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 #: Name of System:	3 7 5 0 1 43-92-519 Bentwinds #4	County:	Wake			
Sample Type:						
Collected on: DATE:	04/23/09	TIME: 1		is, idan ppioral, o calaly		
Location where collected:	Sink Men's Restre					
Location Type:	4 (1 = Entry Tap;	2 = General	Tap; 3 = End	Tap; 4 = Source/Intakes; 5 = Other)		
Location Code:	<u>S04</u>	Collected	Ву:	Tim Davis		
FOR REPEAT SAMPLE:			FOR R	EPLACEMENT SAMPLE:		
Previous Positive Location Code:				Original Sample Type:		
Positive Collection Date:				(1=Routine; 2=Repeat; 3=Plan Approval; 4=Othe	er)	
Time:				Original Collection Date:		
Proximity:			Time:			
(1 = Same; 2 = Upstream	; 3 = Downstream)					
Mail Results To:			Type of Supply:			
RALEIGH REGIONA				Community NTNC Non-Community Private		
Telephone No. 9 ⁴	I9-791-4200		Туре с	of Treatment: Chlorinated Non-Chlorinated Free Chlorine Residual: Total Chlorine Residual:		
	RESULTS			INVALID CODES		
CONTAMINANT METHO Total Coliform 319 Fecal/E. Coli Heterotrophic P.C.	DD PRESENT (number)	ABSENT X /ml	INVALID	 Confluent Growth/No Coliform Fo TNTC/No Coliform Found Turbid Culture/No Coliform Foun Over 30 Hours Old Improper Sample or Analysis 		
Repeat Samples Required				Replacement Samples Required	d	
Date Analysis Begun:	04/23/09			Time Analysis Begun:13:0	2 PM	
Date Analysis Completed:	04/24/09			Time Analysis Completed: 10:2	0 AM	
Laboratory Log #:	4114			Certified By: Susan Beasle	<u>y</u>	
COMMENTS: 18 Colile	rt					