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, NC 27611-8047 919-733-7308

DO NOT WRITE IN THIS SPACE

BACTERIOLOGICAL ANALYSIS - PUBLIC WATER SYSTEM

Laboratory ID #:	<u>37501</u>	County:	Guilford			
Water System ID #:	30-41-					
Name of System: Living Water Bapt Church						
Sample Type:	5 (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)					
Collected on: DATE	04/24/14	TIME: 07:4	5 AM			
Location where collected	Outside tap					
Location Type:	Type: (1 = Entry Tap; 2 = General Tap; 3 = End Tap; 4 = Source/Intakes; 5 = Other)					
Location Code:		Collected By:	Blair Mu	rray		
FOR REPEAT SAMPLE:	FOR REPLACEMENT SAMPLE:					
Previous Positive I	_ocation Code:	Original Sample Type:				
Positive Collection	(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)					
		Original Collection Date:				
Proximity:			Time			
	ream; 3 = Downstream)					
Mail Results To: Type of Supply:						
WINSTON SALEM REGIONAL OFFICE PWSS						
					Private	
WINSTON SALEM, NC 27107-2241 Type of Treatment: Chlorinated Telephone No. 336-771-5000 Non-Chlorinated						
Telephone No. 336-771-5000				Free Chlorine Residual:		
EIN #: 56 6000372 XX COURIER #: 13-15-01			01	Total Chlorine Residual:		
	RESULTS			INVALID CODES		
CONTAMINANT ME	THOD PRESENT	ABSENT I	NVALID	1) Confluent Growth/No Coli	form Found	
Total Coliform 9	223B	X		2) TNTC/No Coliform Found	m Found	
Fecal/E. Coli				 Turbid Culture/No Coliforr Over 30 Hours Old 	n Found	
Heterotrophic P.C.	(number	/ml		5) Improper Sample or Analy	/sis	
_	(number)		_		
Repeat Samples Required Replacement Samples Required					equired	
Date Analysis Begun:	04/24/14			Time Analysis Begun:	13:20 PM	
Date Analysis Completed: 04/25/14			Time Analysis Completed:	14:45 PM		
Laboratory Log #:			Certified By: Susan I			
COMMENTS: Spe	cial / Non-compliance (SF	?), System Type: ∃	FNC, Water Source:	GW Tream	Baaley	