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:	SAMPSON	
Water System ID #:	03-82-070			
Name of System: SAMPSON CO II - DUNN				
Sample Type:	5 (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)			
Collected on: DATE:	09/03/14	TIME: 11:1	0 AM	
Location where collected:	HOLLERIN RD / 4	21		
Location Type:	(1 = Entry Tap; 2 = General Tap; 3 = End Tap; 4 = Source/Intakes; 5 = Other)			
Location Code:		Collected By:	Byron Re	eves
FOR REPEAT SAMPLE:			FOR REPLACE	EMENT SAMPLE:
Previous Positive Loc	ation Code:		Origina	al Sample Type:
Positive Collection Da	(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)			
Tin	ne:		Origina	al Collection Date:
Proximity:				Time
(1 = Same; 2 = Upstrear	m; 3 = Downstream)			
Mail Results To: Type of Supply:				
WILMINGTON REG	IONAL OFFICE P	NSS		Community NTNC Non-Community Private
WILMINGTON, NC 28405-3845 Type of Treatment: Chlorinated				
Telephone No.	910-796-7215			Non-Chlorinated
EIN #: 56 2033372 (Q COUR	IER #: 04-16-3	33	Free Chlorine Residual:mg. Total Chlorine Residual:64 mg.
	RESULTS			INVALID CODES
CONTAMINANT METH Total Coliform 9223 Fecal/E. Coli Heterotrophic P.C.		ABSENT II X /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 Require	ed			Replacement Samples Required
Date Analysis Begun: 09/04/14				Time Analysis Begun: 08:20 AM
Date Analysis Completed: 09/05/14			Time Analysis Completed: 08:25 AM	
Laboratory Log #:				Certified By: Susan Beasley
COMMENTS: Special	/ Non-compliance (SP)), System Type: (C, Water Source: PS	SW. Trean Braaley

Disinfectant Used: Chloramines.