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

Sample Type: <ul> <li>(1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)</li> <li>Collected on:</li> <li>DATE:</li> <li>06/29/10</li> <li>TIME:</li> <li>14:20 PM</li> </ul> Location where collected:       Game Room Sink         Location Code:       GR1       Collected By:       Diane Williams         FOR REPEAT SAMPLE:       FOR REPLACEMENT SAMPLE:       Original Sample Type:                 Previous Positive Location Code:       Original Collection Date:       (1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)         Original Collection Date:       (1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)         Proximity:       (1 = Same; 2 = Upstream; 3 = Downstream)       Time:       Original Collection Date:         Mail Results To:       Type of Supply:       Community       NTNC         FAYETTEVILLE REGIONAL OFFICE PWSS 225 GREEN STREET       FAYETTEVILLE, 28301-5043       Type of Treatment:       Chlorinated         Telephone No.       910-433-3000       Free Chlorine Residual:       Total Coliform Found       3) Turbid Collform Found         10 Confluent Growth/No Coliform Found       (number)       /ml       )       Original Colliform Found       4) Over 30 Hours Old         10 total Coliform       9223B       (ml       (ml       )       (ml       0) <td< th=""><th>Laboratory ID #: Water System ID #: Name of System:</th><th><u>3 7 5 0 1</u> 03-63-534 Highland Baptist</th><th>County: _ Church</th><th>Moore</th><th></th><th></th></td<>	Laboratory ID #: Water System ID #: Name of System:	<u>3 7 5 0 1</u> 03-63-534 Highland Baptist	County: _ Church	Moore			
Location Code:       GR1       Collected By:       Diane Williams         FOR REPEAT SAMPLE:       FOR REPLACEMENT SAMPLE: <ul> <li>Previous Positive Location Code:</li> <li>Positive Collection Date:</li> <li>(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)</li> <li>Time:</li> <li>Original Collection Date:</li> <li>(1=Results; 2=Repeat; 3=Plan Approval; 4=Other)</li> <li>Original Collection Date:</li> <li>(1=Results; 2=Upstream; 3 = Downstream)</li> </ul> Mail Results To:         Type of Supply:           FAYETTEVILLE REGIONAL OFFICE PWSS         225 GREEN STREET           FAYETTEVILLE, 28301-5043         Type of Treatment:         Chlorinated           X         Non-Chlorinated         Non-Chlorinated           Telephone No.         910-433-3000           RESULTS         INVALID         1) Confluent Growth/No Coliform Found           Total Coliform         9223B         X         1)         2) Turbid Culture/No Coliform Found           1) Confluent Growth/No Coliform Found         3) Turbid Culture/No Coliform Found         4) Over 30 Hours Old         5) Improper Samples Required           Heterotrophic P.C.        /ml        /ml         5) Improper Samples Required         10:453 AM           Date Analysis Begun:        06/30/10         Time Ana	Collected on: DATE:	ted on: DATE: 06/29/10 TIME: 14:20 PM					
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:       [         (1 = Same; 2 = Upstream; 3 = Downstream)       Time:         Mail Results To:       Type of Supply:         FAYETTEVILLE REGIONAL OFFICE PWSS       225 GREEN STREET         FAYETTEVILLE, 28301-5043       Type of Treatment:         Telephone No.       910-433-3000         RESULTS       INVALID         CONTAMINANT       METHOD         PRESENT       ABSENT         Interview       []         Meterotrophic P.C.							
Positive Collection Date:       (1=Routine: 2=Repeat; 3=Plan Approval; 4=Other)         Time:       Original Collection Date:         Proximity:       Image: Community							
FAYETTEVILLE REGIONAL OFFICE PWSS 225 GREEN STREET FAYETTEVILLE, 28301-5043       Image: Community ima	Positive Collection Dat Time Proximity:	e:		(1=Rout	ine; 2=Repeat; 3=Plan Approva I Collection Date:	l; 4=Other) 	
CONTAMINANT       METHOD       PRESENT       ABSENT       INVALID       1) Confluent Growth/No Coliform Found         Total Coliform       9223B       Image: Colimate Coliform       Image: Colimate Coliform       Coliform       Found         Fecal/E. Coli       Image: Colimate Coliform       Image: Colimate Coliform       Image: Coliform       Image: Coliform       Coliform       Found         Heterotrophic P.C.       Image: Colimate Coliform       Image: Colimate Coliform       Image: Coliform       Image: Coliform       Image: Coliform       Image: Coliform       Found       3)       Turbid Culture/No Coliform       Found       4)       Over 30 Hours Old       5)       Improper Sample or Analysis         Image: Colimate	FAYETTEVILLE RE 225 GREEN STREE FAYETTEVILLE, 28	T 301-5043	PWSS		X       Non-Community       Image: Chlorinated         nt:       Chlorinated         X       Non-Chlorinated         Free Chlorine Residual	Private	
Date Analysis Begun:06/30/10Time Analysis Begun:08:03 AMDate Analysis Completed:07/01/10Time Analysis Completed:10:45 AMLaboratory Log #:18056Certified By:Susan Beasley	Total Coliform 92231 Fecal/E. Coli	DD PRESENT  B		/ALID	<ol> <li>Confluent Growth/No Col</li> <li>TNTC/No Coliform Found</li> <li>Turbid Culture/No Colifor</li> <li>Over 30 Hours Old</li> </ol>	d m Found	
Date Analysis Completed:07/01/10Time Analysis Completed:10:45 AMLaboratory Log #:18056Certified By:Susan Beasley	Repeat Samples Require	d			Replacement Samples F	Required	
CONVINIENTS.	Date Analysis Completed:	07/01/10			Time Analysis Completed: Certified By: <b>Susan</b>	10:45 AM Beasley	