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: CAF   | RTERET  |                                 |  |
|---|---------------------------------------|---|---|---------------------------------|--|
| Water System ID #:  | 04-16-508                             |   |   |                                 |  |
| Name of System:   | GRACE PRESE                           | GRACE PRESBYTERIAN CHURCH                                     |   |                                 |  |
| Sample Type: [5] (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other) |                                       |   |   |                                 |  |
| Collected on: DATE:   | ted on: DATE: 08/24/16 TIME: 10:29 AM |   |   |                                 |  |
| ocation where collected: MENS ROOM SINK   |                                       |   |   |                                 |  |
| Location Type:  | (1 = Entry Ta                         | ap; 2 = General Tap; 3 = E                                    | End Tap; 4 = Source/Intakes; 5 = Other)         |                                 |  |
| Location Code:  |                                       | Collected By:   | Allen Baker                                     |                                 |  |
| FOR REPEAT SAMPLE:  |                                       | FC  | OR REPLACEMENT SAMPLE:                          |                                 |  |
| Previous Positive Location Code:  |                                       |   | Original Sample Type:                           |                                 |  |
| Positive Collection Date:   |                                       |   | (1=Routine; 2=Repeat; 3=Plan Approval; 4=Other) |                                 |  |
| Time:   |                                       |   | Original Collection Date:                       |                                 |  |
| Proximity:  |                                       |   | <br>Time  | Time                            |  |
| (1 = Same; 2 = Upst   | ream; 3 = Downstream)                 |   |   | _                               |  |
| Mail Results To:  |                                       | Ту  | /pe of Supply:                                  |                                 |  |
| WILMINGTON REGIONAL OFFICE PWSS Community NTNC  |                                       |   |   |                                 |  |
| 127 CARDINAL DRIVE EXTENSION Non-Community Private  |                                       |   |   |                                 |  |
| WILMINGTON, NC 28405 Type of Treatment: Chlorinated                                       |                                       |   |   |                                 |  |
| Telephone No. 9107967215 Non-Chlorinated  |                                       |   |   |                                 |  |
| EIN #: 56600037   |                                       | JRIER #: 41-63-33   | Free Chlorine Residua                           | ıl:                             |  |
| EIN #. 56600037   | 2Q COC                                | IRIER #. 41-63-33   | Total Chlorine Residua                          | al:                             |  |
| RESULTS   |                                       |   | INVALID CODES                                   |                                 |  |
| Total Coliform 9  | 223B X<br>223B —                      | 2) TNTC/No Coliform Found 3) Turbid Culture/No Coliform Found |   |                                 |  |
| Repeat Samples Req  |                                       | Replacement Samples F   | Replacement Samples Required                    |                                 |  |
| Date Analysis Begun:<br>Date Analysis Completed<br>Laboratory Log #:                      | 08/25/16<br>: 08/26/16                |   |   | 08:00 AM<br>08:00 AM<br>Beasley |  |
| COMMENTS: Spec  | cial / Non-compliance (S              | SP), System Type: TNC, \                                      | Water Source: GW                                | Beasley                         |  |