DO NOT WRITE IN THIS SPACE

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

Laboratory ID #: Water System ID #:	<u>37501</u> 02-91-104		ance		
Name of System: Edgewood Estates					
Sample Type:	ample Type: (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)				
Collected on: DA	ATE: 03/30/10				
Location where collect		Kitchen Sink (Audit Sample)			
Location Type:	(1 = Entry Tap;	(1 = Entry Tap; 2 = General Tap; 3 = End Tap; 4 = Source/Intakes; 5 = Other)			
Location Code:	001	Collected By:	Shawn Guyer		
FOR REPEAT SAMPLE: FOR REPLACEMENT SAMPLE				MPLE:	
Previous Positive Location Code:			Original Sample	Original Sample Type:	
				=Routine; 2=Repeat; 3=Plan Approval; 4=Other)	
Time:		Original Collection Date:			
Proximity:			-	 Time:	
(1 = Same; 2 = l	Jpstream; 3 = Downstream)				
Mail Results To: RALEIGH REGIONAL OFFICE PWSS 1628 MAIL SERVICE CENTER RALEIGH, NC 27699-1628 Telephone No. 919-791-4200		Ту	pe of Supply:		
		Non-Community       Private         Type of Treatment:       Chlorinated         Non-Chlorinated       Non-Chlorinated         Free Chlorine Residual:			
			То	tal Chlorine Residual:	
	RESULTS		INVALI	D CODES	
CONTAMINANT Total Coliform Fecal/E. Coli Heterotrophic P.C.	METHOD PRESENT 319 (number)	ABSENT INVAL	2) TNTC 3) Turbio 4) Over	uent Growth/No Coliform Found c/No Coliform Found d Culture/No Coliform Found 30 Hours Old per Sample or Analysis	
Repeat Samples Required			Repl	Replacement Samples Required	
Date Analysis Begun: 03/30/10				alysis Begun: 13:12 PM	
Date Analysis Comple	eted: 03/31/10		Time An	alysis Completed: 09:30 AM	
Laboratory Log #:	15254		Certified	·	
COMMENTS:	Colilert 18 Water Source: (	GW Distribution Sy	ystem	Treas Braaley	
	Special/Non-compliance				