



Public Water System (PWS) Information

PWS Name:	PWS ID:	Phone Number or Email:
PWS Mailing Address:	City:	State and Zip Code:
Name of Person Completing Form:	Date:	Signature:

Entry Points

Use a separate copy of this form for each entry point to your water system.

Entry Point (EP) ID1:	Entry Point Name ¹ :
Total Number of EPs at the PWS:	

Sources that Feed the Entry Point

Source ID ²	Name ²

Required Entry Point Sample Results³

The laboratory results must be attached to this form.

Callastian Data	1 (//)	Campan (man/1)	
Collection Date	Lead (mg/L)	Copper (mg/L)	

¹ You can find your water system on TCEQ's Drinking Water Watch: https://www.tceq.texas.gov/goto/dww. Click on "Water System Facilities" to find your active Entry Points (listed with an ID number beginning with EP). An entry point is a point after all treatment but before your distribution system and where you take your source lead/copper samples.

²Use TCEQ's Drinking Water Watch to list the sources that feed the EP listed above. If many sources (such as a well field) flow to an entry point, group the sources. Example: G1234567A–G1234567T, Far Away Well Field.

³All entry point faucets should be flushed for 5 minutes prior to sample collection of lead and copper samples to obtain a sample that is representative of the source after treatment. This is different from the lead and copper tap samples collected inside PWSs' customer homes or in non-transient non-community (NTNC) PWSs' buildings. The tap samples must be collected after a minimum stagnation period of 6 hours with no prestagnation flushing. Entry point lead and copper samples should only be collected after flushing.

Historical Entry Point or Source Sample Results

Enter other lead and copper source or EP results that you used in forming your recommendation.

Source or Entry Point	Lead or Copper	Number of	Date Range (mm/dd/yy)		Average (mg/L)	Minimum (mg/L)	Maximum (mg/L)
ID(s)		Samples	Start	End			

Source Changes

Describe any changes in your source(s) that occurred after the lead and/or copper action level exceedance, but prior to the collection of the required EP samples.	
Describe any plans to change your source of water or to add additional water sources in the next 2 years.	

Source Treatment Recommendation⁴

Ion	Reverse	Lime	Coagulation/Filtration	No Treatment
Exchange	Osmosis	Softening		Necessary ⁵

⁴ Please check the box for the treatment(s) you are recommending. You can choose more than one, but **you must check at least one box as stated in 30 Texas Administrative Code §290.117(g)(1)**.

Why did you recommend the treatment(s)?		

Print Form

Mail form(s) and results to:

Lead and Copper Program
TCEQ – MC 155
P.O. Box 13087
Austin, TX 78711-3087

If you have questions on how to fill out this form or about the Lead and Copper in Drinking Water Program, please contact us at 512-239-4691.

Individuals are entitled to request and review their personal information that the agency gathers on its forms. They may also have any errors in their information corrected. To review such information, contact us at 512-239-3282.

⁵ You may only choose "no treatment necessary" if the lead and copper sample results are below 0.010 mg/L lead and 0.800 mg/L copper.