



## Physical & Chemical Tests Record Sheet

(To be completed monthly)

Site Name: <b>FISHING PLATFORM</b>		Site Code: <b>FP</b>
Name of Monitoring Group: <b>WYE RIVER WATERWATCH GROUP</b>		
Person(s) Conducting the test: <b>ANNE CORACK GAILT MARK CHITTLEBOROUGH, YVONNE SHEPPARD HELEN MORTY</b>		
Date of test: <b>3/2/19</b>	Time of test: _____ am/pm	
Site Risk Assessment Completed: <input checked="" type="checkbox"/> signature please: <i>[Signature]</i>		
Site risk and management assessment at rear of book. Please note circumstantial hazards and additional risks in the box below		
Test	Result (units)	Calculations, dilutions and comments
Dissolved Oxygen	<b>4.6</b> mg/L	<b>59</b> % sat.
Water Temperature	<b>27</b> °C	<b>TAKEN TWICE. SUN ON STILL WATER.</b>
Air Temperature	<b>26</b> °C	
pH	Meter calibrated to <input checked="" type="checkbox"/> pH 7 & <input type="checkbox"/> pH 10	<b>7.6</b> pH units
Electrical Conductivity (Salinity)	Meter calibrated to <input checked="" type="checkbox"/> 1413, <input type="checkbox"/> 2,000 or <input checked="" type="checkbox"/> 12,880EC	EC units $\mu$ S/cm. <b>BATTERIES LOW 16-23 ms/cm</b>
Reactive Phosphorus	<b>0.03</b> mg/L P	
Turbidity	<b>N.T.U./F.T.U.</b>	<del>#90</del> <b>2.10</b>
<b>Weather conditions at the time of sampling:</b>		
<input checked="" type="checkbox"/> sunny <input type="checkbox"/> cloudy <input type="checkbox"/> overcast <input type="checkbox"/> raining <input type="checkbox"/> windy		
<b>Rainfall:</b>		
Last rainfall: <input checked="" type="checkbox"/> More than week ago <input type="checkbox"/> During the last week <input type="checkbox"/> During the last 24 hours <input type="checkbox"/> Raining now		
Amount of rain (mm) _____		
<b>Water flow</b>		<b>Water appearance</b>
Flow indicator (if available) _____ ML/day		
<b>Estimate of flow</b> <input type="checkbox"/> Not flowing (still) <input type="checkbox"/> Not flowing (pool) <input type="checkbox"/> Medium (average) <input type="checkbox"/> Flood (over bank)		<input checked="" type="checkbox"/> Clear <input type="checkbox"/> Muddy <input type="checkbox"/> Scummy <input checked="" type="checkbox"/> Other (description) <b>SLUDGE AT BOTTOM</b>
<input checked="" type="checkbox"/> Low (minimum) <input type="checkbox"/> High (but below bankfull) <input type="checkbox"/> Permanent (lakes & wetlands)		<input type="checkbox"/> Milky <input type="checkbox"/> Smelly <input type="checkbox"/> Oily <input type="checkbox"/> Foamy /frothy <input type="checkbox"/> Stained green <input type="checkbox"/> Stained brown
<b>Stream depth</b>		
Depth indicator _____ m <input type="checkbox"/> 0 - 50 cm deep <input type="checkbox"/> 51cm-1m deep <input checked="" type="checkbox"/> 1 to 2 m deep <input type="checkbox"/> Unknown depth		
<b>Stream width</b>		
Average width of stream: _____ m <input type="checkbox"/> < 2 m wide <input type="checkbox"/> 2 to 5 m wide <input checked="" type="checkbox"/> >5 m wide		
<b>Drain present at site:</b> <input checked="" type="checkbox"/> no <input type="checkbox"/> yes            Water flowing from drain: <input type="checkbox"/> yes            Color _____            Odour _____		
<b>Litter pollutants: (Tick type found)</b>		
<input checked="" type="checkbox"/> paper <input type="checkbox"/> bottles <input checked="" type="checkbox"/> plastic <input type="checkbox"/> clothing <input type="checkbox"/> car bodies <input type="checkbox"/> packets <input type="checkbox"/> cans <input type="checkbox"/> polystyrene <input type="checkbox"/> oil <input type="checkbox"/> petrol/diesel <input type="checkbox"/> waxed cardboard <input type="checkbox"/> other		
<b>Circumstantial hazards and additional risks</b>		<b>Waterwatch Data Management System: Data entry</b>
Hazard: <b>BOARDWALK VEGETATION</b> Risk: <b>LOW</b>		Person entering site visit information
Risk Control Measures: <b>CARE</b>		Date of entry _____
		Site visit approved by Coordinator (initial and date)