## **BACTERIOLOGICAL ANALYSIS - PUBLIC WATER SYSTEM**

Laboratory ID #: Water System ID #:		<u>37501</u> TB-A	County: New Hanover						
Name of System:		Flounders Saloon							
Sample Type:									
	DATE: 06/25/13 TIME: 14:14 PM								
Location where colle	ected:	Utility sink							
Location Type: (1 = Entry Tap; 2 = General Tap; 3 = End Tap; 4 = Source/Intakes; 5 = Other)									
Location Code:			Collected	Ву:	Allen Baker				
FOR REPEAT SAM			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:				Туре	of Supply:				
WILMINGTON REGIONAL OFFICE PWSS									
WILMINGTON, NC 28405-3845 Type of Treatment: Chlorinated									
Telephone No.   910-796-7215									
EIN #: 56 2033372 Q COURIER				16-33		Free Chlorine Residual: Total Chlorine Residual:			
RESULTS					IN	IVALID CODE	S		
CONTAMINANTMETHODPRESENTABSENTTotal Coliform9223BIIIFecal/E. Coli9223BIIIHeterotrophic P.C					2) 3) 4)	<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: 06/26/13						Time Analysis Begun: 08:55 AM			
Date Analysis Completed: 06/27/13					Ti	Time Analysis Completed: 09:10 AM			
Laboratory Log #:	-				Ce	ertified By:	Susan B		
COMMENTS:	Special / Non-compliance (SP), System Type: TNC, Water Source:								
	GW. Disi	. Disinfectant Used: N/A. New System sample.							