N.C. Department of Environmental, Health, and Natural Resources Division of Laboratory Services State Laborabory of Public Health P.O.Box 28047 - 306 N. Wilmington Street Raleigh, NC 27611-8047

DO NOT WRITE IN THIS SPACE

## **BACTERIOLOGICAL ANALYSIS - PUBLIC WATER SYSTEM**

Laboratory ID #:	<u>37501</u>	County:	Wake		
Water System ID #:	03-92-373				
Name of System:	Bayleaf				
Sample Type:	<b>5</b> (1 = Routine; 2	2 = Repeat; 3 = Re	placement; 4 = Pla	n Approval; 5 = Other)	
Collected on: DATE:	01/14/10	TIME: 10:50	AM		
Location Type:	4 (1 = Entry Tap	; 2 = General Tap	; 3 = End Tap; 4 = \$	Source/Intakes; 5 = Other)	
Location Code:	MR1	Collected By:	Mitchell B	owyer	
FOR REPEAT SAMPLE:			FOR REPLACE	EMENT SAMPLE:	
Previous Positive Loc	Original Sample Type:				
	Original Sample Type:  (1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)				
Positive Collection Da	Original Collection Date:				
Tim					
Proximity: (1 = Same; 2 = Upstrear	m: 3 = Downstream)			Time:	
(1 Came, 2 Openical	n, o Bowneadam)				
Mail Results To:			Type of Supply:		
			71	X Community	NTNC
RALEIGH REGIONA	AL OFFICE PWSS	;		Non-Community	Private
1628 MAIL SERVIC	E CENTER				] i iivaic
RALEIGH, NC 2769	9-1628		Type of Treatm	ent: Chlorinated	
Talambana Na - 6	240 704 4000			X Non-Chlorinated	
Telephone No.	919-791-4200			Free Chlorine Residu	
				Total Chlorine Residu	ıal:
	RESULTS			INVALID CODES	
CONTAMINANT METH	OD PRESENT	ABSENT IN	VALID	1) Confluent Growth/No Co	liform Found
Total Coliform 318	3 🗆	X		2) TNTC/No Coliform Foun	
Fecal/E. Coli				<ul><li>3) Turbid Culture/No Colifo</li><li>4) Over 30 Hours Old</li></ul>	rm Found
Heterotrophic P.C.		/ml		5) Improper Sample or Ana	alysis
	(number)				
Repeat Samples Required				Replacement Samples Required	
Date Analysis Begun: 01/14/10				Time Analysis Begun:	15:44 PM
Date Analysis Completed: 01/15/10				Time Analysis Completed:	15:45 PM
Laboratory Log #:	12919			Certified By: Susan	Beasley
COMMENTS: Colisure	e			Tus	Basley