Boil Water Notice

On $6/12/2023$, the Texas Commission on Environmental Quality (TCEQ)
required the Pennington WSC, 2280009, to issue a Boil Water Notice (BWN) to inform
their customers on and off of FM 1280 from Holly
to Friday
to boil their water prior to consumption. Children, Seniors, and persons with weakened
immune systems are particularly vulnerable to harmful bacteria and all customers should
follow these directions.
To ensure destruction of all harmful bacteria and other microbes, water for drinking,
cooking, and ice making should be brought to a rolling boil and then boiled for two minutes.
In lieu of boiling, individuals may purchase bottled water or obtain water from some
other suitable source for drinking water or human consumption purposes.
When it is no longer necessary to boil the water the public water system officials will
notify customers that the water is safe for drinking water or human consumption purposes.
Once the boil water is no longer in effect, the public water system will issue a notice to customers to rescind the boil water notice in a manner similar to this notice. Please
share this information with all the other people who drink this water, especially those
who may not have received this notice directly. You can do this by posting this notice
in public places or distributing them by hand or mail

If you have questions regarding this matter you may contact,

If a customer wishes to reach TCEQ, they may call 512-239-4691.

Tod English at (936)638-4411



Texas Commission on Environmental Quality

CERTIFICATE OF DELIVERY OF PUBLIC NOTICE TO CUSTOMERS: Issue Boil Water Notice

Public Water System (PWS) name: <u>Pennington WSC</u>
PWS ID: 2280009 Area Affected: Entire PWS Cher Area: PM 1280 Helly to Friday Reason(s) issued: (indicate "\subseteq" all applicable circumstances; 30 TAC 290.46 (q)) Low distribution pressures (<20psi) Water outage E. coli or fecal positive microbiological sample(s) Failure to maintain adequate chlorine residuals Elevated finished water turbidities (Surface Water Treatment Rule) Line Break Other:
30 TAC 290.46(q)(1) requires that your PWS make an adequate, good-faith effort to reach all consumers served by the system by appropriate methods (check all below that apply):
COMMUNITY WATER SYSTEM (perform one or more of the following): Furnish a copy of the Notice to radio and television stations serving the PWS service area Publish Notice in a local newspaper serving the PWS service area Direct delivery of Notice to customers Continuously post Notice in conspicuous places within affected PWS service area Electronic delivery or alert systems (e.g., reverse 911)
NONCOMMUNITY WATER SYSTEM (perform one or more of the following): Direct delivery of Notice to customers Continuously post Notice in conspicuous places within affected PWS service area Electronic delivery or alert systems (e.g., reverse 911)
"I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations."
OTE: 30 TAC 290.46(q)(6)(F) requires the PWS to provide documentation to the Executive Director within 10 days.
Date of Delivery to Customers: 6/12/23 Phone: (936)638-4411
Certified by: (print name): Karen M Avorg Title: Office Marger Signature: Date: 10/12/23
Date: 10/12/23



