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 #: Water System ID #:	37501 00-00-000	County:	MONTGON	MERY		
Name of System:	MONTGOMERY	COUNTY	DUNTY			
Sample Type:	5 (1 = Routine; 2	2 = Repeat; 3	= Replacement	t; 4 = Plan Approval; 5 = Other)		
Collected on: DATE:	01/26/16	TIME: 1	1:55 AM			
Location where collected:	204 W INGRAM (BATHROOM	TAP)			
Location Type:	5 (1 = Entry Tap	; 2 = General	Tap; 3 = End T	「ap; 4 = Source/Intakes; 5 = Other)		
Location Code:		Collected	Ву:	T Overby		
FOR REPEAT SAMPLE:			FOR RE	EPLACEMENT SAMPLE:		
Previous Positive Loca	tion Code:			Original Sample Type:		
Positive Collection Date:			(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)			
Time	 e:			Original Collection Date:		
Proximity:				Time		
(1 = Same; 2 = Upstream	; 3 = Downstream)					
Mail Results To:			Type of	f Supply:		
FAYETTEVILLE REC	GIONAL OFFICE	PWSS		X Community NTNC		
225 GREEN ST STE	714			☐ Non-Community ☐ Private		
FAYETTEVILLE, NC	28301		Type of	Treatment: X Chlorinated		
Telephone No.			1 3 0 0	Non-Chlorinated		
EIN #: 562033116M	COUR	RIER #: 14-5	66-48	Free Chlorine Residual: 1.4 m Total Chlorine Residual:	ıg	
	RESULTS			INVALID CODES		
CONTAMINANT METHO Total Coliform 9223E Fecal/E. Coli Heterotrophic P.C.		ABSENT X — /ml	INVALID	 Confluent Growth/No Coliform Found TNTC/No Coliform Found Turbid Culture/No Coliform Found Over 30 Hours Old Improper Sample or Analysis 		
Repeat Samples Required	i			Replacement Samples Required		
Date Analysis Begun: Date Analysis Completed: Laboratory Log #: COMMENTS:	01/27/16 01/28/16			Time Analysis Begun: 09:25 AM Time Analysis Completed: 09:50 AM Certified By: Susan Beasley	-	