Water Sample Collection Record (WCR1)

1. Date, Time & Bottle Id:

Collection Date: & Time:

Lab Receive Date:
Lab Receive Time:
Bottle Temp:
Received By:
For Laboratory Use Only

2. Place of Sampling: (Door No, Locality, Area Name etc. of the place):

CAN:

3. GPS Coordinates: Lat _____; Long: _____ OR WhatsApp Current Location To: 9848011251 [If feasible]
4. About sample collection bottle:

5. Describe, in your own words, the Source from where collected:

[Please note that your detailed description helps us to interpret results. Mention about the original source, namely; municipal (metro) water, groundwater, mixed ground & municipal water, surface (tank, lake, reservoir, rivulet, river, nala) water, etc. Trace water path from source to sampling point. Mention about storages in water path, such as sump, ground or overhead tanks. Describe the sampling point and its surroundings. Give as much relevant information as you can. When multiple samples are sent to the laboratory, descriptive identification of the source of each sample, helps in traceability and interpretation of results. In case of borewells, mention age, depth, diameter, pumping arrangement.]

Continue on the backside or use additional sheet, if required.

6. Was any photo/video of source & sampling was taken? ____No, ____Yes. If yes, please email to ihslab@ihs.org.in or WhatsApp to: 9848011251.
7. Sample Collector Name, Signature and Mobile:

Name *Signature* *Contact Telephone (mobile)*

8. In case the sample is from a Public Water Source, please mention name, contact telephone number of witness if any was present at the time of taking the sample, and obtain his/her signature if feasible:

Witness Name *Signature* *Contact Telephone*