MONTHLY SUMMARY OF DISTRIBUTION SYSTEM COLIFORM MONITORING

(including triggered source monitoring for systems subject to the Groundwater Rule)

System Name	Syster	n Number		
ODD FELLOWS SIERRA RECKERTION A.	SSOCIATION	<u>5</u> 5	10016	aarrenderen op er cysposiaan kankon op kan poeks op skalen kankon op kankon op kankon op kankon op kankon op k
Month JUNE	Year	20	010	
	Number Required	Number Collected	Number Total Coliform Positives	Number Fec E.coli Positi
1. Routine Samples (see note 1)	3	3	_Ø_	_Ø_
2. Repeat Samples following Samples that are Total Coliform Positive and Fecal/E.coli <i>Negative</i> (see notes 5 and 6)		Authorizated Adelesco piccolology pilor mass relatencia monte con	<u>ø</u> _	
3. Repeat Samples following Routine Samples that are Total Coliform <i>Positive</i> and Fecal/E.coli Positive (see notes 5 and 6)				- Constitution of the Cons
		NEW DEPOSITION OF SECURITIES AND ARTHUR AND		
4. MCL Computation for Total Coliform Positive Samples		2	d	
a. Totals (sum of columns)		5	<u></u>	
b. If 40 or more samples collected in month, determine percent of samples that are total coliform positive [(total number positive/total number collected) x 100] =	9	V ₀		
c. Is system in compliancewith fecal/E. coli MCL? (see notes 2 and 3)	Yes	□ No		
with monthly MCL? (see note 4)	Yes	□ No		
 Source Samples Triggered by Routine Samples that are Total Colife (This applies only to systems subject to the Groundwater Rule - se 			Winter Astronomy Conference and the Conference and	
 Invalidated Samples (Note what samples, if any, were invalidated; who authorized the if were collected. Attach additional sheets, if necessary.) 	nvalidation; and w	vhen replacemen	nt samples	
7. Summary Completed By:				
Signature Searlog ougl	Title D	- 2 OPE # 2739	RATOR	Date 7/12/20
NOTES AND INSTRUCTIONS:				
1. Routine samples include: a. Samples required pursuant to 22 CCR Section 64423 and any additional samples required by b. Future complex one required for gustame collecting less than five soutine complex nor month the			*	on 64422.

- b. Extra samples are required for systems collecting less than five routine samples per month that had one or more total coliform positives in previous month;
- c. Extra samples for systems with high source water turbidities that are using surface water or groundwater under direct influence of surface water and do not practice filtration in compliance with regulations:
- 2. Note: For a repeat sample following a total coliform positive sample, any fecal/E.coli positive repeat (boxed entry) constitutes an MCL violation and requires immediate notification to the Department (22, CCR, Section 64426.1).
- 3. Note: For repeat sample following a fecal/E.coli positive sample, any total coliform positive repeat (boxed entry) constitutes an MCL violation and requires immediate notification to the Department (22, CCR, Section 64426.1).
- 4. Total coliform MCL (Notify Department within 24 hours of MCL violation):
 - a. For systems collecting less than 40 samples, if two or more samples are total coliform positive, then the MCL is violated.
 - b. For systems collecting 40 or more samples, if more than 5.0 percent of samples collected are total coliform positive, then the MCL is violated.
- 5. Positive results and their associated repeat samples are to be tracked on the Coliform Monitoring Worksheet.
- 6. Repeat samples must be collected within 24 hours of being notified of the positive results. For systems collecting more than one routine sample per month, three repeat samples must be collected for each total coliform positive sample. For systems collecting one or fewer routine samples per month, four repeat samples must be collected for each total coliform positive sample.
- 7. For systems subject to the Groundwater Rule: Positive results and the associated triggered source samples are to be tracked on the Coliform Monitoring Worksheet.
- 8. For triggered sample(s) required as a result of a total coliform routine positive sample, an *E.coli*, enterococci, or coliphage positive triggered sample (boxed entry) requires immediate notification to the Department, Tier 1 public notification, and corrective action.

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1) Surface 2) Well He 3) Well Di	4) Reservoir 5) Distribution 6) Treatment Plant								continuent	R(A) R B) R C) S	epea	ie at	Type C) Total Coliform F) Fecal Coliform H) Heterotrophic Plate Count E) E. coli						
1816 A Collection Data									-	Five Portions					Presence/Absence				
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