N.C. Department of Environmental, Health, and Natural Resources Division of Laboratory Services State Laborabory of Public Health P.O.Box 28047 - 306 N. Wilmington Street Raleigh, NC 27611-8047

DO NOT WRITE IN THIS SPACE

## **BACTERIOLOGICAL ANALYSIS - PUBLIC WATER SYSTEM**

Laboratory ID #:	<u>37501</u>	County:	LENOIF	₹	
Water System ID #:	04-54-025				
Name of System:	North Lenoir Water Corp				
Sample Type:	(1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)				
Collected on: DATE:	09/28/10	TIME: 14	:00 PM		
Location where collected: 4671 Braxton Road					
Location Type:	2 (1 = Entry Tap	; 2 = General	Гар; 3 = End T	ap; 4 = Source/Intakes; 5 = Other)	
Location Code:	_	Collected E	By: <b>Ja</b> i	mie Midgette	
FOR REPEAT SAMPLE:			FOR RE	EPLACEMENT SAMPLE:	
Previous Positive Location Code:			Original Sample Type:		
Positive Collection Da		(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)			
Tin		Original Collection Date:			
Proximity:			Time:		
(1 = Same; 2 = Upstream	m; 3 = Downstream)				
Mail Results To:			Type of	Supply	
Mail Nesults 10.			Type of	Supply:	
WASHINGTON RE	GIONAL OFFICE I	PWSS			NTNC
				Non-Community	Private
WASHINGTON, NO	27889		Type of	Treatment: X Chlorinated	
				Non-Chlorinated	
Telephone No.	252-946-6481			Free Chlorine Residua	l: mg/
				Total Chlorine Residua	al: 1.1 mg/
	RESULTS			INVALID CODES	
CONTANANT		ADOENT	INIV/ALID		fama Farmal
CONTAMINANT METH	IOD PRESENT	ABSENT	INVALID	<ol> <li>Confluent Growth/No Coli</li> <li>TNTC/No Coliform Found</li> </ol>	
Total Coliform Fecal/E. Coli	— H	H	H	3) Turbid Culture/No Coliforn	
Heterotrophic P.C. 330	 )	⊔ 3 /ml	Ш	4) Over 30 Hours Old	
	(number)			5) Improper Sample or Analy	ysis
Repeat Samples Require	ed			Replacement Samples R	Required
Date Analysis Begun:	09/29/10			Time Analysis Begun:	10:55 AM
Date Analysis Completed:	10/01/10			Time Analysis Completed:	10:00 AM
Laboratory Log #:	21002			Certified By: Susan I	Beasley
COMMENTS: UDO #	2				Beasley
COMMENTS: HPC #	ა 			Cusan	The state of the s