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 04-16-163	County:	CARTERET		
Name of System:	BRANDYWINE BAY				
Sample Type:	5 (1 = Routine; 2	(1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)			
Collected on: DATE:	10/01/14	TIME: 08:2	0 AM		
Location where collected:	807 BROADMOO	R CT			
Location Type:	(1 = Entry Tap;	2 = General Ta	p; 3 = End Tap; 4 = S	ource/Intakes; 5 = Other)	
Location Code:		Collected By	Steve We	est	
FOR REPEAT SAMPLE:			FOR REPLACE	MENT SAMPLE:	
Previous Positive Location Code: Origin			al Sample Type:		
Positive Collection Date: (1=Rout				tine; 2=Repeat; 3=Plan Approval; 4=Other)	
Tim	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	wss		Community NTNC Non-Community Private	
WILMINGTON, NC	28405-3845		Type of Treatme	ent: X Chlorinated	
Telephone No.	910-796-7215		3.	Non-Chlorinated	
EIN #: 56 2033372		IER #: 04-16-	33	Free Chlorine Residual: 0 mg. Total Chlorine Residual:	
	RESULTS			INVALID CODES	
CONTAMINANT Total Coliform Fecal/E. Coli Heterotrophic P.C.		ABSENT I	NVALID	 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 Required	
Date Analysis Begun: 10/02/14				Time Analysis Begun: 08:00 AM	
Date Analysis Completed:	10/03/14			Time Analysis Completed: 09:15 AM	
Laboratory Log #:				Certified By: Susan Beasley	
COMMENTS: Distribut	tion System - Total Col	iform Rule (TCR), Special / Non-comp	Diance Turn Brasley	
(SP), S)	stem Type: C, Water S	Source: G			