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:	Carteret			
Water System ID #:	70-16-028					
Name of System:	lame of System: TEETER ICE MACHINE					
Sample Type:	5 (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)					
Collected on: DATI	TE: 07/29/15 TIME: 12:30 PM					
Location where collected	d: Wellhead Faucet					
Location Type:	(1 = Entry Tap;	2 = General Tap; 3	3 = End Tap; 4 = So	ource/Intakes; 5 = Other)		
Location Code:		Collected By:	Allen Bak	(er		
FOR REPEAT SAMPLE	FOR REPLACEMENT SAMPLE:					
Previous Positive	Location Code:	Original Sample Type:				
Positive Collectio		(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)				
		Original Collection Date:				
Proximity:				Time		
(1 = Same; 2 = Ups	stream; 3 = Downstream)				_	
Mail Results To: Type of Supply:						
WILMINGTON REGIONAL OFFICE PWSS					NTNC	
					Private	
WILMINGTON, NC 28405-3845 Type of Treatment: Chlorinated						
Telephone No. 910-796-7215				Free Chlorine Residual:		
EIN #: 56 2033372 Q COURIER #: 04-16-33				Total Chlorine Residual:		
	RESULTS			INVALID CODES		
CONTAMINANT N	IETHOD PRESENT	ABSENT INV	ALID	1) Confluent Growth/No Colife	orm Found	
	9223B	¥ L	_	 2) TNTC/No Coliform Found 3) Turbid Culture/No Coliform 	Found	
Fecal/E. Coli				4) Over 30 Hours Old		
Heterotrophic P.C.	(number)	/ml		5) Improper Sample or Analys	sis	
Repeat Samples Required				Replacement Samples Required		
Date Analysis Begun:	07/30/15			Time Analysis Begun:	08:00 AM	
Date Analysis Completed: 07/31/15				Time Analysis Completed:	08:45 AM	
Laboratory Log #:				Certified By: Susan B	-	
COMMENTS: Special/Non-compliance (SP), System Type: TNC, Water Source: GW						