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:	Catawba	_		
Water System ID #:	01-18-671					
Name of System:	_	Hollifield Leadership Center				
Sample Type:	(1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)					
Collected on: DATE:	03/09/10	TIME: 09:1	5 AM			
Location where collected:	Kitchen sink					
Location Type:	(1 = Entry Tap	; 2 = General Ta	p; 3 = End Tap; 4 =	= Source/Intakes; 5 = Other)		
Location Code:	LH4	Collected By	Jerry	<u>Lael</u>		
FOR REPEAT SAMPLE:			FOR REPLAC	CEMENT 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 = Upstrear	m: 3 = Downstream)			Tille		
(1 04.110, 2 0701.001	, c					
Mail Results To:	Type of Supply:					
				Community	NTNC	
MOORESVILLE RE	GIONAL OFFICE	PWSS		Non-Community	Private	
610 EAST CENTER						
MOORESVILLE, NO	C 28115		Type of Treat			
Talambana Na	704 662 4600			Non-Chlorinated		
Telephone No.	7O4-663-1699			Free Chlorine Residu		
				Total Chlorine Residu	ual: 1.8 mg/	
	RESULTS			INVALID CODES		
CONTAMINANT METH	OD PRESENT	ABSENT I	NVALID	1) Confluent Growth/No Co	oliform Found	
Total Coliform 312 X			2) TNTC/No Coliform Found			
Fecal/E. Coli				3) Turbid Culture/No Colifo4) Over 30 Hours Old	rm Found	
Heterotrophic P.C.		/ml		5) Improper Sample or Ana	alvsis	
	(number))		-, -, -, -, -, -, -, -, -, -, -, -, -, -	, ,	
Repeat Samples Required				Replacement Samples Required		
Date Analysis Begun:	03/10/10			Time Analysis Begun:	08:06 AM	
Date Analysis Completed:	03/11/10			Time Analysis Completed:	09:30 AM	
Laboratory Log #:	14530			Certified By: Susan	Beasley	
COMMENTS:				Tura	Baarley	