

# TCEQ Microbial Reporting Form (TCEQ-10525)

Form instructions: [www.tceq.texas.gov/drinkingwater/microbial/revise-total-coliform-rule](http://www.tceq.texas.gov/drinkingwater/microbial/revise-total-coliform-rule)

Water System Identification & Sample Collection Information (Please print or type the information)

Public Water System ID:  
(Must be 7 digits; include all zeros)

TX

Public Water System Name:

Report Results To:

Name:

COH Payment  
Account Number:

Address:

City:

State:

Zip Code:

Phone #:

PWS Email:

\* SAMPLES MARKED AS SPECIAL OR CONSTRUCTION CANNOT BE USED AS ROUTINE OR REPEAT SAMPLES

Sample Identification/Location

Sample Type (√ one)

Collected

Chlorine Residual

Original Sample Info: Sample ID and Date of Collection (Repeat, TSM Raw Well, Replacement)

Use sample site location/address identified in the system's RTRC Sample Siting Plan

Raw Wells: Use Well Source ID (Ex: G1234567A)

Routine (Distribution)

Repeat

Raw Well

Special \*

Construction \*

Date (MM/DD/YY)

Time Military Time (HHMM)

Free mg/L

Total mg/L

Replacement

Houston Health Department  
Environmental Microbiology Laboratory

2250 Holcombe Blvd. Houston, TX 77030

Phone: (832)393-3939

Email: [WaterLab.info@houstontx.gov](mailto:WaterLab.info@houstontx.gov)

Website: <https://www.houstonhealth.org/services/laboratory-services>



TCEQ Laboratory ID:  
T104704253

Laboratory Analysis

Sample Iced?

Temperature (°C)

Lab Comments

Yes

No

Actual Temp:

Corrected Temp:

Therm. ID

Incubation Date and Time

Lab Rejected Code (LR) - Document Reason:

Start Date and Time:

Analyst:

End Date and Time:

Analyst:

Result Reporting and Approval

Laboratory Approval:

Date:

Time:

Reported to PWS By:

Date:

Time:

Laboratory Analysis Results

Rejection Code (if applicable) - Please Recollect

Test Method: SM 9223 B Colilert®-18

Analysis Results meet all accreditation requirements unless stated otherwise.

Chlorine Check

Total Coliform

E. coli

Laboratory Sample ID Number

Absent

Present

Absent

Present

Absent

Present

I acknowledge that samples were handled appropriately and all information is accurate. 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 37.10)

Sampler Name (Print):

Sampler Signature:

Sampler Phone #:

Sampler Email:

Operator License # (if applicable):

Relinquished By Sampler:

Date and Time:

Received By Courier (if applicable):

Date and Time:

Relinquished By Courier:

Date and Time:

Received By Lab:

Date and Time: