

	Routine Location Address	Justification	5 Connections Upstream For repeat locations Numbers 2 – 5 are optional	5 Connections Downstream For repeat locations Numbers 2 – 5 are optional
1	Routine Location 1 (Base): <u>Men's Restroom</u>	Center of distribution system. This site has taps upstream & downstream.	1 Kitchen Sink #1 2 Kitchen Sink #4 3 4 5	1 Bar Sink #1 2 Bar Sink #3 3 4 5
2	Routine Location 2: # <u>2 Kitchen Sink</u>	This is an accessible location. This is a frequently used location.	1 Kitchen Sink #4 2 3 4 5	1 Men's Restroom 2 Bar Sink #1 3 4 5
3	Routine Location 3: # <u>2 Bar Sink</u>	This is an accessible location. This is a frequently used location.	1 Men's Restroom 2 Kitchen Sink #1 3 Kitchen Sink #3 4 5	1 Bar Sink #3 2 3 4 5
4	Routine Location 4: <u></u>		1 2 3 4 5	1 2 3 4 5
5	Routine Location 5: <u></u>		1 2 3 4 5	1 2 3 4 5
6	Routine Location 6: <u></u>		1 2 3 4 5	1 2 3 4 5
7	Routine Location 7: <u></u>		1 2 3 4 5	1 2 3 4 5

Table 1 – Sampling Locations

Instructions: The locations for all routine samples taken for compliance purposes must be identified in this table. 1) List up to 7 routine monitoring locations. These are the locations where the required routine compliance samples (monthly or quarterly) are collected. If possible, list the 911 addresses for each location. If those addresses are not available, list where the samples are taken. 2) Explain why the system chooses to sample at each location under the "Justification" column. 3) List at least 1 and up to 5 repeat samples within 5 connections upstream and 5 connections downstream for each Routine sampling location listed.

Table 2 – Quarterly Monitoring

To be completed only by **year-round NTNC and TNC systems using groundwater**. Systems must alternate between the Routine 1 (Base) location and at least one other Routine location as identified on the previous page, depending on system complexity. Identify in what quarter each Routine sample location will be sampled.

Quarter	Routine Sampling Location
1 st : January 1 through March 31	Men's Restroom
2 nd : April 1 through June 30	#2 Kitchen Sink
3 rd : July 1 through September 30	Men's Restroom
4 th : October 1 through December 31	#2 Bar Sink

Table 3 – Monthly Monitoring

To be completed by any **public water system serving 1,000 people or less**. Systems must alternate between the Routine 1 (Base) location and at least one other Routine location as identified on the previous page, depending on system complexity. Identify in what month each Routine sample location will be sampled.

Month	Routine Sampling Location
January	Men's Restroom
February	#2 Kitchen Sink
March	Men's Restroom
April	#2 Bar Sink
May	Men's Restroom
June	#2 Kitchen Sink
July	Men's Restroom
August	#2 Bar Sink
September	Men's Restroom
October	#2 Kitchen Sink
November	Men's Restrooms
December	#2 Bar Sink

Table 4 – Source Information

Provide the names/numbers of groundwater sources (wells, springs, etc.) and the source sample tap location where each source may be sampled **prior to any treatment**. If a raw water sampling tap is not available prior to the first user, identify the first tap/faucet closest to where the water enters the system.

Attach additional sheets if necessary

Source Name/Number	Source Sample Tap Location	Is this a combined source sample location?
Source 1:	Source Sample Tap in basement	No
Source 2 (if applicable):		
Source 3 (if applicable):		
Source 4 (if applicable):		

Checklist Prior to Form Submission:

A map, including the following information:

- o Water system name and identification (WSID) number,
- o Clearly labeled coliform sampling locations that are included in this plan,
- o Clearly labeled groundwater source sample tap locations for systems that utilize groundwater in any portion of the system,
- o Locations served by the system,
- o Directional flow of the system and
- o All major water system infrastructure such as:
 - o Sources,
 - o Treatment facilities,
 - o Storage tanks,
 - o Pump stations,
 - o Pressure zones, and
 - o Major distribution lines.

All required tables are complete, including:

- o Complete basic system information on page 1,
- o Justification for each routine sampling location,
- o At least 1 repeat location within 5 connections upstream and 5 connections downstream of each routine location,
- o Monthly and/or quarterly locations identified as required in Tables 2 and 3,
- o All ground water sources and source sample tap locations identified in Table 4.

Make and retain a copy of this plan for Water System records.

Signature of System Owner or Administrative Contact

I have read the Coliform Sampling Plan Guidance document and certify that the above information is true and accurate to the best of my knowledge.

