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 #: Water System ID #:	3 7 5 0 1 04-69-025	County: _	Pamlico	-		
Name of System:	Pamlico Co Wate					
Sample Type:	5 (1 = Routine; 2	= Repeat; 3 =	Replacement; 4 = Pl	an Approval; 5 = Other)		
Collected on: DATE:	04/01/14	TIME: 14:	40 PM			
Location where collected:	52 Covington Cou					
Location Type:	(1 = Entry Tap;	2 = General Ta	ap; 3 = End Tap; 4 =	Source/Intakes; 5 = Other)		
Location Code:		Collected By	/: Joey W	/hite		
FOR REPEAT SAMPLE:			FOR REPLAC	EMENT SAMPLE:		
Previous Positive Locat	ion Code:		Original Sample Type:			
Positive Collection Date) :		(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)			
Time	:: 		Original Collection Date:			
Proximity:				Time		
(1 = Same; 2 = Upstream;	3 = Downstream)					
Mail Results To:			Type of Supply	y:		
WASHINGTON REG	IONAL OFFICE P	wss		X Community	NTNC	
943 WASHINGTON S	SQUARE MALL			Non-Community	Private	
WASHINGTON, NC 2			Type of Treatr	ment: Chlorinated		
·	529466481		Type of Treati	Non-Chlorinated	d	
Telephone No. 25 EIN #: 562033116F		IER #: 16-04	-01	Free Chlorine Residu Total Chlorine Residu	ıal: mg	
RESULTS				INVALID CODES		
CONTAMINANT METHO Total Coliform 9223E Fecal/E. Coli Heterotrophic P.C.		ABSENT X	INVALID	 Confluent Growth/No Co TNTC/No Coliform Foun Turbid Culture/No Colifo Over 30 Hours Old Improper Sample or Ana 	rm Found	
Repeat Samples Required				Replacement Samples	Required	
Date Analysis Begun: Date Analysis Completed: Laboratory Log #: COMMENTS: Special/ N	04/02/14 04/03/14 Non-compliance (SP),	, Disinfectant us	ed: Chloramines.		08:55 AM 09:45 AM Beasley	