



# Routine Coliform Monitoring Requirements for All System Types\*

Department of Human Services  
 Public Health Division  
 Office of Environmental Public Health  
 Drinking Water Program  
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[www.oregon.gov/DHS/ph/dwp](http://www.oregon.gov/DHS/ph/dwp)

Community Water Systems	Source of Water	
	Ground Water (well or spring)	Surface Water (stream, lake, etc)
	Monthly Sampling <sup>1</sup>	Monthly Sampling <sup>1</sup>
Non-Transient Non-Community & Transient Non-Community Water Systems	Average Daily Population Served	
	≤1000 Quarterly Sampling <sup>2</sup>	> 1000 Monthly Sampling <sup>1</sup>
State Regulated (Non-EPA) Water Systems	Quarterly Sampling <sup>2</sup>	Monthly Sampling <sup>1</sup>

\*This table describes routine monitoring only. Detections, source changes, and/or violations will affect the sampling requirements. You will find details on number, location and timing of samples in the Rules (see web page @ [www.oregon.gov/DHS/ph/dwp](http://www.oregon.gov/DHS/ph/dwp)). Send all sample results to: Department of Human Services, Drinking Water Program, PO Box 14350, Portland, OR 97293-0350.

- <sup>1</sup> **Monthly Coliform Bacteria Sampling:** Number of routine samples is dependent on population. See table on back of page for details. Results must be received by the 10<sup>th</sup> day of the following month.
- <sup>2</sup> **Quarterly Coliform Bacteria Sampling:** See table below. Sample early in quarter to avoid problems with mail, lost samples, weather and other difficulties. Results must be received by the 10<sup>th</sup> day of the month following the end of the quarter.

Quarterly Coliform Bacteria Sampling	
Quarter	Collect Sample Between
1 <sup>st</sup> Quarter	January 1 and March 31
2 <sup>nd</sup> Quarter	April 1 and June 30
3 <sup>rd</sup> Quarter	July 1 and September 30
4 <sup>th</sup> Quarter	October 1 and December 31

This monitoring sheet supersedes previous editions. Revised December, 2008

**IF YOU WOULD LIKE THIS IN AN ALTERNATE FORMAT, PLEASE CALL (971) 673-0427.**

Monthly Coliform Bacteria Sampling	
Population	Number of Samples Required
Up to 1,000	1
1,001 to 2,500	2
2,501 to 3,300	3
3,301 to 4,100	4
4,101 to 4,900	5
4,901 to 5,800	6
5,801 to 6,700	7
6,701 to 7,600	8
7,601 to 8,500	9
8,501 to 12,900	10
12,901 to 17,200	15
17,201 to 21,500	20
21,501 to 25,000	25
25,001 to 33,000	30
33,001 to 41,000	40
41,001 to 50,000	50
50,001 to 59,000	60
59,001 to 70,000	70
70,001 to 83,000	80
83,001 to 96,000	90
96,001 to 130,000	100
130,001 to 220,000	120
220,001 to 320,000	150
320,001 to 450,000	180
450,001 to 600,000	210
600,001 to 780,000	240