ODW I	/licrobiolog	ical Resu	ılts Data Entry Form						Rev. 11/10/2005	
Lab ID	Oamolo IO	D/WGID	Sample Location	Collect Date	Collect :	Receive Date	Sample Type	Std Moth	TC.or. Fecal_E Reject	CL2 Sampler Name
00005	186C		Chesterfield- Chesdin Road	2/5/2007		2/5/2007	Sample Type D_Routine	SM9223B	A A	3.00 DJ
00005	188C		Petersburg Meter Vault	2/5/2007		2/5/2007	D_Routine	SM9223B	A A	2.80 DJ
00005			Temple Ave Vault	2/5/2007		2/5/2007	D_Routine	SM9223B	A A	2.90 DJ
00005	187C		DCWA Pump Station	2/5/2007		2/5/2007	D_Routine	SM9223B	A A	2.90 DJ
00005	190C		Swift Creek Vault	2/5/2007		2/5/2007	D_Routine	SM9223B	A A	2.80 DJ
			Chesterfield- Chesdin Road	2/12/2007		2/12/2007	D_Routine	Ready Cult	A A	3.20 DJ
00005		4041035	Temple Ave Vault	2/12/2007		2/12/2007	D_Routine	Ready Cult	A A	2.70 DJ
00005	12R		Swift Creek Vault	2/12/2007		2/12/2007	D_Routine	Ready Cult	A A	2.80 DJ
00005			Petersburg Meter Vault	2/12/2007		2/12/2007	D_Routine	Ready Cult	A A	2.80 DJ
	240C		DCWA Pump Station	2/20/2007		2/20/2007	D_Routine	SM9223B	A A	3.00 DJ
			Swift Creek Vault	2/20/2007		2/20/2007	D_Routine	SM9223B	A A	3.30 DJ
			Temple Ave Vault	2/20/2007		2/20/2007	D_Routine	sm9223B	A A	2.90 DJ
			Petersburg Meter Vault	2/20/2007		2/20/2007	D_Routine	SM9223B	A A	3.00 DJ
			Chesterfield- Chesdin Road	2/20/2007		2/20/2007	D_Routine	SM9223B	A A	3.40 DJ
			Swift Creek Vault	2/26/2007	1145	2/26/2007	D_Routine	SM9223B	A A	3.10 DJ
	282C	4041035	Petersburg Meter Vault	2/26/2007	1050	2/26/2007	D_Routine	SM9223B	A A	3.30 DJ
			Central State Hospital	2/26/2007	1020	2/26/2007	D_Routine	SM9223B	A A	2.50 DJ
00005	280C	4041035	Chesterfield- Chesdin Road	2/26/2007	0945	2/26/2007	D_Routine	SM9223B	A A	3.30 DJ

ODW Use Only	Data Entry Instructions									
	Sample Types	Lab ID: Your Lab Certification ID								
	D Routine									
	P_Plant Tap Sample	Sample ID: Alphanumeric text that identifies the sample. This value must be unique throughout the calendar year. Duplicate sample ID's will be rejected from our system.								
	Q_Raw Water									
	R_Repeat Sample	PWSID: The valid Public Water System ID Number.								
	S_Special Sample	FWSID. The valid rubile water System ib Number.								
	X_Resample	Sample Location: The description of the location where the sample was collected.								
		Collect Date: The date the sample was collected in mm/dd/yyyy format.								
	Field Chlorine Residual (CL2)									
	Permitted Values	Collect Time: The time the sample was collected in 24-hour format.								
	Actual Numeric Value	Receive Date: The date the sample was received in your lab mm/dd/yyyy format.								
	Not Analyzed Leave Blank									
	Not Detected> Enter 0.0	Sample Type: See description of valid entries in P2 of this worksheet.								
	If reported as ">x.xx"> Enter 5.99									
		Std_Meth: The official Standard Method code used to analyze the sample.								
		TC or MPN: The actual result for Total Coliform. For Presence/Absence methods, this								
		value shall be "A" for Absent and "P" for Present. All other method type results shall be a numeric value with or without operand (<).								
	Rejection Codes									
	BP_Invalid Sample Point									
	BR_Breakage	Fecal_EColi: The actual result for Fecal or E. Coli. For Presence/Absence methods, this value shall be "A" for Absent and "P" for Present. All other method type results shall be a numeric value with or without operand (<).								
	CG_Confluent Growth									
	CL_Chlorine present									
	EH_Exceeded 30 Hour Holding Time									
	FZ_Sample Frozen	Reject: See description of valid entries in P22 of this worksheet. If a sample is rejected, the "TC or MPN" and Fecal_Ecoli fields should not be populated with result data.								
	HS_Excess headspace									
	IN_Insufficient Sample Information	Field Chlorine Residual (CL2): The field chlorine residual value of the analysis in mg/l. If								
	IP_Invalid Sampling Protocol	the waterworks analyzes the chlorine residual, then the lab should enter the data from the history sheet. This chlorine residual should be the result from the field, not from the lab.								
	LA_Lab Accident									
	LT_Leaked in transit									
	TB_Turbid Sample	Sampler Name: The name of the person who collected the sample.								
	TN_Too Numerous To Count	ODW Use Only: This field is to be populated by the Office of Drinking Water.								
	VO_Insufficient Volume	Davi Ose Only. This held is to be populated by the Office of Diffiking Water.								