Lab ID# | Analyst # | Method Used |
|---|---|---|---|---|---|---|---|
| Total Coliform (3100) | ☐ | ☐ | | | 838 | | 9223B-PA |
| E. Coli. (3014) | ☐ | ☐ | | | 838 | | 9223B-PA |
| Fecal Coliform (3013) | ☐ | ☐ | | | | | |

**Data Quality Results:**
☐ --Instrument Failure
☐ --Lab not certified
☐ --Requester cancelled
☐ --Other (Comments)
☐ --Water System requested
☐ --Lab Error

**Person to Receive Result/Invoice:**
Name:_____
Company:_____
Address:_____
City / State / Zip:_____
Phone:_____
Fax:_____
E-mail:_____

**Sampler's Signature:**

☐ **This is your Invoice**

**Receipt**
☐ Cash $_____
☐ Check #_____ $_____
☐ Credit Card $ _____ (MC/VISA)

Please Remit to:
Alloway – Marion Lab
1776 Marion-Waldo Rd. ● Marion, OH 43302
Phone: (740) 389-5991 ● Fax: (740) 389-1481

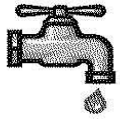
www.alloway.com

Date Received:
_____
Time Received:
_____
Received By:
_____

# Microbiological Sample Submission Report (SSR)

Ohio EPA

**Division of Drinking and Ground Waters**



# MICROBIOLOGICAL SAMPLE SUBMISSION REPORT (SSR)

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50 W Town St
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☐ Southeast District Office
2195 Front Street
Logan, Ohio 43138
(740) 385-8501 FAX (740) 385-6490

## PUBLIC WATER SYSTEM INFORMATION:

PWS ID: OH _ _ _ _ _ _ _ _ _

PWS Name: _____

Address: _____

City, State, Zip: _____

County: _____

## SAMPLE INFORMATION:

Sample Type:

☐ -- Routine (compliance)

☐ -- Repeat (confirm positive sample compliance)

**Original Routine Positive Sample #** _____

☐ -- Special (not for compliance)

Sample Collection Date: _____
mm/dd/yyyy

Sample Collection Time: _____
hh:mm am/pm

Sample Collector Name: _____

Sample Collector Phone: _____

Street Address and Tap Location: _____

_____

_____

Free Chlorine Residual: _____

Total Chlorine Residual: _____

## LABORATORY INFORMATION:

Reporting Lab Name: Alloway – Marion

Reporting Lab Certification No.: 838

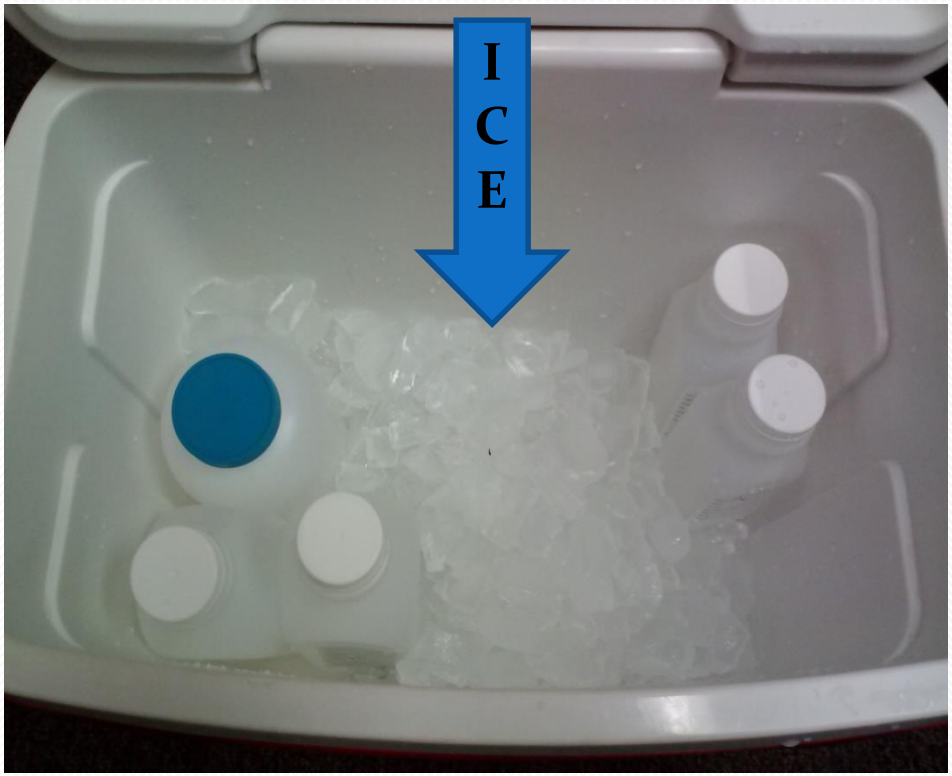
Lab Sample Number: _____

**Comments:**

**Bottle #** _____

# GETTING SAMPLES TO THE LABORATORY

# PACKING SAMPLES FOR DELIVERY TO THE LAB




- Some samples need to be packed with ice in a cooler
- If thermal preservation is required, samples should arrive at 0-6 °C
  - Ex. Organics, Phosphorus, TOC
  - Check with the laboratory for a complete list

# PACKING SAMPLES FOR DELIVERY TO LAB

- Use plenty of packing materials to protect glass bottles
- Some samples will need to be shipped overnight to arrive at the proper temperature or within hold time
- Pack samples upright to prevent leaking

# SAMPLE FLOW

# RECEIVING SAMPLES AT THE LAB

- Check that all samples are intact, they match the paperwork, and are within hold time
- Check temperature
- Check pH
- Check chlorine

# Common Reasons for Sample Rejection Include:

Insufficient sample volume (especially micro)

Incorrect preservation

Sample hold time exceeded

Sample not received on ice

Incomplete paperwork

# SAMPLE FLOW

- At log-in, samples are assigned unique identifiers and double checked by managerial personnel
- The Laboratory Information Management System (LIMS) is designed to handle our sample load

# SAMPLE FLOW

- Samples move throughout the laboratory through a system of checks and balances:
  - Backlog reports isolate sample by matrix, parameter, and due dates
  - Status reports indicate a sample's progress
  - Actual preparatory and analytical work
  - Review of data via secondary check
  - Final review of data and issuance of Certificates of Analysis
  - Proper archiving of data for retrieval and management

# REPORTING

- For compliance drinking water samples, the laboratory is required to report results to both the PWS and Ohio EPA
- Depending on the sample type and analysis, results may need to be reported within 24 hours after analysis is completed
- All of the information needed to report results to Ohio EPA needs to be provided on the COC or SSR forms

# SUMMARY

- Spend the extra time to work with the laboratory on the sampling side of environmental testing.
- Remember that good sampling techniques require trained personnel.
- Encourage your field personnel to visit your analytical laboratory to learn about the various methods.
- Make sure that holding times are met.
- Ensure that samples are collected in proper containers with preservatives and packed in an adequate amount of ice.

# A SIMPLE EQUATION…..