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 02-41-059 Bills Pizza	County: _	Guilford			
Sample Type:	(1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)					
ollected on: DATE: 05/10/10 TIME: 10:45 AM						
Location where collected:	Kitchen Sink					
Location Type: (1 = Entry Tap; 2 = General Tap; 3 = End Tap; 4 = Source/Intakes; 5 = Other)						
Location Code:	E01	Collected By	: Blair M	urray		
FOR REPEAT SAMPLE:	FOR REPLACEMENT SAMPLE:					
Previous Positive 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 = Upstream	; 3 = Downstream)					
Mail Results To: Tyl				pe of Supply:		
WINSTON SALEM R WINSTON SALEM, N Telephone No. 33		E PWSS	Type of Treatr	Community  Non-Community  Chlorinated  Non-Chlorinated  Free Chlorine Residua  Total Chlorine Residua	-	
				Total Chionne Residu	ສາ. 	
	RESULTS			INVALID CODES		
CONTAMINANT METHOD PRESENT ABS  Total Coliform 9223B			INVALID	<ol> <li>Confluent Growth/No Coliform Found</li> <li>TNTC/No Coliform Found</li> <li>Turbid Culture/No Coliform Found</li> <li>Over 30 Hours Old</li> <li>Improper Sample or Analysis</li> </ol>		
Repeat Samples Required				Replacement Samples Required		
Date Analysis Begun: Date Analysis Completed: Laboratory Log #:	05/11/10 05/12/10 16466				08:03 AM 09:10 AM Beasley	
COMMENTS: Special/I	Non-compliance (S	P), System Ty	pe: TNC	Ollian	Beasley	