

BACTERIOLOGICAL ANALYSIS - PUBLIC WATER SYSTEM

Laboratory ID #: 37501 County: Cabarrus
Water System ID #: 01-13-405
Name of System: Miami Baptist Church
Sample Type: 5 (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)
Collected on: DATE: 08/17/10 TIME: 10:10 AM
Location where collected: Well Head
Location Type: 4 (1 = Entry Tap; 2 = General Tap; 3 = End Tap; 4 = Source/Intakes; 5 = Other)
Location Code: S01 Collected By: P. Judge - PWSS

FOR REPEAT SAMPLE:

Previous Positive Location Code: _____
Positive Collection Date: _____
Time: _____
Proximity: (1 = Same; 2 = Upstream; 3 = Downstream)

FOR REPLACEMENT SAMPLE:

Original Sample Type:
(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)
Original Collection Date: _____
Time: _____

Mail Results To:

MOORESVILLE REGIONAL OFFICE PWSS
610 EAST CENTER AVENUE
MOORESVILLE, NC 28115

Telephone No. **704-663-1699**

Type of Supply:

Community NTNC
 Non-Community Private

Type of Treatment:

Chlorinated
 Non-Chlorinated
Free Chlorine Residual: 0.00 mg/l
Total Chlorine Residual: 0.00 mg/l

RESULTS

CONTAMINANT	METHOD	PRESENT	ABSENT	INVALID
Total Coliform	<u>Colisure</u>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>
Fecal/E. Coli	_____	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Heterotrophic P.C.	_____	_____/ml		
		(number)		

Repeat Samples Required

Date Analysis Begun: 08/18/10
Date Analysis Completed: 08/19/10
Laboratory Log #: 19685

COMMENTS: Investigate TCV

INVALID CODES

- 1) Confluent Growth/No Coliform Found
- 2) TNTC/No Coliform Found
- 3) Turbid Culture/No Coliform Found
- 4) Over 30 Hours Old
- 5) Improper Sample or Analysis

Replacement Samples Required

Time Analysis Begun: 08:30 AM
Time Analysis Completed: 09:50 AM
Certified By: Joy Hayes

