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 #:	3 7 5 0 1 04-16-191	County:	CARTE	RET		
Name of System:	BIG RIDGE MHP					
Sample Type: [5] (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)						
Collected on: DATE:	09/26/17	TIME:12	:15 PM			
Location where collected:	ENTRY					
Location Type:	(1 = Entry Tap;	2 = General Ta	ap; 3 = End	Tap; 4 = Source/Intakes; 5 = Other)		
Location Code:		Collected B	sy:	Bryan Lievre		
FOR REPEAT SAMPLE:			FOR F	REPLACEMENT 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	m; 3 = Downstream)					
Mail Results To: Type of Supp				of Supply:		
WILMINGTON REGIONAL OFFICE PWSS				X Community	NTNC	
127 CARDINAL DR	IVE EXTENSION			Non-Community	Private	
WILMINGTON, NC			Type	of Treatment: X Chlorinated		
			Туре	Non-Chlorinated	d	
Telephone No. 9107967215 EIN #: 566000372Q COURIER #: 04-1			6-33	Free Chlorine Residu Total Chlorine Residu	ual: 0.18 mg	
				Total Official Control		
RESULTS				INVALID CODES		
CONTAMINANT METHOD PRESENT ABSENT INVALID Total Coliform Fecal/E. Coli Heterotrophic P.C. Total Coliform Fecal/E. Coli (number)			 Confluent Growth/No Coliform Found TNTC/No Coliform Found Turbid Culture/No Coliform Found Over 30 Hours Old Improper Sample or Analysis 			
Repeat Samples Required				Replacement Samples	Replacement Samples Required	
Date Analysis Begun: Date Analysis Completed: Laboratory Log #: COMMENTS: Special		, Water Source	e: GW		09:20 AM 09:25 AM Beasley	