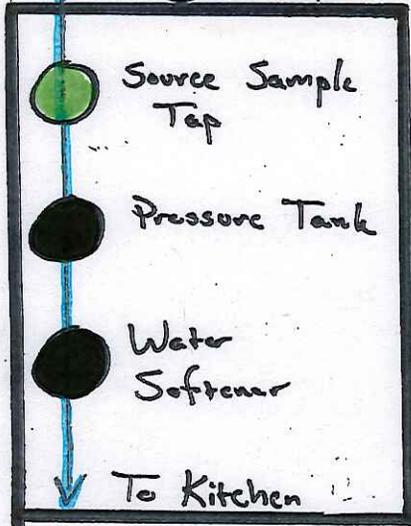
Signature: <i>Sign Here</i>	Date: <i>9/25/15</i>
Printed Name: <i>Firstname Lastname</i>	Title: <i>Owner/Operator</i>

Return this form to:

TNC Systems	Community and NTNC Systems
Jeff Girard Drinking Water and Groundwater Protection Division 1 National Life Drive, 2 Main Montpelier, VT 05620-3521 Phone: 802-585-0314 Fax: 802-828-1541	David Love Drinking Water and Groundwater Protection Division 1 National Life Drive, 2 Main Montpelier, VT 05620-3521 Phone: 802-585-4902 Fax: 802-828-1541

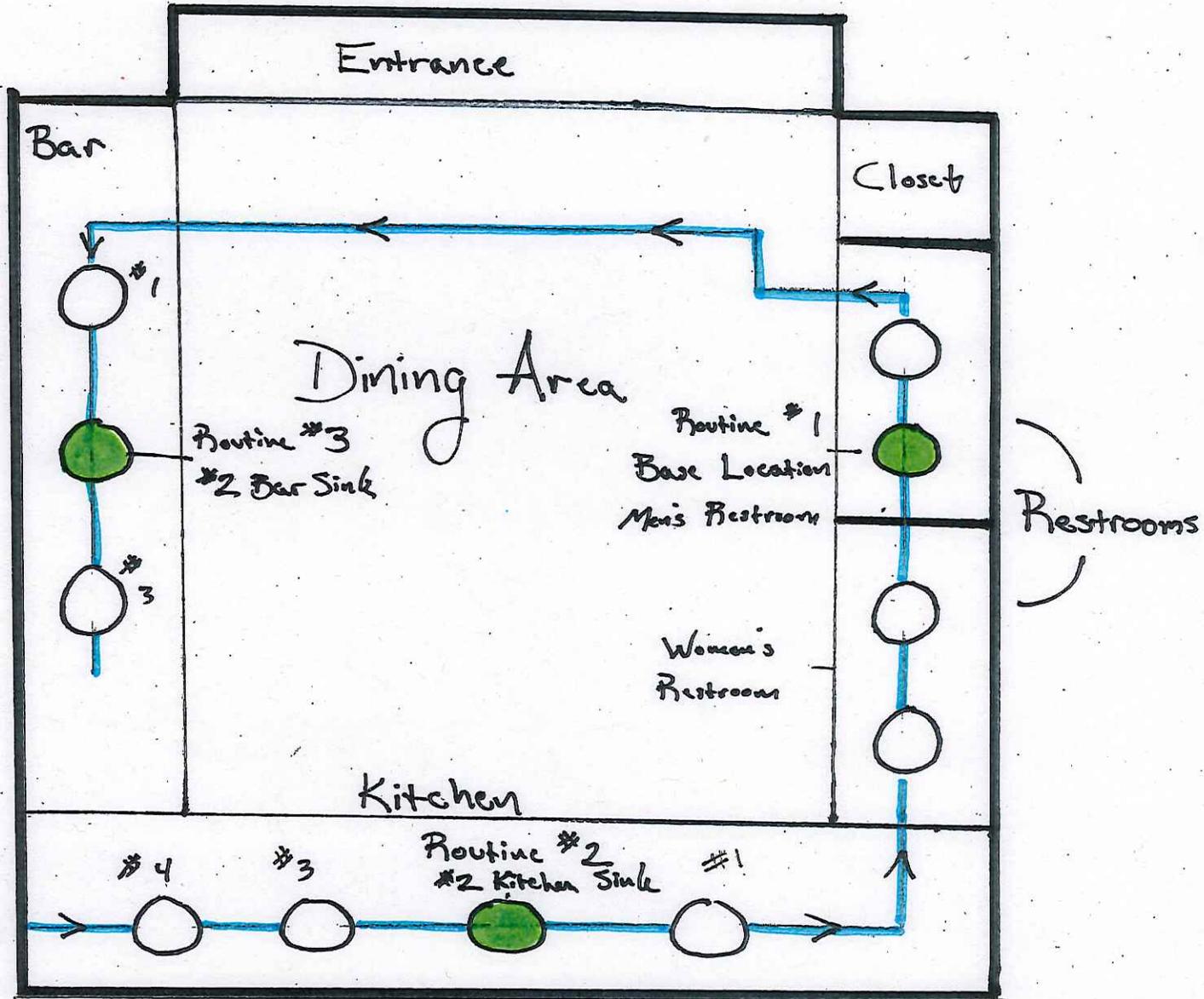
Well 1

Water Enters Basement



Sample System

WSID# 12345



Water in from basement