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 #: Water System ID #: Name of System:	02-	<u>501</u> 01-410 DTT COMMUN	County:	ALAMA	NCE				
Sample Type:	_	5 (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)							
	ATE: 08/2	21/14	TIME: 09:55 AM						
Location Type: Location Code:		(1 = Entry Tap; 2 = General Tap; 3 = End Tap; 4 = Source/Intakes; 5 = Other) Collected By: Blair Murray							
FOR REPEAT SAMPLE:					FOR REPLACEMENT SAMPLE:				
Previous Positive Collect Proximity: (1 = Same; 2 =	ction Date: Time:				(1=Rout	I Sample Type: tine; 2=Repeat; 3=I I Collection Date Time		; 4=Other) 	
Mail Results To: WINSTON SALEM REGIONAL OFFICE PWS WINSTON SALEM, NC 27107-2241 Telephone No. 336-771-5000 EIN #: 56 6000372 XX COURIER #:				Type c	of Supply:	Non-	nity	NTNC Private	
	00372 XX		IER #. 13-13	3-0 I		Total Chlo	orine Residua	al:	
RESULTS					INVALID CODES				
CONTAMINANT METHOD PRESENT ABSENT Total Coliform Fecal/E. Coli Heterotrophic P.C. METHOD PRESENT ABSENT X				INVALID		 Confluent Growth/No Coliform Found TNTC/No Coliform Found Turbid Culture/No Coliform Found Over 30 Hours Old Improper Sample or Analysis 			
Repeat Samples Required						Replacement Samples Required			
Date Analysis Begun Date Analysis Compl Laboratory Log #:		21/14 22/14				Time Analysis C Time Analysis C Certified By:	Completed: Susan	14:20 PM 08:40 AM Beasley	
COMMENTS:	Special / Non-compliance (SP), Water Source: GW, System Type: TNC,								
	Sample Point: W01								