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:	New Hanover	_		
Water System ID #:	70-65-033					
Name of System:	Straightway Ministries Inc					
Sample Type:	Plan Approval; 5 = Other)					
Collected on: DATE:	DATE: <u>06/08/16</u> TIME: <u>11:29 AM</u>					
Location where collected:	Womens Restro	om				
Location Type:	(1 = Entry Tap	o; 2 = General Tap	p; 3 = End Tap; 4 =	Source/Intakes; 5 = Other)		
Location Code:		Collected By	: Allen	Baker		
FOR REPEAT SAMPLE:			FOR REPLA	CEMENT SAMPLE:		
Previous Positive Location Code:			Original Sample Type:			
Positive Collection Da	(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)					
Tin		Original Collection Date:				
Proximity:			Time			
(1 = Same; 2 = Upstrea	m; 3 = Downstream)					
Mail Results To:			Type of Supp	oly:		
WILMINGTON REG	SIONAL OFFICE F	PWSS		Community	NTNC	
127 CARDINAL DR	IVE EXTENSION			Non-Community	Private	
WILMINGTON, NC 28405 Type of Treatment: Chlorinated						
Non C					ated	
•				Free Chlorine Residual:		
EIN #: 566000372Q	t COO!	RIER #: 41-63-	-33	Total Chlorine Res	idual:	
	RESULTS			INVALID CODES		
CONTAMINANT METH	OD PRESENT	ABSENT	INVALID	1) Confluent Growth/No	Coliform Found	
·				2) TNTC/No Coliform Fo	2) TNTC/No Coliform Found	
Fecal/E. Coli				3) Turbid Culture/No Coliform Found		
Heterotrophic P.C.		/ml		<ul><li>4) Over 30 Hours Old</li><li>5) Improper Sample or A</li></ul>	Analysis	
	(number	.)		o,p. opor oup.o or .		
Repeat Samples Required				Replacement Samples Required		
Date Analysis Begun: 06/09/16				Time Analysis Begun: 08:10 AM		
Date Analysis Completed: 06/10/16				Time Analysis Complete	d: <b>08:20 AM</b>	
Laboratory Log #:					an Beasley	
COMMENTS: Special.	/Non-compliance (SP	), System Type: T	NC, Water Source	: GW, 1st sink	ean Beasley	