N.C. Department of Environmental, Health, and Natural Resources
Division of Laboratory Services
State Laborabory of Public Health
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Raleigh, NC 27611-8047 919-733-7308

DO NOT WRITE IN THIS SPACE

BACTERIOLOGICAL ANALYSIS - PUBLIC WATER SYSTEM

Laboratory ID #: Water System ID #: Name of System:	37 501 04-27-103 CAROLINA VILL	County: CURRIT	<u>uck</u>
Sample Type: 5 (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)			
ollected on: DATE: 04/21/15 TIME: 11:37 AM			
Location where collecte	here collected: OFFICE RESTROOM		
Location Type:	(1 = Entry Tap	; 2 = General Tap; 3 = End	Tap; 4 = Source/Intakes; 5 = Other)
Location Code:	006	Collected By:	Joey White
FOR REPEAT SAMPLI	E:	FOR F	REPLACEMENT SAMPLE:
Previous Positiv	e Location 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 = Up	ostream; 3 = Downstream)		
Mail Results To:		Туре	of Supply:
WASHINGTON	N REGIONAL OFFICE I	PWSS	☐ Community ☐ NTNC
943 WASHINGTON SQUARE MALL Non-Community Private			
WASHINGTON, NC 27889 Type of Treatment: Chlorinated			
Telephone No. 2529466481 Non-Chlorinated			
EIN #: 562033		RIER #: 16-04-01	Free Chlorine Residual: 1.20 mg. Total Chlorine Residual:
	RESULTS		INVALID CODES
CONTAMINANT Total Coliform Fecal/E. Coli Heterotrophic P.C.	PRESENT 9223B (number)	ABSENT INVALID X	 Confluent Growth/No Coliform Found TNTC/No Coliform Found Turbid Culture/No Coliform Found Over 30 Hours Old Improper Sample or Analysis
Repeat Samples Required			Replacement Samples Required
Date Analysis Begun: 04/22/15			Time Analysis Begun: 09:10 AM
Date Analysis Complet	ed: 04/23/15		Time Analysis Completed: 09:10 AM
Laboratory Log #:			Certified By: Susan Beasley
COMMENTS: SI	pecial/Non-compliance (SP)	System Type: Comm, Wat	er Source: GW, Tues Basley
Di	Disinfectant Used: Sodium hypochlorite.		