Lead Sampling of Drinking Water in CA Schools

Lead Sampling Plan

Water System Name: _________________________________
Water System Number: ________________________________
School Name: _______________________________________
School Address: _____________________________________
Meeting Date: _______________________________________

Water System Representative/Designee: School Representative/Designee:

________________________________  ________________________________
Signature & Date     Signature & Date

________________________________  ________________________________
Print Name      Print Name
Sample Recordkeeping Form

Sample No. 1

Name of Building:_____________________________________________________

Location Description:___________________________________________________

Type of Outlet:________________________________________________________

Sample I.D.:__________________________________________________________

Each Sample I.D. should use the following format: <Water System No.>-<Alphabetic code for each School ID>-<alphabetic code for Sample location> i.e. 1710001-AAC-A.

Must match the code generated by the School Lead Reporting tool (https://drinc.ca.gov/lsics/).

(circle sample type): Initial    1st Follow-up    2nd Follow-up    Post-corrective action

Date & Time Last Used:_________________________________________________

Date Sample Collected:_________________________________________________

Time Sample Collected:_________________________________________________

Name of Sample Collector:_______________________________________________

(circle collector type): Water System Operator   Water System Representative

Lead Concentration (ppb):________________________________________________

NOTES:
Sample Recordkeeping Form

Sample No. 2

Name of Building:__________________________________________________________

Location Description:_____________________________________________________

Type of Outlet:___________________________________________________________

Sample I.D.:____________________________________________________________

Each Sample I.D. should use the following format: <Water System No.>-<Alphabetic code for each School ID>-<alphabetic code for Sample location> i.e. 1710001-AAC-A.

Must match the code generated by the School Lead Reporting tool (https://drinc.ca.gov/lsics/).

(circle sample type)   Initial   1st Follow-up  2nd Follow-up
Post-corrective action

Date & Time Last Used:_____________________________________________________

Date Sample Collected:___________________________________________________

Time Sample Collected:___________________________________________________

Name of Sample Collector:________________________________________________

(circle collector type)   Water System Operator   Water System Representative

Lead Concentration (ppb):_________________________________________________
# Sample Recordkeeping Form

**Sample No. 3**

Name of Building:

Location Description:

Type of Outlet:

Sample I.D.:

Each Sample I.D. should use the following format: <Water System No.>-<Alphabetic code for each School ID>-<alphabetic code for Sample location> i.e. 1710001-AAC-A.

Must match the code generated by the School Lead Reporting tool (https://drinc.ca.gov/lsics/).

<table>
<thead>
<tr>
<th>(circle sample type)</th>
<th>Initial</th>
<th>1\textsuperscript{st} Follow-up</th>
<th>2\textsuperscript{nd} Follow-up</th>
<th>Post-corrective action</th>
</tr>
</thead>
<tbody>
<tr>
<td>Date &amp; Time Last Used:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Date Sample Collected:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Time Sample Collected:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Name of Sample Collector:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

(circle collector type) Water System Operator Water System Representative Contractor

Lead Concentration (ppb):
Sample Recordkeeping Form

Sample No. 4

Name of Building:_____________________________________________________

Location Description:___________________________________________________

Type of Outlet:________________________________________________________

Sample I.D.:__________________________________________________________

Each Sample I.D. should use the following format: <Water System No.>-<Alphabetic code for each School ID>-<alphabetic code for Sample location> i.e. 1710001-AAC-A.

Must match the code generated by the School Lead Reporting tool (https://drinc.ca.gov/lsics/).

(circle sample type)   Initial   1st Follow-up  2nd Follow-up
Post-corrective action

Date & Time Last Used:_________________________________________________

Date Sample Collected:_________________________________________________

Time Sample Collected:_________________________________________________

Name of Sample Collector:_______________________________________________

(circle collector type) Water System Operator Water System Representative Contractor

Lead Concentration (ppb):_______________________________________________
Sample No. 5

Name of Building:_____________________________________________________

Location Description:___________________________________________________

Type of Outlet:________________________________________________________

Sample I.D.:__________________________________________________________

Each Sample I.D. should use the following format: <Water System No.>-<Alphabetic code for each School ID>-<alphabetic code for Sample location> i.e. 1710001-AAC-A.

Must match the code generated by the School Lead Reporting tool (https://drinc.ca.gov/lsics/).

(circle sample type)   Initial   1st Follow-up  2nd Follow-up
Post-corrective action

Date & Time Last Used:_________________________________________________

Date Sample Collected:_________________________________________________

Time Sample Collected:_________________________________________________

Name of Sample Collector:_______________________________________________

(circle collector type) Water System Operator Water System Representative Contractor

Lead Concentration (ppb):______________________________________________
NOTES:
Sample Recordkeeping Form

Sample No. ___

Name of Building:_____________________________________________________

Location Description:___________________________________________________

Type of Outlet:________________________________________________________

Sample I.D.:__________________________________________________________

Each Sample I.D. should use the following format: <Water System No.>-<Alphabetic code for each School ID>-<alphabetic code for Sample location> i.e. 1710001-AAC-A.

Must match the code generated by the School Lead Reporting tool (https://drinc.ca.gov/lsics/).

(circle sample type)   Initial   1st Follow-up   2nd Follow-up   Post-corrective action

Date & Time Last Used:_________________________________________________

Date Sample Collected:_________________________________________________

Time Sample Collected:_________________________________________________

Name of Sample Collector:_______________________________________________

(circle collector type) Water System Operator   Water System Representative Contractor

Lead Concentration (ppb):_______________________________________________
Sample Location Map