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 #:	37501 02-41-106	County:	GUILFORD			
Name of System:	CIRCLE M MHP	_				
ample Type: 5 (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)						
Collected on: DATE:	10/02/17	TIME: 12:36	PM			
Location where collected:	LOT 23					
Location Type:	(1 = Entry Tap;	2 = General Tap;	3 = End Tap; 4 = So	ource/Intakes; 5 = Other)		
Location Code:	023	Collected By:	Mike Pair	nter		
FOR REPEAT SAMPLE:			FOR REPLACE	MENT SAMPLE:		
Previous Positive Location Code:			Original Sample Type:			
Positive Collection Date:			(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)			
Time:			Origina	Original Collection Date:		
Proximity:				Time		
(1 = Same; 2 = Upstream	; 3 = Downstream)					
Mail Results To:			Type of Supply:			
WINSTON SALEM REGIONAL OFFICE PWSS				X Community	NTNC	
450 WEST HANES MILL RD STE 300 Non-Community					Private	
WINSTON SALEM, NC 27105 Type of Treatment: X Chlorinated						
Telephone No. 3367769800 Non-Chlorinated					ed	
EIN #: 566000372X		ER #: 13-15-0	1	Free Chlorine Reside		
RESULTS				INVALID CODES		
CONTAMINANT Total Coliform Fecal/E. Coli Heterotrophic P.C. METHO 92238 92238	<u> </u>	ABSENT IN X X /ml	VALID	 Confluent Growth/No C TNTC/No Coliform Four Turbid Culture/No Colifo Over 30 Hours Old Improper Sample or Ana 	nd orm Found	
Repeat Samples Required				Replacement Samples Required		
Date Analysis Begun: Date Analysis Completed: Laboratory Log #: COMMENTS: Special /	10/03/17 10/04/17 Non-compliance (SP)	Water Source: G	·W		08:30 AM 08:40 AM n Beasley	
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