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, N.C. 27611-8047

Raleigh, NC 27611-8047 919-733-7308

DO NOT WRITE IN THIS SPACE

BACTERIOLOGICAL ANALYSIS - PUBLIC WATER SYSTEM

Laboratory ID #:	<u>37501</u>	County:	Forsyth			
Water System ID #:	00-00-000					
Name of System:	Fraternity Church of Bretheran					
Sample Type: 5 (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)						
Collected on: DATE:	04/14/14	TIME:14:10	PM			
Location where collected:	Outside tap					
Location Type:	(1 = Entry Tap	; 2 = General Tap;	3 = End Tap; 4 =	Source/Intakes; 5 = Other)		
Location Code:		Collected By:	Blair Μι	ırray		
FOR REPEAT SAMPLE:			FOR REPLAC	EMENT SAMPLE:		
Previous Positive Location Code:			Original Sample Type:			
Positive Collection Da	(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)					
Tim		Original Collection Date:				
Proximity:				Time		
(1 = Same; 2 = Upstrear	m; 3 = Downstream)					
Mail Results To:			Type of Supply	/:		
WINSTON SALEM	REGIONAL OFFI	CE PWSS		Community [NTNC Private	
WINSTON SALEM,	NC 27107-2241		Type of Treatm	nent:		
	336-771-5000		. , po o ou	Non-Chlorinate	ed	
EIN #: 56 6000372	RIER #: 13-15-0	1	Free Chlorine Resid	dual:		
		(ILIX #. 10-10-0	•	Total Chlorine Resid	dual:	
	RESULTS			INVALID CODES		
CONTAMINANT METHOD PRESENT ABSENT INVALID			VALID	1) Confluent Growth/No Coliform Found		
Total Coliform 9223B X				2) TNTC/No Coliform Found		
Fecal/E. Coli <u>9223B</u> <u>X</u>				3) Turbid Culture/No Coliform Found4) Over 30 Hours Old		
Heterotrophic P.C/ml				5) Improper Sample or Analysis		
	(number)				
Repeat Samples Required				Replacement Samples Required		
Date Analysis Begun: 04/15/14				Time Analysis Begun: 08:50 AM		
Date Analysis Completed: 04/16/14				Time Analysis Completed		
Laboratory Log #:					n Beasley	
COMMENTS: Special	/ Non-compliance (SF	P), System Type: Ti	NC, Water Source	: GW Tue	en Beasley	