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: CUMBERL	AND		
Water System ID #:	TB-D0-000	_			
Name of System:	me of System: DOLLAR GENERAL STORE # 15984				
Sample Type:	5 (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)				
Collected on: DATI	E: 06/14/16	TIME: 12:00 PM			
Location where collecte	d: MENS BATHROOM	M SINK			
Location Type:	(1 = Entry Tap; 2	2 = General Tap; 3 = End Ta	ap; 4 = Source/Intakes; 5 = Other)		
Location Code:		Collected By:	Allen Baker		
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 = Ups	stream; 3 = Downstream)				
Mail Results To: Type of Supply:					
WILMINGTON REGIONAL OFFICE PWSS					
127 CARDINAL DRIVE EXTENSION					
WILMINGTON, NC 28405 Type of Treatment: Chlorinated					
Telephone No. 9107967215			Free Chlorine Residua	l:	
EIN #: 566000372Q COURIER #: 41-63-33			Total Chlorine Residua	l:	
	RESULTS		INVALID CODES		
	IETHOD PRESENT	ABSENT INVALID	1) Confluent Growth/No Coli	form Found	
	9223B X		2) TNTC/No Coliform Found		
	9223B	X 🗌	 Turbid Culture/No Coliforr Over 30 Hours Old 	n Found	
Heterotrophic P.C.		/ml	5) Improper Sample or Analy	/sis	
	(number)		-		
Repeat Samples Required			Replacement Samples R	Replacement Samples Required	
Date Analysis Begun:	06/15/16		Time Analysis Begun:	10:00 AM	
Date Analysis Completed: 06/16/16			Time Analysis Completed:	10:03 AM	
Laboratory Log #:			Certified By: Susan I		
COMMENTS: <u>Sp</u>	OMMENTS: Special / Non-compliance (SP), System Type: TNC, Water Source: GW. Suran Baaley				