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 #:	<u>3 7 5 0 1</u> 01-05-471	County:	Ashe	_		
Name of System:	Hwy 221					
Sample Type:	_	? = Reneat: 3 =	= Renlacement: 4 =	Plan Approval: 5 = Other)		
Collected on: DATE:	(1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other) 06/29/11					
Location where collected:	Spring	111VIL	2.131 141			
Location Type:		· 2 = General ·	Tap: 3 = End Tap: 4	l = Source/Intakes; 5 = Other)		
Location Code:	SP1	Collected F		Lynge		
FOR REPEAT SAMPLE:			FOR REPLA	ACEMENT SAMPLE:		
Previous Positive Location Code:			Original Sample Type:			
Positive Collection Da		(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)				
Tin	ne:		Ori	iginal Collection Date:		
Proximity:			Time:			
(1 = Same; 2 = Upstrea	m; 3 = Downstream)			_		
Mail Results To:			Type of Sup	ply:		
				Community	☐ NTNC	
WINSTON SALEM	REGIONAL OFFIC	E PWSS		Non-Community	Private	
WINCTON CALEM	NC 27407 2244		Tune of Tree			
WINSTON SALEM,	NC 27 107-2241		Type of Trea	atment:		
Telephone No.	336-771-5000			Free Chlorine R		
•				Total Chlorine F		
	RESULTS			INVALID CODES		
CONTAMINANT METH	OD PRESENT	ABSENT	INVALID	1) Confluent Growth/		
Total Coliform 9223B X					TNTC/No Coliform Found Turbid Culture/No Coliform Found	
Fecal/E. Coli 9223B X				4) Over 30 Hours Old		
Heterotrophic P.C.	(number)	/ml		5) Improper Sample	or Analysis	
_	,			_		
Repeat Samples Required				Replacement Samples Required		
Date Analysis Begun: 06/30/11				Time Analysis Begun: 08:22 AM		
Date Analysis Completed:	07/01/11			Time Analysis Compl	eted: 09:40 AM	
Laboratory Log #:	28296			Certified By: S	Susan Beasley	
COMMENTS: System	n Type: NC, Water S	ource: GW, [Distribution Syster	m TCR	Trean Brasley	