Texas Commission on Environmental Quality

CERTIFICATE OF DELIVERY OF PUBLIC NOTICE TO CUSTOMERS: Rescind Boil Water Notice

			222112111	1 TODELO NOT	CE TO CODIOMED	Ro. Resema Bon Water Hotte	,0		
Publ	ic Wat	er System (PWS) name:	Penningto	n Water Supply Co	orp			
PWS	ID:	2280009		Date Boil Wa	ter Notice Issued:	6/12/23			
resci syste	nded. m has cate " Suffice Affect >0.2r Surfa levels Speci	A public was met all the met all the met all received area (s) had been mediated area. The consistent of the actions rebiological series and metallic actions rebiological series.	ater system s applicable re quirements r pressures (>: nave been th amine >0.5n eatment Rul y below 1.0 I equired by the	to notify custo shall not rescine quirements as met and provi 20 psi) are conoroughly flushing/L) is maint le Only - FinishNTU he Executive Erked "Special",	mers that a boil wad a boil water not a described in 30 of the documentate and adequate a ained throughout ned water entering birector have been from representat	vater notice has been tice until the public water TAC 290.46 (q)(6). tion with submittal: ned per 30 TAC 290.47 (e) chlorine residual (free the system. g the system has turbidity a met (describe actions):	•		
	analy	zed by an ap	proved lab a	and all results	are negative for co	oliform organisms.			
analyzed by an approved lab and all results are negative for coliform organisms. Please indicate how the PWS provided this rescind notification to customers. COMMUNITY WATER SYSTEM (perform one or more of the following): Furnish a copy of the Notice to radio and television stations serving the PWS service area Publish Notice in a local newspaper serving the PWS service area Direct delivery of Notice to customers Continuously post Notice in conspicuous places within affected PWS service area Electronic delivery or alert systems (e.g., reverse 911) NONCOMMUNITY WATER SYSTEM (perform one or more of the following): Direct delivery of Notice to customers Continuously post Notice in conspicuous places within affected PWS service area Electronic delivery or alert systems (e.g., reverse 911) "I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and									
belief, includ	true, ac ing the p	curate, and co possibility of f	mplete. I am a ines and impri	aware that there a sonment for know	re significant penaltie ving violations."	es for submitting false information	on,		
OTE:	30 TAC	C 290.46(q)(6)	(F) requires the		-	e Executive Director within 10 o	days.		
		very to Cust: _K. Miche		115 23		Phone: <u>(936) 638-4411</u> Title: <u>Office Manager</u>	— <u>, , , , , , , , , , , , , , , , , , ,</u>		
E-ma copie	es of t	VSBWN@T he Rescin	d Notice gi	ven to your (customers to: T	Date: <u>00/00/2023</u> completed form, <u>AND</u> ICEQ – Water Supply ustin, TX 78711-3087	110		
DODO.	0	D 1 1 /				14-5-14-14-14-14-14-14-14-14-14-14-14-14-14-			

