N.C. Department of Environmental, Health, and Natural Resources Division of Laboratory Services State Laborabory of Public Health P.O.Box 28047 - 306 N. Wilmington Street Raleigh, NC 27611-8047

DO NOT WRITE IN THIS SPACE

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

Laboratory ID #: Water System ID #: Name of System:	37501 04-65-153 Town & Country	County: N	ew Hanover		
Sample Type:					
Collected on: DATE:	08/29/11	TIME: 11:35		,	
Location where collected:	Lot #53 Outside 1	 Tap			
Location Type:	(1 = Entry Tap;	2 = General Tap;	3 = End Tap; 4 = So	ource/Intakes; 5 = Other)	
Location Code:		Collected By:	Heidi Co	<u>x</u>	
FOR REPEAT SAMPLE:			FOR REPLACEM	MENT SAMPLE:	
Previous Positive Loca	tion Code:		Original	Sample Type:	
Positive Collection Date	(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)				
Time	 e:		Original	Collection Date:	
Proximity:			_	Time:	
(1 = Same; 2 = Upstream	; 3 = Downstream)				
Mail Results To:			Type of Supply:		
WILMINGTON REGI	ONAL OFFICE P	NSS	[ ]	X Community NTNC Non-Community Private	
WILMINGTON, NC 2	8405-3845		Type of Treatmen	nt: Chlorinated	
Telephone No. 910-796-7215 Non-Chlorinated					
EIN #: 56 2033372 Q		IER #: 04-16-33	3	Free Chlorine Residual: 1.36 mg/	
	RESULTS			INVALID CODES	
CONTAMINANT METHO Total Coliform 92238 Fecal/E. Coli Heterotrophic P.C.		ABSENT INV	VALID □	<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 Required	
Date Analysis Begun: Date Analysis Completed: Laboratory Log #:	08/30/11 08/31/11 29956			Time Analysis Begun:  Time Analysis Completed:  Certified By:  Susan Beasley	
COMMENTS: Special/	Non-compliance			Trean Brasley	