DO NOT WRITE IN THIS SPACE

BACTERIOLOGICAL ANALYSIS - PUBLIC WATER SYSTEM

Laboratory ID #: Water System ID #:		<u>37501</u> 02-85-515	County:	STOKES	_		
Name of System:		HILLBILLY HIDE AWAY					
Sample Type:		—	2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)				
	ATE:						
Location where colle		WELL HEAD					
Location Type:		_	; 2 = General T	Гар; 3 = End Tap; 4 =	Source/Intakes; 5 = Other)		
Location Code:			Collected E	By: Blair N	lurray		
FOR REPEAT SAME	PLE:			FOR REPLAC	CEMENT SAMPLE:		
Previous Positive Location Code:				Original Sample Type:			
Positive Collection Date:				(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)			
Time:				Orig	Original Collection Date:		
Proximity:					Time		
(1 = Same; 2 =	Upstream;	3 = Downstream)					
Mail Results To: Type of Supply:							
WINSTON SALEM REGIONAL OFFICE PWSS					Community	NTNC Private	
WINSTON SALEM, NC 27107-2241 Type of Treatment: Chlorinated							
Telephone No. 336-771-5000 Non-Chlorinated							
EIN #: 56 60	00372 X)	K COUF	RIER #: 13-1	5-01	Free Chlorine Residua Total Chlorine Residua		
RESULTS				INVALID CODES			
CONTAMINANT METHOD PRESENT ABSENT III Total Coliform 9223B III III Fecal/E. Coli III III III Heterotrophic P.C. /ml /ml				 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: 08/24/16					Time Analysis Begun:	09:25 AM	
Date Analysis Comp	leted:	08/25/16			Time Analysis Completed:	09:55 AM	
Laboratory Log #:	-				Certified By: Susan	Beasley	
COMMENTS:	Special / Non-compliance (SP), System Type: TNC, Water Source: GW.						
	Disinfectant Used: Cl2, Sample Point: W01						