

Figure: 30 TAC §285.91(4)

Table IV. Required Testing and Reporting.

Type and Size of Treatment Unit	Testing Frequency	Required Tests	Minimum Acceptable Test Results
Any Treatment Method in Conjunction with Surface Application	At least once every four months	One BOD ₅ and TSS Grab Sample Per Year (non-single family residences only) Total Chlorine Residual or Fecal Coliform at Each Required Test	BOD ₅ and TSS Grab Samples Not To Exceed 65 mg/l 0.1 mg/l Residual in Pump Tank or Fecal Coliform Not To Exceed 200 MPN/100 ml (CFU/100 ml)
Any Secondary Treatment System	At least once every four months	None	None
Non Standard	Permit Specific	Permit Specific	Permit Specific