This guide to make a written **COLIFORM SAMPLING PLAN** is for you IF: You have only a few water service connections AND 4-log viral disinfection is required due to a confirmed risk of contamination from either E. coli or fecal coliform bacteria and you use ground water or surface water.

<u>Create a matrix</u> like the 1 below as the basis for a coliform sampling plan. It outlines where & when (i) ROUTINE, (ii) REPEAT & SOURCE, and (iii) TEMPORARY ROUTINE samples are to be taken. Other paperwork to make part of a coliform sampling plan includes: a map of water lines, the PUBLIC NOTICE templates accessed via the link at the bottom of this document, plus any written instruction from your water testing lab about collecting samples, completing lab paperwork, transporting samples, scheduled courier services & times samples are accepted.

<u>Sample Sites</u>: For all sampling, only service connections that are available for normal use need to be sampled. At least one sample every calendar quarter is to be tested for total coliform. The general prac-

tice is to assure each region of the water system is represented by at least one ROUTINE sample over the course of a year. Use the map of water lines to justify the choice of sampling sites. When REPEAT samples are required: #1 is from the originally sampled tap, #2 & #3 are up & down stream from #1 and #4 comes from the other side of the water system from #1. **EXCEPTION**: if there are not enough service connections to allow this, multiple samples may be taken from the same site. TEMPORARY ROUTINE samples should be spread from throughout the system.

The matrix below illustrates a plan for a water system with 2 branches and only 1 service connection per branch from which water is normally used. Expand your matrix if more ROUTINE sample sites are needed.

(i) Sample Points for ROUTINE quarterly samples	(ii) 4 REPEAT samples & 1 SOURCE sample (from	(iii) 5 TEMPORARY ROUTINE Samples must be taken in
	each source) must be taken ASAP in the locations	the month immediately after the month coliform was
	below any time coliforms are found present in a	found present in a ROUTINE Sample. Make a list of
	ROUTINE sample:	sample sites scattered through the distribution system.
	Repeat Site A - Restaurant Kitchen	Sites: 1, 2, 3, 4 & 5
ROUTINE Site #1-Restaurant Kitchen	Repeat Site B - Restaurant Kitchen	IF coliform is found present in a TEMPORARY ROUTINE,
	Repeat Site C - Gas Station Snack Bar	return to the sampling requirements in column (ii) and
SAMPLED during the 1 st & 3 rd QUARTERS of the YEAR.	Repeat Site D - Gas Station Snack Bar	again collect 4 REPEATS & SOURCE sample(s).
	Repeat Site A - Gas Station Snack Bar	If ANY of the 4 REPEAT samples or 5 TEMPORARY
ROUTINE Site #2-Gas Station Snack Bar	Repeat Site B - Gas Station Snack Bar	ROUTINE samples show the presence for any kind of
	Repeat Site C - Restaurant Kitchen	coliform bacteria PUBLIC NOTICE is required. See the
SAMPLED during the 2 nd & 4 th QUARTERS of the YEAR.	Repeat Site D - Restaurant Kitchen	link at the bottom of this document.
		Ideally contamination should be eliminated before
		TEMPORARY ROUTINE samples are taken. Contact the
		Health Dept for ideas to help @ (541) 751-2431.

A link to more comprehensive instructions for preparing a COLIFORM SAMPLING PLAN are provided by the state at: http://public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Operations/Pages/management.aspx

Public notice templates related to this document include: "MCL – Resolved," "MCL – Unresolved" and "Fecal Coliform or E. coli MCL Boil Water." A link for each may be found at: http://public.health.oregon.gov/HealthyEnvironments/DrinkingWater/Operations/Pages/publicnotices.aspx