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 #: Water System ID #:		<u>37501</u>	County:	Wayn	ne			
		04-96-065						
Name of System:		Wayne Water Di						
Sample Type:	DATE:	(1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other) 09/11/13						
	DATE:	09/11/13	TIME: _1	14:15 PW				
Location where coll	ected:	Well No 5	v 2 = Conorol	Ton: 2 - End	Tany 4 - Course/Intokeey 5 -	Othor\		
Location Type:		[(I = Entry rap		•	Tap; 4 = Source/Intakes; 5 =	Otrier)		
Location Code:			Collected	Бу.	Joey White			
FOR REPEAT SAM		FOR REPLACEMENT SAMPLE:						
Previous Positive Location Code:					Original Sample Type:			
Positive Colle	ection Date		(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)					
		Original Collection Date:						
Proximity:			Time:					
(1 = Same; 2 =	 = Upstream;	3 = Downstream)					_	
Mail Results To: WASHINGTON REGIONAL OFFICE 943 WASHINGTON SQUARE MA WASHINGTON, NC 27889 Telephone No. 2529466481 EIN #: 562033116F CO RESULTS CONTAMINANT METHOD PRESENT Total Coliform Fecal/E. Coli			Type of Treatment: Chlorinated Non-Community Private Type of Treatment: Chlorinated Non-Chlorinated Free Chlorine Residual: Total Chlorine Residual: INVALID CODES			Private al: iform Found		
Heterotrophic P.C.		(number	/ml 5) Improper Sample or Analys			ysis		
Repeat Samples Required					Replaceme	Replacement Samples Required		
Date Analysis Begu Date Analysis Com Laboratory Log #:	_	09/12/13 09/13/13			Time Analysis E Time Analysis C Certified By:	Completed: Susan I	09:00 AM 09:20 AM Beasley	
COMMENTS:	Special /	Special / Non-compliance (SP), Water Source: GW, Disinfectant Used:						
	Raw - none							