TCEQ-20809e Revised 04/2018

FM 1280 Holly to Friday

	Raw Wells – Use Source ID for Well Sampled (Example: G1234567A) Well 2, 11269 FM1280	Use Specific Address / Location identified in Sample String Plan Sample String Plan Raw Wells – Use Source ID for Well Samples (Example: G1234567A) Well 2, 11269 FM1280	Falsification of this form or tampering with form, the sampler admondedges that sa Sample Identification / Location Use Specific Address / Location identification identifi	Operator License #: WS0003223 Falsification of this form or tampering with we form, the sampler admowledges that sample Sample Identification / Location Use Specific Address / Location identified Sample String Plan Baw Wells – Use Source ID for Well Sample (Example: G1234567A) Well 2, 11269 FM1280	Rex English Operator License #: WS000 Faisification of this form or tampering form, the sampler admowledges this sample identification / Local Use Specific Address / Location ide Sample String Plan Use Specific Plan Sample String Plan Use Specific Example: G1234567A) Well 2, 11269 FM1	Phone #: 936-65. Sampler Name (Print): Rex English Operator License #: W5000 Falsification of this form or tampering form, the sampler acknowledges the Sample Identification / Location ide Sample String Plan Use Specific Address / Location ide Sample String Plan Wells – Use Source ID for Well (Example: G1234567A) Well 2, 11269 FM1	Phone #: 936-65; Sampler Name (Print): Rex English Operator License #: W5000 Falsification of this form or tampering form, the sampler acknowledges the Sample Identification / Location ide Sample String Plan Use Specific Address / Location ide Sample String Plan Wells – Use Source ID for Well (Example: G1234567A) Well 2, 11269 FM1	City: Pennington Email: dwallaa@a Phone #: 936-655-22 Sampler Name (Print): Rex English Operator License #: WS0003223 Falsification of this form or tampering with w form, the sampler adnowledges that samp sample identification / Location Use Specific Address / Location identified Sample String Plan Use Specific Address of Location identified Sample (Example: G1234567A) Well 2, 11269 FM1280	Address: POBOX City: Penning Email: dwallace Phone #: 936-65 Sampler Name (Print): Rex English Operator License #: WS000 Falsification of this form or tampering form, the sampler admondedges the sample identification / Location ide Sample String Plan Use Specific Address / Location ide Sample String Plan Well 2, 11269 FM1 Well 2, 11269 FM1	Name: Penning Address: P O Box City: Penning Email: dwallace Phone #: 936-65; Sampler Name (Print): Rex English Operator License #: WS000 Falsification of this form or tampering form, the sampler admowledges the sample identification / Location ide Sample String Plan Use Specific Address / Location ide Sample String Plan Wells - Use Source ID for Well (Example: G1234567A) Well 2, 11269 FM1	Name: Penning Address: P O Box RR City: Penning Email: dwallac Phone #: 936-65; Sampler Name (Print): Rex English Operator License #: WS000 Falsification of this form or tampering form, the sampler admowledges the sample identification / Local Use Specific Address / Location ide Sample String Plan Use Specific Address / Location ide Sample String Plan Use Specific Plan Sample (51234567A) Well 2, 11269 FM1	Name: Pennington V Address: PO Box 15 Address: PO Box 15 Email: dwallaa@aol. Phone #: 936-655-227: Sampler Name (Print): Rex English Operator License #: WS0003223 Falsification of this form or tampering with water form, the sampler admonwhedges that samples: Sample Identification / Location Use Specific Address / Location identified in Sample String Plan Use Specific String Plan Wells - Use Source ID for Well Sampled (Example: G1234567A) Well 2, 11269 FM1280	Public Water System ID: (Must be 7 digits; include all zeros) Public Water System Name: County: Address: Pennington V County: Address: Pennington V Email: City: Pennington Email: Well 2, 11269 FM1280 Public Water System Name County: Address: Po Box 15 Wallaa@aol Wallaa@aol Wallaa@aol Wallaa@aol Wallaa@aol Rex English Operator License #: W50003223 Falsification of this form or tampering with water form, the sampler advowledges that samples Sample Identification / Location Use Specific Address / Location identified in Sample String Plan Use Specific Address / Location identified in Sample String Plan Well 2, 11269 FM1280	Public Water System (Must be 7 digits; include a Public Water System (Must be 7 digits; include a Public Water System Public Water System Address: P O Box City: Penning Email: dwallar Phone #: 936-65; Sampler Name (Print): Rex English Operator License #: WS000 Falsification of this form or tampering form, the sampler admowledges the sample identification / Local Use Specific Address / Location ide Sample String Plan Use Specific Source ID for Well Example: G1234567A) Well 2, 11269 FM1
