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 #:	43-92-225					
Name of System:	Kendall Hill Master					
Sample Type:	5 (1 = Routine;	(1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)				
Collected on: DATE:	02/22/10	TIME: _ 09:55 AM_				
Location where collected: Meadow Stream #2						
Location Type:	4 (1 = Entry Tap	; 2 = General Ta	p; 3 = End Tap; 4	1 = Source/Intakes; 5 = Other)		
Location Code:	MS1	Collected By	: Shaw	n Guyer		
FOR REPEAT SAMPLE:			EOD DEDI	ACEMENT SAMDI E		
TOR REPEAT SAMPLE.	FOR REPLACEMENT SAMPLE:					
Previous Positive Loc	Original Sample Type:					
Positive Collection Da	(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)					
Tin	Original Collection Date:					
Proximity:			Time:			
(1 = Same; 2 = Upstream	m; 3 = Downstream)					
Mail Results To:	Type of Supply:					
				X Community	NTNC	
RALEIGH REGION		3		Non-Community	Private	
1628 MAIL SERVIC			T 4 T		•	
RALEIGH, NC 2769	19-1626		Type of Trea	=	•	
Telephone No.	919-791-4200			X Non-Chlorinated Free Chlorine Residua		
				Total Chlorine Residu	·	
				Total Official Residu		
	RESULTS			INVALID CODES		
CONTAMINANT METH	IOD PRESENT	ABSENT I	NVALID	1) Confluent Growth/No Co		
Total Coliform312	X	2) TNTC/No Coliform Found 3) Turbid Culture/No Coliform Found				
Fecal/E. Coli				4) Over 30 Hours Old	m Found	
Heterotrophic P.C.		/ml		5) Improper Sample or Ana	lysis	
	(number)					
Repeat Samples Required				Replacement Samples Required		
Date Analysis Begun:	02/22/10			Time Analysis Begun:	10:43 AM	
Date Analysis Completed:	02/23/10			Time Analysis Completed:	11:35 AM	
Laboratory Log #:	13981			Certified By: Susan	Beasley	
COMMENTS:				Tuesa	Basley	