SURFACE WATER SAMPLING FORM

Site Name	**Permit No.**
Surface Monitoring Point No.	**Date/Time**
Name of person sampling	

A. TYPE OF MONITORING POINT	
☐ **Stream**	☐ **Open Tile**
☐ **Road Ditch**	☐ **Tile with Riser**
☐ **Drainage Ditch**	☐ **Other (describe)**

B. PURPOSE OF MONITORING POINT	
☐ **Upstream**	☐ **Downstream**
☐ **Within Landfill**	☐ **Other (describe)**

C. MONITORING POINT CONDITIONS		
General description/condition of monitoring point		
Was monitoring point dry?	**Too little water to sample?**	
Was water flowing?	☐ **YES**	☐ **NO**
If yes, estimate quantity	**If yes, estimate depth**	
Was water discolored?	☐ **YES**	☐ **NO**
If yes, describe		
Does water have odor?	☐ **YES**	☐ **NO**
If yes, describe		
Was ground discolored?	☐ **YES**	☐ **NO**
If yes, describe		
Litter present?	☐ **YES**	☐ **NO**
If yes, describe		

Please mail completed form to: Iowa Department of Natural Resources, Land Quality Bureau, 502 E. 9th St, Des Moines, IA 50319.
Questions? Call or Email: Nina Koger Environmental Engineer Sr., 515-725-8309, nina.koger@dnr.iowa.gov

D. FIELD MEASUREMENT	
Weather Conditions	
Field Measurements (after stabilization):	
Temperature	**Units**
Equipment Used	
D. FIELD MEASUREMENT (continued)	
pH	
Equipment Used	
Specific Conditions	**Units**
Equipment Used	

Comments

CERTIFICATION

I certify under penalty of law I believe the information reported above is true, accurate and complete.

Signature		**Date**
Telephone	**Fax**	**Email**

NOTE: Attach 8 ½" x 11" site plan showing locations of all surface and groundwater monitoring points. One map per sampling round.

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