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

Laboratory ID #: Water System ID #: Name of System:	<u>3 7 5 0 1</u> 04-71-136 Camp Kirkwood	County: Pend	er		
Sample Type:		nt; 4 = Plan Approval; 5 = Other)			
	ocation where collected: Kitchen sink, Near walk-in freezer				
Location Type: (1 = Entry Tap; 2 = General Tap; 3 = End Tap; 4 = Source/Intakes; 5 = Other)					
Location Code:		Collected By:	Allen Baker		
FOR REPEAT SAMPLE:		FOR F	FOR REPLACEMENT SAMPLE:		
Previous Positiv	ve Location Code:		Original Sample Type:		
Positive Collect	ion Date:	(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)			
Time:		Original Collection Date:			
Proximity:			 Time:		
(1 = Same; 2 = U	pstream; 3 = Downstream)				
Mail Results To:       Type of Supply:         WILMINGTON REGIONAL OFFICE PWSS       Community       NTNC         Non-Community       Private         WILMINGTON, NC 28405-3845       Type of Treatment:       Chlorinated         Telephone No.       910-796-7215       Non-Chlorinated					
EIN #: 56 203	3372 Q COUR	ER #: 04-16-33	R #: 04-16-33 Total Chlorine Residual:		
	RESULTS		INVALID CODES		
CONTAMINANT     METHOD     PRESENT     ABSENT       Total Coliform     9223B     Image: Colimon state			<ol> <li>2) TNTC/No Coliform Found</li> <li>3) Turbid Culture/No Coliford</li> <li>4) Over 30 Hours Old</li> </ol>	<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 R	Replacement Samples Required	
Date Analysis Begun: Date Analysis Comple Laboratory Log #:	08/01/13 oted:08/02/13		·	09:15 AM 09:20 AM Beasley	
COMMENTS:	Special / Non-compliance (SP), System Type: TNC, Water Source:				
(	GW. Disinfectant Used: N/A				