BACTERIOLOGICAL ANALYSIS - PUBLIC WATER SYSTEM

Laboratory ID #: Water System ID #: Name of System: Sample Type: Collected on: DATE: Location where collected: Location Type: Location Code:	04/23/12 Kitchen Tap	= Repeat; 3 = Re TIME: 12:20) PM	n Approval; 5 = Other) Source/Intakes; 5 = Other) aylor	
FOR REPEAT SAMPLE:			FOR REPLACE	MENT SAMPLE:	
Previous Positive Loca Positive Collection Date Time Proximity: (1 = Same; 2 = Upstream	e:		(1=Rou	al Sample Type: utine; 2=Repeat; 3=Plan Appro al Collection Date: Time:	val; 4=Other)
Mail Results To: WINSTON SALEM R WINSTON SALEM, I Telephone No. 3 EIN #: 56 6000372 X	NC 27107-2241 36-771-5000	E PWSS IER #: 13-15-0	Type of Supply: Type of Treatm 1	Community [Non-Community [lual: 0.28 mg/l
	RESULTS			INVALID CODES	
CONTAMINANT METHO Total Coliform 9223E Fecal/E. Coli Heterotrophic P.C.		ABSENT IN		 Confluent Growth/No C TNTC/No Coliform Fou Turbid Culture/No Colif Over 30 Hours Old Improper Sample or Ar 	ind form Found
Repeat Samples Required				Replacement Samples Required	
Date Analysis Begun: Date Analysis Completed: Laboratory Log #:	04/24/12 04/25/12 36038			Time Analysis Begun: Time Analysis Completed Certified By:Jo	08:45 AM 09:45 AM y Hayes
COMMENTS: <u>TCR</u> , Sp	ecial/Non-complian	се			R. Mayes