N.C. Department of Environmental, Health, and Natural Resources Division of Laboratory Services State Laborabory of Public Health P.O.Box 28047 - 4312 District Drive Raleigh, NC 27611-8047 919-733-7308

DO NOT WRITE IN THIS SPACE

BACTERIOLOGICAL ANALYSIS - PUBLIC WATER SYSTEM

Laboratory ID #:	<u>37501</u>	County:	RANDOLPH			
Water System ID #:	02-76-528	_				
Name of System:	OLD UMC					
Sample Type:	5 (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)					
Collected on: DATE:	01/25/16 TIME: 11:30 AM					
Location where collected:	KITCHEN SINK					
Location Type:	(1 = Entry Tap; 2 = General Tap; 3 = End Tap; 4 = Source/Intakes; 5 = Other)					
Location Code:	E01	Collected By	: Blair Mu	rray		
FOR REPEAT SAMPLE:	R REPEAT SAMPLE: FOR REPLACE					
Previous Positive Location Code:			Original Sample Type:			
Positive Collection Date:			(1=Rou	(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)		
Time: Origi			Origina	al Collection Date:		
Proximity:				Time		
(1 = Same; 2 = Upstream	; 3 = Downstream)					
Mail Results To: Type of Supply:						
WINSTON SALEM REGIONAL OFFICE				Community	NTNC	
450 WEST HANES MILL RD STE 300				= =	Private	
WINSTON SALEM, NC 27105 Type of Treatment: Chlorinated						
Telephone No. 3367715000				Free Chlorine Residual:		
EIN #: 566000372X				Total Chlorine Residual:		
	RESULTS			INVALID CODES		
CONTAMINANT METHO		ABSENT	NVALID	1) Confluent Growth/No Colif	form Found	
Total Coliform <u>9223B</u>				 2) TNTC/No Coliform Found 3) Turbid Culture/No Coliform Found 		
			4) Over 30 Hours Old			
Heterotrophic P.C/ml (number)			5) Improper Sample or Analysis			
Repeat Samples Required				Replacement Samples Required		
Date Analysis Begun: 01/26/16				Time Analysis Begun:	08:35 AM	
Date Analysis Completed:01/27/16				Time Analysis Completed:	09:25 AM	
Laboratory Log #:				Certified By: Susan E		
COMMENTS: Distribution System - Special / Non-compliance (SP), System Type: TNC,						

Water Source: GW