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: _	Montgon	nery		
Water System ID #:	Montgomery County					
Name of System:						
Sample Type:	ample Type: [5] (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)					
Collected on: DATE:	07/07/14	TIME:13:	00 PM			
Location where collected: 315 N Main Street (Mens restroom)						
Location Type:	2 (1 = Entry Tap	o; 2 = General Ta	ap; 3 = End 1	Γap; 4 = Source/Intakes; 5 = Other)		
Location Code:	<u>T26</u>	Collected B	y: <b>\</b>	/ang Foung		
FOR REPEAT SAMPLE:			FOR R	EPLACEMENT SAMPLE:		
Previous Positive Location Code:				Original Sample Type:		
Positive Collection Da	(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)					
Tim		Original Collection Date:				
Proximity:				 Time		
(1 = Same; 2 = Upstream	n; 3 = Downstream)					
Mail Results To:			Type of	f Supply:		
FAYETTEVILLE RE	GIONAL OFFICE	PWSS		X Community	NTNC	
225 GREEN STREE	т			Non-Community	Private	
FAYETTEVILLE, NO			Type of	f Treatment: Chlorinated		
	104861191		Type of	Non-Chlorinate	ed	
•				Free Chlorine Resid		
EIN #: 562033116M	COUR	RIER #: 14-56	-48	Total Chlorine Resid	dual:	
RESULTS				INVALID CODES		
CONTAMINANT METH	OD PRESENT	ABSENT	INVALID	1) Confluent Growth/No C	Coliform Found	
Total Coliform 9223B X				2) TNTC/No Coliform Found		
Fecal/E. Coli				<ul><li>3) Turbid Culture/No Colit</li><li>4) Over 30 Hours Old</li></ul>	form Found	
Heterotrophic P.C.		/ml		5) Improper Sample or Ar	nalysis	
	(number	)		,	•	
Repeat Samples Required				Replacement Sample:	Replacement Samples Required	
Date Analysis Begun: 07/08/14				Time Analysis Begun:	10:05 AM	
Date Analysis Completed:07/09/14				Time Analysis Completed		
Laboratory Log #:					n Beasley	
COMMENTS:				Tues	en Baaley	