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County Executive**



County of Sacramento

**Chevon Kothari
Deputy County Executive
Social Services Agency**

**Environmental Management
Department
Jennea Monasterio, Director**

January 2009

Small Water System Owner/Operators

SUBJECT: SAMPLE SITING PLAN

A Sample Siting Plan for the collection of routine Total coliform (bacteriological) analysis is required by Title 22 California Code of Regulations (22 CCR) Section 64422. The Sample Siting Plan is to be developed by each water supplier and submitted to Sacramento County Environmental Management (EMD) for approval. The Sample Siting Plan identifies the location of each routine sample location and re-sample locations.

The routine sample location shall be taken from the distribution system. If the system has different water sources, storage tanks, and varying pressure zones additional routine sample sites will be required. The sample sites should be chosen to represent the distribution system and clean of debris and vegetation. Sample sites to avoid are restrooms and swivel faucets.

If any routine sample is positive for total coliform, the water supplier shall collect four (4) repeat samples within 24 hours of being notified. The location of the repeat samples should be one from the original location, one from the well, one from immediately after the tank and one down stream from the original location (preferably 5 connections away if possible).

Attached is a blank Sample Siting Plan for you convenience and an example of a completed Sample Siting Plan. The minimum requirements of the Sample Plan are as follows:

1. Name of Water System
2. Number of People using the system
3. Number of service connections
4. Name of trained person collecting the samples
5. Number, frequency, and location of routine sample sites
6. Number and location of the re-sample sites
7. Water Source, treatment, storage and distribution system description
8. Name of laboratory being used.

If you have any questions please feel free to contact EMD- Water Protection Division at (916)875-8400.

Sampling Site Plan

Name of Water System: _____

Contact Person: _____
Phone Number: _____
Date: _____

Number of people using system: _____ Number of Service connections: _____
Number, location and frequency of routine sampling: _____
Treatment, storage, and distribution system _____
Number and location of re-samples _____
Name of person trained in sampling _____ Water Source(s): _____
Name of laboratory: _____

Sampling Site Plan

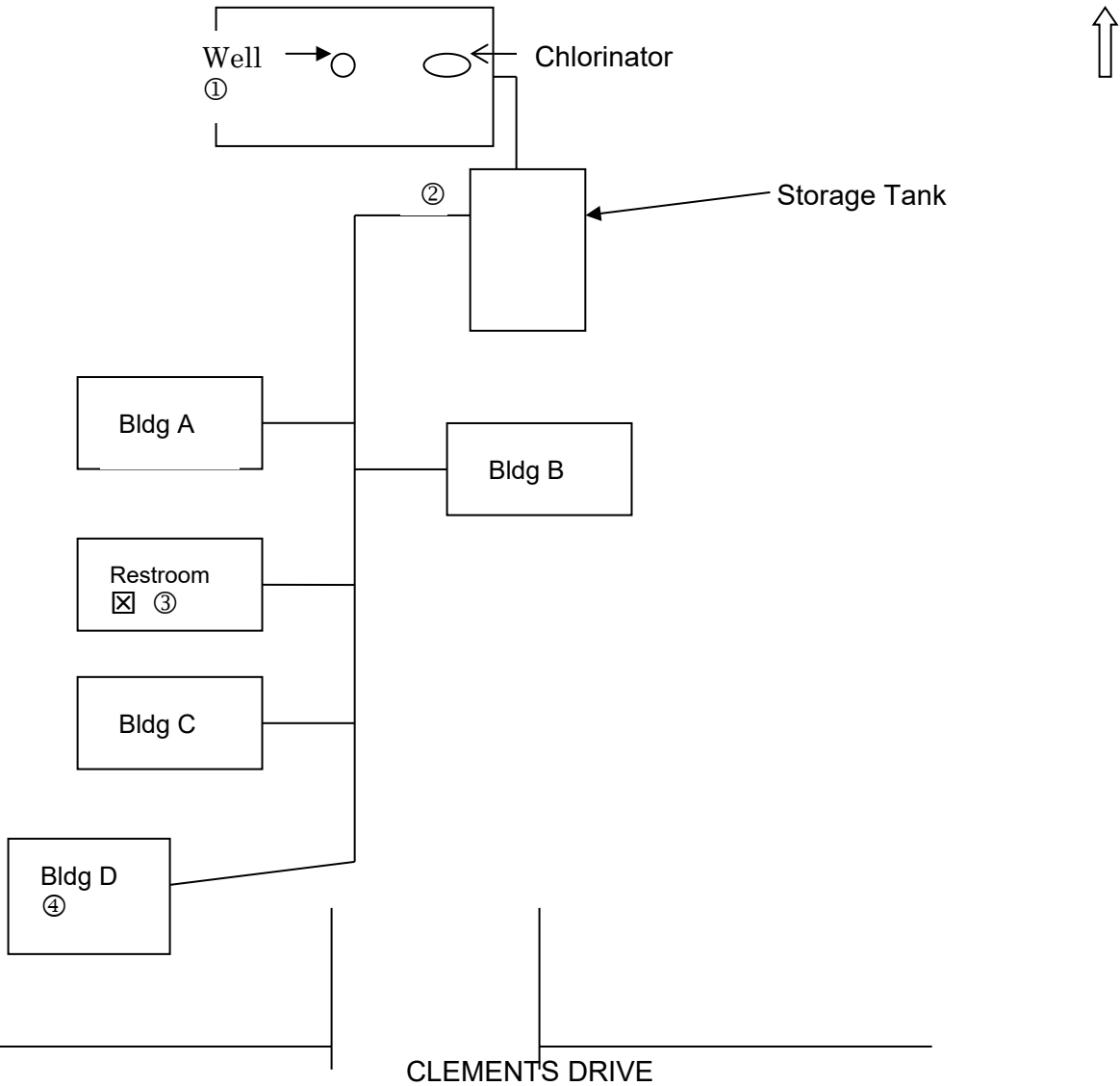
Name of Water System:

Ming Water System

Contact Person: Joe Smith

Phone Number: (916) 487-2240

Date: 6/01/06



Number of people using system: _____
 Number, location and frequency of routine sampling: _____
 Treatment, storage, and distribution system _____
 Number and location of re-samples _____
 Name of person trained in sampling _____
 Name of laboratory: Omega

85 Number of Service connections: 5
One sample per month at Restroom (☒)
Chlorinated, 10,000 gal storage tank
4 – Well, storage tank, Restroom, Bldg D (①)
Ms. Sample Ing Water Source(s): One well