



**Chain of Custody (COC) for Total Coliform / E. Coli**

Field Sample Data				Sample Receipt (To be completed by Lab)	
Date:	Person(s) to Send Report to:			Received in Ice? Y or N	
Client:	Email or Address for Report:			Temperature of sample bottle(s) (°C):	
Collected By:	Permit # (if applicable):			IR Thermometer ID:	
Collector's Contact Info (phone / email):	System Name (if applicable):			Refrigerator Storage ID:	
Number of Coolers:	System Address (if applicable):			Sample(s) Accepted? Y or N:	

**Type of Supply:** (check only one)

Community Water     
  Non-Transient Non-community Water System     
  Transient Non-community Water System  
 Limited Use System     
  Bottled Water     
  Private Well     
  Swimming Pool     
  Other: \_\_\_\_\_

**Reason of Sampling:** (check all that apply)

Distribution     
  Distribution Repeat     
  Raw (triggered or assessment)     
  Raw (triggered or assessment) additional     
  Well Survey  
 Routine Clearance     
  Replacement (also check type of sample being replaced)     
  Boil Water Notice     
  Other: \_\_\_\_\_

To be completed by collector of sample								To be completed by lab		
Sample #	Sample Point (Location)	Collection Time	Sample Type <sup>1</sup>	pH	Person Performing Chlorine Analysis <sup>2</sup>	Field Residual Chlorine (mg/L)	Chlorine Analysis Method (e.g. DPD)	Perservative in bottle? Y or N	Labworks Unique ID #	Notes

Note 1: Indicate the sample type for each sample collected. Sample type codes are: D=Distribution, C=Repeat/Check, R=Raw, N=Entry Point to Distribution, P=Plant Tap, S=Special (clearance, etc).  
 Note 2: Indicate the qualifying status of the person performing disinfectant analyses. This only applies to disinfectant analyses for type "D" and "C" samples at community and non-transient non-community public water systems. Examples include: (1) A certified operator #; (2) Supervised by certified operator #; (3) Employed by a certified lab; (4) Employed by DEP or DOH; (5) Authorized representative of supplied water.

Chain of Custody			
Relinquished By:	Date:	Time:	Notes:
Received By:	Date:	Time:	
Relinquished By:	Date:	Time:	
Received By:	Date:	Time:	
Reviewed By:	Date:		

## FDOH ENVIRONMENTAL LABORATORY WEST PALM BEACH

### Instructions for Completing a Chain of Custody Record for Drinking Water Samples

The attached is an example of Chain of Custody form or sample submission sheet. The document is completed in the field and provides a written record of the handling of the samples from the time of collection until they are received at the laboratory. The Chain of Custody form also provide information on what type of testing is being requested and can act as an order for laboratory service in the absence of a formal contract. Chain of custody and any additional record received at the time of sample submission are maintained by the laboratory.

#### I. Fields to be completed by sample collector:

1. Sample Collection Date \_\_\_\_\_ Provide the date the samples are collected. If samples are collected on more than one day, provide the collection date for each sample.
2. Client \_\_\_\_\_ Provide Client full name.
3. Collected By \_\_\_\_\_ Provide the sample collector fist and last name.
4. Collector's Contact Info \_\_\_\_\_ Provide sample collector phone number or email.
5. Number of Coolers \_\_\_\_\_ Provide the number of coolers used to store the samples.
6. Person to Send Report to \_\_\_\_\_ Provide the name of the person who will receive the report.
7. Email or Address for Report \_\_\_\_\_ Provide email or mailing address of the person who will receive the report
8. Permit # \_\_\_\_\_ Provide the 7-digits DEP PWS ID number.
9. System Name \_\_\_\_\_ Provide the full name of the public water system.
10. System Address \_\_\_\_\_ Provide the address in which the system is located.
11. Type of Supply \_\_\_\_\_ Check the box next to the type of PWS or source being tested.
12. Reason for Sampling \_\_\_\_\_ Check the box next to the reason the samples are being collected.
13. Sample # \_\_\_\_\_ Provide a unique number for each sample.
14. Sample Point \_\_\_\_\_ Provide the specific street address (or equivalent) for each sample collected.
15. Collection Time \_\_\_\_\_ Provide the time of collection for each sample collected.
16. Sample Type \_\_\_\_\_ Indicate the sample type for each sample collected. Sample type codes are: D = Distribution (routine compliance), C = Repeat/Check, R = Raw, P = Plant Tap, S = Special (Clearance, etc.).
17. pH \_\_\_\_\_ Indicate the field pH of the water sample.
18. Person performing Chlorine Analysis \_\_\_\_\_ Indicate the person performing disinfectant analyses. This only applies to disinfectant analyses for type "D" and "C" samples at community and non-transient non-community public water systems.
19. Disinfectant Residual \_\_\_\_\_ Indicate the disinfectant residual in mg/L (Chlorine, Chloramines, Chlorine Dioxide, etc.)
20. Relinquished By \_\_\_\_\_ The person who releases the sample(s) to the laboratory must sign, date and write the time they handed over the samples.

#### II. Fields to be completed by the laboratory:

1. Received in Ice \_\_\_\_\_ Indicate whether or not the sample meet minimum conditions of preservation (i.e., a temperature of <math><10^{\circ}\text{C}</math> is to be maintained during transit)
2. Temperature of sample bottles \_\_\_\_\_ Samples are checked by laboratory staff with a calibrated electronic IR thermometer.
3. IR Thermometer ID \_\_\_\_\_ Laboratory record IR Thermometer unique ID.
4. Sample Accepted \_\_\_\_\_ Indicate whether or not the sample is accepted.
5. Preservative in bottle \_\_\_\_\_ The laboratory can show that the received sample container is from their laboratory or have been appropriately tested and documented.
6. Labworks Unique ID # \_\_\_\_\_ Provide a unique number for each sample.
7. Received By \_\_\_\_\_ The person who receives the samples at the laboratory must sign, date, and write the time they were received.