MT-eWQX Call For Data Submittal Form

DEQ Montana Department of Environmental Quality

303d/305b Call For Water Quality Data
Complete this form and submit along with your EDDs. Fields with an **asterisk (*)** are required.

1520 East Sixth Avenue
Helena, Montana 59620-0901
Phone: 406-247-4436
www.deq.mt.gov

Date*: _____

Data Provider Information*

Group/Org Name: _____

Contact Name: _____

Contact Title: _____

Address: _____

City: _____ **State:** _____ **ZIP:** _____

Contact E-mail: _____

Contact Phone: _____

Additional Comments:

EDD .zip File Name (to be submitted via FTS)*: _____

Type of Data Submitted*

☐ Project

☐ Stations

Field: ☐ Field Measurements (pH, DO, etc.) ☐ Habitat Assessments ☐ Other

Chemistry: ☐ Water Chemistry Results ☐ Sediment Chemistry Results ☐ Chlorophyll Results ☐ Other

Biological: ☐ Macroinvertebrate Results ☐ Periphyton Results ☐ Index and Metric Results ☐ Other

Attached Documents (BLOBs): ☐ Project (QAPP/SAP) ☐ Stations (maps) ☐ Activities (habitat forms) ☐ Results (data loggers)

Data Provider EDD Review Checklist*: This checklist must be completed before EDDs will be accepted by DEQ.

☐ Data passes QC requirements identified in Section 4.1 of the MT-eWQX Guidance Manual-Call For Data.

☐ EDDs imported into standalone EDP error-free.

☐ Project documents submitted to WQ Data Manager, including project QAPP or SAP and QC checklist.

☐ I certify that the information on this form and EDD are true and correct. Signature (type name): _____

Internal Use Only

Date Received by DEQ: _____

☐ Submittal Form complete

☐ EDD(s) imported into EDP error-free

☐ EDD(s) loaded into EQuIS database successfully
  EQuIS eBatch #(s): _____

☐ Data passes QC requirements identified in Section 4.1 of the MT-eWQX Guidance Manual-Call For Data

☐ Data <u>accepted</u> by WQ Data Manager and marked as Final in EQuIS   Signature (type name): _____

Comments:

Rev # 1.1