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

DO NOT WRITE IN THIS SPACE

BACTERIOLOGICAL ANALYSIS - PUBLIC WATER SYSTEM

Laboratory ID #:	<u>37501</u>	County:	Montgomery	
Water System ID #:	03-62-561			
Name of System:	White Crest C	White Crest Church		
Sample Type:	5 (1 = Routin	(1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)		
Collected on: DAT	TE: 09/09/13	TIME: 09:30	AM	
Location where collecte	ed: Well house tap	•		
Location Type:	(1 = Entry 1	Tap; 2 = General Tap;	3 = End Tap; 4 = So	urce/Intakes; 5 = Other)
Location Code:		Collected By:	Carlton Sm	<u>ith</u>
FOR REPEAT SAMPL	E:		FOR REPLACEM	ENT SAMPLE:
Previous Positive Location Code:		Original Sample Type:		
Positive Collection	_	(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)		
Time:		Original Collection Date:		
Proximity:			3 3	Time:
· —	ostream; 3 = Downstream)		·
Mail Results To:			Type of Supply:	
FAYETTEVILL	E REGIONAL OFFIC	CE PWSS	Г	Community NTNC
225 GREEN S			Ī	Non-Community Private
			T of T t	
FAYETTEVILL	•		Type of Treatmer	nt: Chlorinated Non-Chlorinated
Telephone No	. 9104861191			Free Chlorine Residual: 0 mg/
EIN #: 562033	116M CO	URIER #: 14-56-48	8	Total Chlorine Residual: 0 mg/l
	RESULTS			INVALID CODES
CONTAMINANT I	METHOD PRESENT	Γ ABSENT IN'	VALID	1) Confluent Growth/No Coliform Found
Total Coliform	9223B X			2) TNTC/No Coliform Found
Fecal/E. Coli	9223B	X		3) Turbid Culture/No Coliform Found 4) Over 30 Hours Old
Heterotrophic P.C		/ml		5) Improper Sample or Analysis
	(numb	er)		
Repeat Samples Required				Replacement Samples Required
Date Analysis Begun: 09/10/13				Time Analysis Begun: 08:50 AM
Date Analysis Completed: 09/11/13				Time Analysis Completed: 10:15 AM
Laboratory Log #:				Certified By: Susan Beasley
COMMENTS: <u>S</u>	pecial / Non-complianc	e (SP), System Typ	e: TNC, Outside ta	p hard TreanBrasley
to	control flow.			