

**TEXAS COMMISSION ON ENVIRONMENTAL QUALITY  
WATER QUALITY PARAMETER MONITORING FORM (WQPMF) 20679**

<b>COMPLETED BY PWS (OR AGENT)</b>		<b>COMPLETED BY LABORATORY</b>	
<b>PWS Name:</b>		<b>Laboratory Name</b>	
<b>PWS ID:</b>	TX	<b>TCEQ Lab ID #:</b>	
<b>PWS Address:</b>		<b>Laboratory Address:</b>	
<b>PWS Contact:</b>		<b>Laboratory Contact:</b>	
<b>PWS Contact Phone #:</b>		<b>Laboratory Contact Phone #:</b>	

<b>Inhibitor or Stabilizer Used (√)</b>	<input type="checkbox"/> phosphate	<input type="checkbox"/> silica	<input type="checkbox"/> calcium carbonate
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**SAMPLE INFORMATION**

<b>Sample Collector Name:</b>		<b>Sample Collector Organization:</b>	
<b>Sample Collector (√):</b>	<input type="checkbox"/> Public Water System	<input type="checkbox"/> Accredited Lab	<input type="checkbox"/> 3 <sup>rd</sup> Party Contractor
		<b>LAB ID#:</b>	

<b>Temperature and pH (Y or N)</b>	<input type="checkbox"/> Are temperature and pH included on the sampling entity's Laboratory Approval Form on file at the TCEQ?	<input type="checkbox"/> Were temperature and pH measured in the field within 15 minutes of sample collection?	<b>Parameters Requested:</b> Analyses are required for the parameters checked below. *If inhibitors containing phosphate or silica are used, parameters should be analyzed depending on which is used.
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Facility ID entry point (PBCU####) or distribution (DS01)	Sample Point ID entry point (EWQP) or distribution (DSTWQP)	Sample Location (address of sample point)	Sample Collection Date (MM/DD/YY)	Sample Collection Time-24 Hr (HHMM)	Field Measured Sample pH	Field Measured Sample Temp (°C)	Replacement Indicator (√)	Original Sample ID#	Original Sample Date (MM/DD/YY)	Lab Sample ID	alkalinity (1927)	calcium (1919)	chloride (1017)	conductivity (1064)	hardness (1915)	iron (1028)	manganese (1032)	sodium (1052)	sulfate (1055)	TDS (1930)	orthophosphate (as P) (1044) *	silica (1049) *	

<b>Sample Collection Acknowledgement</b>	<b>Sample Conditions Upon Receipt (√)</b>		
I acknowledge that information on this form is true and correct, and sites selected for sampling follow the instructions in the <i>TCEQ Monitoring and Sample Collection Guidance for Water Quality Parameters</i> . This includes, but is not limited to the measurement of pH and temperature immediately upon collection. Falsification of this form or tampering with water samples is a crime punishable under state and/or federal law. (Texas Penal Code, Title 8, Chapter 37, Section 37.10)	<input type="checkbox"/> Samples received unpreserved?	<input type="checkbox"/> Iced	<input type="checkbox"/> Ambient

<b>Name of Authorized PWS Representative (Print)</b>	<b>PWS Representative Signature</b>	<b>Organization</b>	<b>Date</b>	Rejection Code (if applicable):	Actual/corrected sample temperature (°C):
				Date/time of sample preservation (acidified):	

<b>CHAIN OF CUSTODY</b>				<b>Laboratory Comments:</b>
Relinquished By Sampler (Signature)	Date/Time:	Relinquished By Courier (Signature)	Date/Time:	
Received By Courier (Signature)	Date/Time:	Received By Lab (Signature)	Date/Time:	