	Routine	Routine (Distribution) Repeat	Routine Routine	ering with water samples is a crime pute that samples were collected according to identified in n n Routine (Olstribution) Repeat Raw Well Raw Well Raw Well	ering with water samples is a crime possible that samples were collected according to the collected ac	#: WS0003223 #: WS0003223 **: WS0003223 **: Or tampering with water samples is a crime punowledges that samples were collected according plan **: The control of the contro	#:WS0003223 #:WS0003223 #:WS0003223 Collected according to the systems established sample collected mowledges that sampled in liting Plan Date Date Time Please circle Please cir	liaa@aol.com; pennir 655-2271 0003223 ering with water samples is a crime pose that samples were collected accord Location In n n n n n n n n n n n n n n n n n n	Box 15 Inington Islaa@aol.com; pennir -655-2271 S0003223 S0003223 Solvering with water samples is a crime purpering with water samples is a crime purpering with water samples were collected according to in identified in fain Sample Types O (Distribution) Repeat Well Soral) Repeat Well Raw	Pennington Water Supply, Inc P O Box 15 Pennington dwallaa@aol.com; penningtor 936-655-2271 936-655-2271 Sam rint): **: WS0003223 **: WS0003223 **: WS0003223 **: Wso003223 **: Samples is a crime punishable nowledges that samples were collected according to the tring Plan **: Do for Well Sampled in litting Plan **: Do for Well Sampled in litting Plan **: Do for Well Sampled in litting Plan **: Samples is a crime punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples were collected according to the punishable nowledges that samples we	County: Trinity Inington Water Supply Box 15 Box 15 Iliaa@aol.com; pennir	County: Trinity County: Trinity Ington Water Supply Box 15 Ington Ilaa@aol.com; pennii County pennii Samples is a crime pres that samples were collected accord to catton person in identified in n in identified in n in Routine person in identified in n identified in n in Routine person in identified in n identi	de all zeros) TX de all zeros) County: Trinity County: Trinity Inington Water Supply Box 15 Nington Nington County: Trinity Ilaa@aol.com; pennir Cool323	Water System Identification & Sample Collection Information (Please type or use block print) In Water System ID: To digits; include all zeros) In Water System Name: Pennington Water Supply, Inc. County: Trinity Name: Pennington Water Supply, Inc. City: Pennington Water Supply, Inc. Email: dwallaa@aol.com; penningtonwatersupply@yahoo.com Email: dwallaa@aol.com; penningtonwatersupply@yahoo.com In Water Supple Signature: Sample Signature: Supple Signa
	Month Day	Month Day Day	Construction* Construction* Construction* Day Day	Check One Construction* Month Day Day	Sampler Signature: Construction Check One Construction Day Day Day Special Day Construction Day Day Day	Other Contact: Sample Signature: Sample Signature: Owner Sold Signature: Sometime of Signature: Sometime of Signature: Special* Construction* Date Day Day J. 3. 22	Other Conta Sampler Signatur Sampler Signatur Check One Construction Date Date	State: TX Ingtonwatersup Other Contact Sample Signatur Sample Signatur Check One Check One Check One Date Date	State: Ty Ingtonwatersup Other Conta Sample Signatur Construction* Construction* Date Date	State: Ty ingtonwatersup Other Conta Sample Signatur Sample Signatur Sample Signatur Check One Construction Date Date Date	State: Ty ingtonwatersup Other Conta Sample Signatur Sample Signatur Check One Construction Date Date Date	Routine (Oistribution) Repeat Raw Well	2 2 8 On Water Supply Ingtonwater sup Other Conta Sample Signatur Sam	2 2 8 2 2 8 2 1 8 2 2 8 2 2 8 3
