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>37 501</u>		County:	New Hanover	_		
Water System ID #:	70-65-068					
Name of System:	24 Fit					
Sample Type:	5 (1 = Routine; 2	? = Repeat; 3 = F	Replacement; 4 = P	Plan Approval; 5 = Other)	
Collected on: DATE: 02/29/16 TIME: 11:00 AM						
Location where collected:	well head faucet					
Location Type:	1 = Entry Tap	; 2 = General Ta	p; 3 = End Tap; 4 =	= Source/Intakes; 5 = Ot	ther)	
Location Code:		Collected By	: Allen E	3aker		
FOR REPEAT SAMPLE:			FOR REPLAC	CEMENT SAMPLE:		
Previous Positive Loca	Original Sample Type:					
Positive Collection Dat	(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)					
Tim	Original Collection Date:					
Proximity:				Time		
(1 = Same; 2 = Upstream	; 3 = Downstream)					_
Mail Results To:			Type of Supp	ly:		
WILMINGTON REGI	ONAL OFFICE P	WSS		Community		NTNC
127 CARDINAL DRI	VE EXTENSION			Non-Communit	=	Private
· · · · · · · · · · · · · · · · · · ·						
3.					Chlorinated	
•	107967215			Free Chlorin		:
EIN #: 566000372Q COURIER #: 41-63-33				Total Chlorine Residual:		
	RESULTS			INVALID CODE	====== S	
CONTAMINANT METHO	DD PRESENT	ABSENT I	NVALID	1) Confluent Grov	wth/No Colif	orm Found
Total Coliform Colisure X				2) TNTC/No Coliform Found		
Fecal/E. Coli				3) Turbid Culture/No Coliform Found		
Heterotrophic P.C/ml				4) Over 30 Hours Old 5) Improper Sample or Analysis		
	(number)			o) improper camp	pic of Arialy	313
Repeat Samples Require	t			Replacement	Samples R	equired
Date Analysis Begun: 03/01/16				Time Analysis Begun: 09:30 AM		
Date Analysis Completed: 03/02/16				Time Analysis Completed:09:55 AM		
Laboratory Log #:				Certified By:	Susan E	
COMMENTS: Special /	Non-compliance (SP), System Type:	TNC, Water Source	e: GW	Turan	Basley