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 #: Water System ID #:	<u>3 7 5 0 1</u> 01-49-171	County:	Iredell			
Name of System:	Wayside Estates	<u> </u>				
Sample Type:	_		= Replacement: 4	I = Plan Approval; 5 = Other)		
Collected on: DATE:	04/12/11	TIME: 13:30 PM				
Location where collected:	104 Tulip Tree Di					
Location Type:			Tap: 3 = End Tar	o; 4 = Source/Intakes; 5 = Other)		
Location Code:	112	Collected E		Paul Judge		
			,			
FOR REPEAT SAMPLE:	FOR REPLACEMENT SAMPLE:					
Previous Positive Loc	Original Sample Type:					
Positive Collection Da	(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)					
Tir	Original Collection Date:					
Proximity:				Time:	<del></del>	
(1 = Same; 2 = Upstrea	m; 3 = Downstream)					
Mail Results To:	Type of Supply:					
				X Community	NTNC	
MOORESVILLE RE		PWSS		Non-Community	Private	
610 EAST CENTER			Tune of T	- Chlorinated		
MOORESVILLE, N	C 20115		Type of T	reatment: X Chlorinated Non-Chlorinated	ı	
Telephone No.	704-663-1699			Free Chlorine Residua		
				Total Chlorine Residu		
	RESULTS			INVALID CODES		
CONTAMINANT METH	HOD PRESENT	ABSENT	INVALID	1) Confluent Growth/No Co		
Total Coliform 922	X		<ol> <li>TNTC/No Coliform Found</li> <li>Turbid Culture/No Colifor</li> </ol>			
Fecal/E. Coli	Ш	Ш	4) Over 30 Hours Old	iii i ouilu		
Heterotrophic P.C.	/ml		5) Improper Sample or Ana	lysis		
_	(number)			_		
Repeat Samples Require	ed		Replacement Samples Required			
Date Analysis Begun:	04/13/11			Time Analysis Begun:	08:33 AM	
Date Analysis Completed:			Time Analysis Completed:	09:30 AM		
Laboratory Log #:			Certified By: Susan	Beasley		
COMMENTS: Specia	/ater Source:	Pur	Turan	Bearley		