	Year Please circle AM or PM	() Year	l/or federal law. (Texas Persited sample coffection procedured Time Please cir AM or P	and/or federal law. (Texas Pena tablished sample coffection proc Coffection proc Coffection proc Please circle as a page 2007 p.m. AM or PM 13 23 10:40	Jedentor Other Other Street Sample collection process of Please or AM or P	Time Please dirde Please dirde AM or PM AM AM AM AM AM AM AM AM AM	pply@yahoo.c act: 936-544- Tre: Postator Dothe Wor federal law. (Texas Pe Sited sample collection pr Collection pr AM or P Please dr AM or P Please dr AM or P	pply@yahoo.c act: 936-544-I Lee: Other Please cir S p p please cir AM or P AM or P Please cir AM or P	pply@yahoo.c tact: 936-544-1 tre: Other for federal law. (Texas Per law) for federal law) for feder	pply@yahoo.c tact: 936-544-1 ppdicator Oothe for dealer and or Please or AM or P para 10:46	pply@yahoo.c pply@yahoo.c tact: 936-544- ppedator Gollected Collected AM or P page 10:46	y, Inc. X Zip o pply@yahoo.o tact: 936-544-i ppdator Gollected Time Please of AM or P Please of AM or P	8 0 ly, Inc. ly, Inc. 2ip 0 pply@yahoo.o pacatt: 936-544- lyofederollaw. (Teas re Collected Collected AM or Please dr AM or P	pply@yahoo.c X
AM AM	Replacemen	Replacement	enal Code, Title 8, Chapt rocedures, and that all in bat and Orig PM Replacement Sam Replacement Replacement Raws AM PM Raws	emal Code, Title 8, Chapt rocedures, and that all in rocedures, and that all in Code, Title 8, Chapt rocedures, and that all in Code, Title 8, Chapt Sam Original Replacement Sam Replacement Replacem	etnal Code, Title 8, Chapt rocedures, and that all in rocedures, and that all in rocedures and that all in Samy Origi Replacement Sam Replacement Repl	er: tenal Code, Title 8, Chapt tenal Code, Titl	eer: tenal Code, Title 8, Chapper tenal Code	Zip Code: 7585675926 DO.COM 44-6739 AMA 7585675926 7585675926 AMA 7586675926 AMA 7586675926 AMA 7586675926 AMA 7586675926 AMA 7586675926 AMA 7586675926 AMA AMA AMA AMA AMA AMA AMA A	Code: 758567 Com Com Com Com Com Com Com Co	Code: 758567 Com En: 758567 Com Com Final Code, Title 8, Chapp Inocedures, and that all in the complete state of the complete s	Code: 758567 Com Com Com Com Com Com Com Co	Code: 758567 Com Com Com Com Com Com Com Co	Code: 758567 Code: 758567 Com	Code: 758567 Code: 758567 Com
	Repeat, or TT for Replacement, Total, & Triggered mg/L Raw Samples)		apter 37.10). By signing the linformation is accurate. Ill linformation is accurate. Chlorin page of riginating ample (All for Free Repeat, Page of Total, Triggered My Samples) W Samples) A Samples) A Samples A Samples	Report 37.1.0). By signing apter 37.1.0). By signing all information is accural mple ID & Chlor Date of Residing in a Circle signating Circle for Fr Repeat, or Trallagered Tiggered Ti	Labor Report Information is accurate miple ID & Chlor Resid riginating Circle sample (All for Fi Repeat, or The	Receipt #: Tested By Laboraton Report to Residual For Free Date of Residual For Free Date of Total, Triggered W Samples) Receipt #: Report to Report Total, Triggered W Samples) Receipt #: Report to Report Total, Triggered For Total, Triggere	Receil Report Report Report Report Report Report Report Report Resid riginating Repeat riginating Reseat Reseat riginating Reseat Reseat riginating Reseat	Corre Corre Receil Receil Repeat Il information is accurat mple ID & Chlor Date of Resid riginating Circle manple (All for Fr Repeat, Triggered M Samples) N Samples) Resmanning Repeat	Corre 575926 Obser Corre Corre Recei Recei Report Information is accurated information is accurated in February and accurate in February and	Thermor THERM- Correctic Correcte Correcte Correcte Correcte Correcte Laborato Report tr Laborato Report tr Correcte Correcte	Samples) Them Them Them Them Them Them Them The	Samples) Test Corre Recei Recei Corre Corre Corre Corre Corre Recei Recei Information is accurat mple 10 & Chlor Circle Circle Corre	9 Ph Test Sam Them THER Ther Ther Ther Ther Ther Ther Ther	9 Ph 9 F Test Sam Them THER Them THER TOSH Teste Corre Receil Information is accurate of Resid riginating lample (All for Fir Resid riginating lample (All for
