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

DO NOT WRITE IN THIS SPACE

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

Laboratory ID #: Water System ID #:		3 7 5 0 1 30-41-055	County:	Guilfor	<u>d</u>		
Name of System:		Armfield 1B S/D	0. Danash 0	Davida a sanara	to A. Dien Annassel 5. Other		
Sample Type:	DATE	<b>—</b> `	·		t; 4 = Plan Approval; 5 = Other	1	
	DATE:	03/04/13	TIME: _1	3:55 PM			
Location where col	iectea:	7232 Wyatt Dr.	0 = 0 = ====	Tan: 0 - Fnd 7			
Location Type:		_ ` `		·	Tap; 4 = Source/Intakes; 5 = Ot	ner)	
Location Code:		006	Collected	Ву:	M. Gendy		
FOR REPEAT SAM	/IPLE:			FOR RI	EPLACEMENT SAMPLE:		
Previous Positive Location Code:					Original Sample Type:		
Positive Coll	ection Date	 e:	(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)				
	): :	Original Collection Date:					
Proximity:					Time:		_
(1 = Same; 2	= Upstream	3 = Downstream)					_
	SALEM, No. 33	EGIONAL OFFI IC 27107-2241 36-771-5000 X COUI	CE PWSS RIER #: 13-1	Type of	Free Chlorii	ty P nated thlorinated ne Residual: ne Residual:	ITNC Private 
CONTAMINANT	METHO	D PRESENT	ABSENT	INVALID	1) Confluent Grov	wth/No Colife	orm Found
Total Coliform  Fecal/E. Coli  Heterotrophic P.C.  (number)					2) TNTC/No Coliform Found 3) Turbid Culture/No Coliform Found 4) Over 30 Hours Old 5) Improper Sample or Analysis		
Repeat Sample	es Required		,		Replacement	Samples Re	quired
Date Analysis Begun: 03/05/13					Time Analysis Be	Time Analysis Begun: 09:00 Al	
Date Analysis Completed:		03/06/13			Time Analysis Co		09:20 AM
Laboratory Log #:	-				Certified By:	Susan B	easley
COMMENTS:		Non- compliance (	SP), System	Type: C, Wat	er Source: GW,	Tresal	Gaaley
	Bacteriol	ogical Audit					