### Texas Commission on Environmental Quality

**CHECKLIST WORKSHEET**

**IHW RCRA INTERIM STATUS FACILITY CME CHECKLIST 6 SECTION B**

<table>
<thead>
<tr>
<th>Regulating Entity Name</th>
<th>Date:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Additional ID:</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Item Number</th>
<th>Description</th>
<th>Answer</th>
<th>Citations</th>
<th>Notes</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Are Sample labeled as they are collected?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1A</td>
<td>Are sample labels used?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1B</td>
<td>Do they provide the following information:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1BI</td>
<td>Sample identification number?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1BII</td>
<td>Name of collector?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1BIII</td>
<td>Date and time of collection?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1BIV</td>
<td>Place of collection?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1BV</td>
<td>Parameter(s) requested for analysis?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>1C</td>
<td>Do they remain legible even when wet?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>2</td>
<td>Are sample seals placed on each shipping container or individual sample bottle to ensure that samples are not altered?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3</td>
<td>Does the operator maintains a field log book that document all aspects of the sampling event?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4</td>
<td>Is Chain-of-custody record / sample analysis request sheet prepared for each sample?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4A</td>
<td>Does Chain-of-custody document the following:</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4AI</td>
<td>Sample number?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4AIll</td>
<td>Signature of collector?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4AIlll</td>
<td>Date and time of collection?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4AIV</td>
<td>Sample type?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4AV</td>
<td>Identification of well?</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

05/24/2019  IHW RCRA INTERIM STATUS FACILITY CME CHECKLIST 6 SECTION B  Administrator  Page 1 of 2
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<th>Notes</th>
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<tbody>
<tr>
<td>4AVI</td>
<td>Number of containers?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4AVII</td>
<td>Parameters requested?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4AVIII</td>
<td>Preservatives used?</td>
<td></td>
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</tr>
<tr>
<td>4AIX</td>
<td>Signatures of persons involved in the chain-of-possession?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4AX</td>
<td>Inclusive dates of possession?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4AXI</td>
<td>Laboratory sample number (if different than field number)?</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>4B</td>
<td>Include example of chain-of-custody form or tag as Attachment #.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>