1	P app				Qien YApr	resubmin	/: Incuba	Approval: Rejectio Rejectio Rejectio Gode F applicab please resubmit	Temp: Temp: Temp: Temp: Temp: Temp: Code Fresubmi applicab Presubmi Tesubmi	I Temp: I Temp: I Temp: Code Rejection	I Temp: Rejection Rejectio	on ice? On loe in Factor. On Fact	Lufkin, TX 75904 Phone: 936-632-7795 Fax: 936-632-2564 est results must meet set results must meet set results must meet SHA SHA SHA Ammple on ice? Re rected Temp: Celpt #: Refection Code Tr free Tr for pole to Client By: ling this ling this ling this ling this ling the selection Code Results must meet SHA SHA SHA SHA SHA Code Refection Rejection Code Rejection	2901 N. John Redditt Dr. Lufkin, TX 75904 Phone: 936-632-7795 Fax: 936-632-2564 Test results must meet a SHAC Sample on ice? Reli 1 Yes VO No hermometer ID: Recommender ID: Rejection Incubation Incubation Incubation Incubation ID: Rejection ID: R
	Absent Present					Lab Re Test Method Chlorine Check Absent Present	Received By (ANR) Ition in Date: Ition in Date: Ition in Time: Iti	Received By (ANR Received By (ANR Received By (ANR Item)) Item In Date: Ton In Time: D Lab Re Test Method Check Absent Present	Received By (ANR Present By (A	Received By (Courier Signature): Received By (ANRA Lab Signature): Received By (ANRA Lab Signature): Received By (ANRA Lab Signature): Lab Results Test Method: SM 9223B Chlorine Coliform Check Coliform Present Absent Present L	Relinquished By (Sour Received By (Cour Received By (ANR) Received	Relinquished By (Sour Received By (Cour Received By (ANR) Received By (Time: Test Method Check ADED AREA FI Relinquished By (Sour Relinquished By (Cour Relinquished By (Cou	ANGEU Relinquished By (Cour Received By (Cour	BS Environ Angeum By Environ ADED AREA FO Relinquished By (Count Received By (Count In Time: Chlorine Check Test Method:
	Absent Present	Coliform Absent Present	:: SM 9223B Total Coliform Absent Present	sults: SM 9223B Total Coliform Absent Prese	23/3033 bate: je 14 bate: suits :SM 92238 Total Coliform Absent Present A	Date: 6 141 Date:	A Lab Signature	Relinquished By (Courier Signature): Received By (ANRA Lab Signature): Received By (Courier Signature): (A Lab Signature): (A) (B) (B) (C) (C) (C) (C) (C) (C	Courier Signature): A Lab Signature (Lab Lab Lab Lab Lab Lab Lab Lab Lab Lab	Received By (Courier Signature): Received By (Courier Signature): Received By (ANRA Lab Signature): Received By (ANRA Lab Signature): Date: 1/3/3/0/3/3 Incation in Time: 1/3/3/0/3/3 Incation in Time: 1/4/3 Incation in	SHADED AREA FOR LABORATORY USE ONLY Relinquished By (Sampler Signature): Date: Received By (Courier Signature): Date: Received By (Courier Signature): Date: Received By (ANRA Lab Signature): Date: Received	ANGEUNA & NECHES RIVER AUTHORITY Environmental Laboratory eitation/certification requirements REA FOR LABORATORY USE Ed By (Sampler Signature): Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature : Date: Courier Signature	INA & NECHES RIVER IFONTMENTAL Lab IN/Certification rec INFOR LABORATE Sampler Signature): Courier Signature): VA Lab Signature):
	Absent Present Lat	Present Coll	Present of	hesem of the second	Present Coll	lincubation Qu. Incubation Qu. Incub	Date: G- 3 Incubation Outlineus attion Outlineus attion Outlineus attion Outlineus attion Outlineus attion Outlineus attion Outlineus attions outlineu	Date:	Date: Date:	Date:	Date: Da	e): Date: Date: Date:	ER AUTHORITY Iboratory Equirements unler For USE ONL re): Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Date: Dat	TER AUTHORITY aboratory equirements unler TORY USE ONL re): Date:
-	Laboratory Sample Numbers	Work Order #: 30944 Laboratory Sample ID Numbers	Work Order # 30944 Laboratory Samp	Work Order # 3 0944 Laboratory Samp Numbers	Work Order: Work Order: Laboratory Sami	Laboratory Samp	Time: 16 18 130 130 130 130 130 130 130 130 130 130	Time 1023 130 130 130 130 130 130 13	Time: 1033 /30S ut Date: 6/H/203 ut Time: 16/8 Time: 16/8 Time: 16/8 Numbers	2 5 T 3 6 7	Time: 1033 7.0 S Time: 1033 730S 730S 74 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 7504 75	It Date: 6 14 120 there work Order # 3 0 9 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4 4	TCEQ Laboratory ID: TX48101 ID: TX48101 Inless stated otherwise. NLY Time: 1:05 Time: 1:05 Time: Vork Order #: Work Order #: Work Order #: Work Order #: Work Order #:	TCEQ Laborate ID: TX48101 Inless stated otherwis NLY Time: -23 1:0 Time: 1:0 T