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 #:	37501 03-63	County:	MOORE	<u> </u>		
Name of System:	LEGACY GOLF I	 INKS				
Sample Type:						
Collected on: DATE:	08/31/15 TIME: 11:20 AM					
Location where collected:	MEN'S REST ROOM					
Location Type:	(1 = Entry Tap; 2 = General Tap; 3 = End Tap; 4 = Source/Intakes; 5 = Other)					
Location Code:		Collected E		arlton Smith		
FOR REPEAT SAMPLE:			FOR RE	EPLACEMENT 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:				Time		
(1 = Same; 2 = Upstream	; 3 = Downstream)					
Mail Results To: Type of Supply:						
FAYETTEVILLE REGIONAL OFFICE PWSS						
225 GREEN ST STE 714 Non-Community Private						
FAYETTEVILLE, NO	28301		Type of	Treatment: Chlorinated		
Telephone No.			. , po o.	Non-Chlorinated		
-	COUR	IED #. 44 E	C 40	Free Chlorine Residua	al:	
EIN #: 562033116M	COUR	IER #: 14-5	6-4 8	Total Chlorine Residu	al:	
RESULTS				INVALID CODES		
CONTAMINANT METHOTOTOTOTOTOTOTOTOTOTOTOTOTOTOTOTOTOTO	<u>X</u>	ABSENT X /ml	INVALID	 Confluent Growth/No Col TNTC/No Coliform Found Turbid Culture/No Colifor Over 30 Hours Old Improper Sample or Anal 	d rm Found	
Repeat Samples Required				Replacement Samples F	Replacement Samples Required	
Date Analysis Begun:	09/01/15			Time Analysis Begun:	09:20 AM	
Date Analysis Completed: 09/02/15 Laboratory Log #:				Time Analysis Completed:	09:30 AM	
COMMENTS: Special/N	Ion-compliance, Syst	em Type:TNC		Tuesan	Baaley	