# INSTRUCTIONS FOR COMPLETING THE WATER QUALITY PARAMETER MONITORING FORM 20679

The PWS (or agent) completes the following fields. <sup>1</sup>	
<b>PWS Name:</b>	Name of the public water system (PWS)
<b>PWS ID:</b>	PWS identification number (seven digits preceded by the letters "TX")
<b>PWS Address:</b>	PWS address
<b>PWS Contact Name:</b>	PWS contact person (or agent) responsible for the samples
<b>PWS Contact #:</b>	PWS contact (or agent) phone number
<b>Inhibitor or Stabilizer Used:</b>	Check the box indicating the type of inhibitor or stabilizer used by the water system: phosphate, silica, or calcium carbonate. (If applicable) <b>IMPORTANT NOTE:</b> The laboratory must analyze for orthophosphate or silica if either of those inhibitors is checked.
<b>Sample Collector Name:</b>	Name of sample collector
<b>Sample Collector Organization:</b>	Name of sample collector's organization
<b>Sample Collector (✓):</b>	Check if samples are collected by the PWS, your accredited lab or a 3rd party/contractor. Complete Sample Collector Name and Organization fields. Include sample collector's Lab ID number from <b>Form 10450</b> .
<b>Are temperature and pH included on the sampling entity's laboratory approval form on file at the TCEQ? (Y or N)</b>	Yes (Y) or No (N). Sampling entity must complete a <b>Laboratory Approval Form 10450</b> and submit to TCEQ for approval prior to sampling. EPA allowed methods must be used to measure pH and temperature in the field.
<b>Were temperature and pH measured in the field upon sample collection (i.e., within 15 minutes of sample collection)? (Y or N)</b>	Yes (Y) or No (N). Field measurements must be completed as soon as possible but no more than 15 minutes after sample collection.
<b>Facility ID #:</b>	Facility ID number found in Texas Drinking Water Watch (DWW). "DS01" for distribution, "PBCU001", etc. for entry points. Refer to "Sample Points" link on the DWW webpage at <a href="http://dww2.tceq.texas.gov/DWW/">http://dww2.tceq.texas.gov/DWW/</a>
<b>Sample Point ID #:</b>	Sample point ID number found in Texas DWW. For example, "DSTWQP" for distribution, "EWQP" for entry points. Refer to "Sample Points" link on the DWW webpage at <a href="http://dww2.tceq.texas.gov/DWW/">http://dww2.tceq.texas.gov/DWW/</a>
<b>Sample Location:</b>	Address of sample point. For example, 123 Main Street
<b>Sample Collection Date:</b>	Date of sample collection by PWS (or agent) in MM/DD/YY format.
<b>Sample Collection Time:</b>	Time of sample collection by PWS (or agent) in 24-hour HHMM format.
<b>Sample pH:</b>	Record the sample pH at time of collection in the field.
<b>Sample Temp:</b>	Record the sample temperature at time of collection in °C in the field.
<b>Replacement Indicator (✓):</b>	Check (✓) if the sample replaces a previously rejected sample. Otherwise, leave blank.
<b>Original Sample ID #:</b>	If the "Replacement Indicator" box is checked fill out the "Original Sample ID #" column". Otherwise leave blank. Can be added by the laboratory.
<b>Original Collection Date:</b>	If the "Replacement Indicator" box is checked fill out the "Original Sample Collection Date" column. Otherwise leave blank. Can be added by the laboratory.
<b>Sample collection acknowledgement:</b>	Responsible PWS representative (or agent) who vouches for correct sample collection procedure and documentation. Fill out name, signature, organization, and date.
<b>Chain of Custody (COC):</b>	Indicate sample transfer by signature and date if the form is used to document COC. Several lines are provided for multiple transfers.
The Laboratory completes the following fields. <sup>2</sup>	
<b>Lab Name:</b>	Laboratory name
<b>TCEQ Lab ID #</b>	Laboratory ID number, unique to the Safe Drinking Water Information System (SDWIS). Usually, the first ten digits of the accreditation ID
<b>Lab Address:</b>	Laboratory address
<b>Lab Phone:</b>	Laboratory phone number
<b>Lab Contact Name:</b>	Laboratory contact name
<b>Lab Sample ID:</b>	Laboratory generated sample ID number
<b>Parameters Requested:</b>	Check analyses to be performed. Orthophosphate or silica may be required depending on the inhibitor used.
<b>Sample Conditions Upon Receipt:</b>	Check boxes that apply. Record the actual and corrected sample temperature separated by a "/". Provide the serial number of the thermometer. Provide rejection code(s) as applicable. Additional rejection information can be provided under laboratory comments.
<b>Rejection Code (if applicable):</b>	If a sample is rejected, fill in the code for the reason. See QAPP Addendum 3 for codes. Additional information can be provided under laboratory comments.
<b>Actual/corrected sample temperature:</b>	Record the actual and corrected sample temperature separated by a "/".
<b>Thermometer ID#:</b>	Record the serial number or other unique identifier of thermometer used to measure temperature.
<b>Date/time of sample preservation (acidification):</b>	Provide the date and time that the portion of the sample that requires preservation was acidified in the laboratory.
<b>Laboratory Comments:</b>	Optional. Any comments the laboratory may want to document.
<b>Received by Lab:</b>	Indicate sample receipt by signature and date if the form is used to document COC.

<sup>1</sup> See additional information at [www.tceq.texas.gov/drinkingwater/chemicals/lead\\_copper/lead-copper.html](http://www.tceq.texas.gov/drinkingwater/chemicals/lead_copper/lead-copper.html) under "Water Quality Parameter Sampling."

<sup>2</sup> See additional information in the QAPP Addendum 3 - *Guidance for the Analysis and Reporting of Water Quality Parameters under the Lead and Copper Rule* at <https://www.tceq.texas.gov/drinkingwater/pwss.html#QAPP>

For Water Quality Parameter questions, contact the TCEQ Water Supply Division Lead and Copper Monitoring Team at [PWSLCR@tceq.texas.gov](mailto:PWSLCR@tceq.texas.gov) or (512) 239-4691.