



**ENVIRONMENTAL REGULATIONS DEPARTMENT
 SURVEILLANCE AND MONITORING DIVISION**

WASTEWATER SAMPLING FORM

Name of Company: _____ Lat: _____ Long: _____
 Plant Address: _____ Fax Nos.: _____
 Business Activity: _____ Tel. Nos.: _____
 Purpose: DP Quarterly CM Saturation Complaints Re-sampling: TAR as requested
 WTF/ STP Effluent IW - _____ Total Plant Effluent IW - _____
 By-Pass Effluent IW - _____ Plant Effluent IW - _____
 WTF/ STP Influent* IW - _____ Others IW - _____
 * Only for: New WTF/STP Strong Waste
 Type of Sample: Grab Composite Estimated Flowrate (Q): _____ cu. m./day
 Clean Containers: Gallon O/G Bottle Coliform Bottle Nalgene™ Ice Chest w/ Ice
 Weather Condition: Fair/Sunny Cloudy Rainy Windy Others _____
 Date/Time of Collection: _____ / _____ Class "C" "SC"

<p><i>Sketch of Sampling Point</i></p>	<p><i>On-site pH Reading:</i></p> <p>1st _____ Temp _____</p> <p>2nd _____ Temp _____</p> <p>3rd _____ Temp _____</p> <p>4th _____ Temp _____</p> <p>5th _____ Temp _____</p> <p>FINAL READING _____</p>
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Collected by: _____

Parameters for Analysis (Please see back page for Significant Parameters):

- Oil & Grease TSS Color Cr⁺⁶ Zn Ni pH
 COD BOD5 Total Coliform Pb Cu _____ _____

Company's PCO/Representative
Print Name & Signature
Designation

<input type="checkbox"/> With / <input type="checkbox"/> Without <i>Chlorination</i> LLDA LABORATORY
Date/Time Received: _____
By Chemist: _____
Remarks: <input type="checkbox"/> Samples arrived w/in 6 hrs. of sampling <input type="checkbox"/> Samples are accompanied by the inspectors <input type="checkbox"/> Unbroken Seal w/ Signature <input type="checkbox"/> No Seal <input type="checkbox"/> No Signature on Seal

- Remarks: Sampling Containers Properly Sealed
 Signed Sealed Containers