

FIELD INSTRUMENT CALIBRATION RECORDS - EXAMPLE CALIBRATION LOG - PRP

Project Site/FacID: _____

Calibrated by (Print)/Affiliation: _____

Boldly "X" this box if there is qualified data on this page.

Temperature (Quarterly)

Date of Last Temp Verification: _____

See log book: _____

DISSOLVED OXYGEN (DO) (REFERENCE: DEP SOP FT 1500)

Acceptance Criteria +/-0.3 mg DO/L

Meter/Instrument Name and Unique ID: _____

Initials	Date	Time	Standard (DO %)	Temp °C	Saturation mg/L (100%)	Response DO (%)	Deviation mg DO/L	Deviation mg DO/L	Pass or Fail
CAL ICV CCV	_____	_____	<u>100%</u>	_____	_____	_____	_____	_____	P F
CAL ICV CCV	_____	_____	<u>100%</u>	_____	_____	_____	_____	_____	P F
CAL ICV CCV	_____	_____	<u>100%</u>	_____	_____	_____	_____	_____	P F
CAL ICV CCV	_____	_____	<u>100%</u>	_____	_____	_____	_____	_____	P F
CAL ICV CCV	_____	_____	<u>100%</u>	_____	_____	_____	_____	_____	P F
CAL ICV CCV	_____	_____	<u>100%</u>	_____	_____	_____	_____	_____	P F

See Table FT 1500-1 and/or Table FS 2200-2 for Dissolved Oxygen Saturation corresponding to Temperature.

SPECIFIC CONDUCTANCE (REFERENCE: DEP SOP FT 1200)

Acceptance Criteria +/-5% the standard

Meter/Instrument Name and Unique ID: _____

Initials	Date	Time	Standard (µmho/cm)	Exp. Date	Lot #	Response	Deviation (%)	Pass or Fail
CAL ICV CCV	_____	_____	_____	_____	_____	_____	_____	P F
CAL ICV CCV	_____	_____	_____	_____	_____	_____	_____	P F
CAL ICV CCV	_____	_____	_____	_____	_____	_____	_____	P F
CAL ICV CCV	_____	_____	_____	_____	_____	_____	_____	P F
CAL ICV CCV	_____	_____	_____	_____	_____	_____	_____	P F
CAL ICV CCV	_____	_____	_____	_____	_____	_____	_____	P F
CAL ICV CCV	_____	_____	_____	_____	_____	_____	_____	P F
CAL ICV CCV	_____	_____	_____	_____	_____	_____	_____	P F
CAL ICV CCV	_____	_____	_____	_____	_____	_____	_____	P F

OXIDATION-REDUCTION POTENTIAL (ORP)

Acceptance Criteria +/-10 mV

REFERENCE: EPA Region 4, Operating Procedure, Field Measurement of Oxidation-Reduction Potential (ORP)

Meter/Instrument Name and Unique ID: _____

Initials	Date	Time	Standard (mV)	Exp. Date	Lot #	Response (mV)	Response (mV)	Pass or Fail
CAL ICV CCV	_____	_____	_____	_____	_____	_____	_____	P F
CAL ICV CCV	_____	_____	_____	_____	_____	_____	_____	P F
CAL ICV CCV	_____	_____	_____	_____	_____	_____	_____	P F
CAL ICV CCV	_____	_____	_____	_____	_____	_____	_____	P F
CAL ICV CCV	_____	_____	_____	_____	_____	_____	_____	P F
CAL ICV CCV	_____	_____	_____	_____	_____	_____	_____	P F

Perform ICVs and CCVs only in "READ/RUN" mode.

CAL - Calibration; ICV - Initial Calibration Verification; and, CCV - Continuing Calibration Verification.

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TURBIDITY (REFERENCE: DEP SOP FT 1600)

Meter/Instrument Name and Unique ID: _____

			Std=0.1-10 NTU +/-10%	Std=11-40 NTU +/-8%	Std=41-100 NTU +/-6.5%	Std>100 NTU +/-5%					
			Initials	Date	Time	Standard (NTU)	Exp. Date	Lot #	Response (NTU)	Deviation (%)	Pass or Fail
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F

pH (REFERENCE: DEP SOP FT 1100)

Acceptance Criteria +/-0.2 SU

Meter/Instrument Name and Unique ID: _____

			Initials	Date	Time	Standard (SU)	Exp. Date	Lot #	Response (SU)	Deviation (SU)	Pass or Fail
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F
CAL	ICV	CCV	_____	_____	_____	_____	_____	_____	_____	_____	P F

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ORGANIC VAPOR ANALYZER (OVA)

Acceptance Criteria +/-5% the standard

REFERENCE: *Portable Instruments User's Manual For Monitoring VOC Sources* , EPA-340/1-86-015, June 1986

Meter/Instrument Name and Unique ID:

[illegible]

Notes (e.g. corrective actions, etc):

Perform only in Calibrate Mode:

CAL - Calibrate

Perform only in Read/Run Mode:

ICV - Initial Calibration Verification

Perform only in Read/Run Mode:

CCV - Continuing Calibration Verification