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

Name of System:	Laboratory ID #: Water System ID #:	<u>3 7 5 0 1</u> 70-10-060	County:	Brunswick			
Sample Type: (= Routine; 2 = Repeat: 3 = Replacement; 4 = Plan Approval; 5 = Other)	•	-					
Collected on: DATE: 10/05/10							
Location where collected: Location Type: A		_			, pp.010., 0		
Location Type:							
Collected By: Allen Baker		_); 2 = General 1	ap; 3 = End Tap; 4 =	Source/Intakes; 5 = Other)		
FOR REPEAT SAMPLE: Previous Positive Location Code: Positive Collection Date: Time: Original Sample Type: (1=Routine; 2=Repeat; 3=Plan Approval; 4=Other) Original Collection Date: Time: Original Collection Date: Time: Original Collection Date: Time: (1 = Same; 2 = Upstream; 3 = Downstream) Mail Results To: WILMINGTON REGIONAL OFFICE PWSS WILMINGTON, NC 28405-3845 Type of Supply: WILMINGTON, NC 28405-3845 Type of Treatment: Chlorinated Non-Conmunity Private Total Chlorine Residual: Total Chlorine Residual: Total Chlorine Residual: Total Chlorine Residual: Total Coliform PRESENT ABSENT Total Coliform Found 1) Confluent Growth/No Coliform Found 2) TNTC/No Coliform Found 4) Over 30 Hours Old Heterotrophic P.C. (number) Repeat Samples Required Date Analysis Begun: 10/06/10 Time Analysis Completed: 10/07/10 Certified By: Joy Hayes							
Previous Positive Location Code: Positive Collection Date: Time: Original Collection Date: Time: Total Collection Date:							
Positive Collection Date:	FOR REPEAT SAMPLE:		FOR REPLACEMENT SAMPLE:				
Time: Original Collection Date: Time: Time	Previous Positive Loc	ation Code:		Origir	nal Sample Type:		
Proximity:	Positive Collection Da	te:	(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)				
Mail Results To: Community NTNC Non-Community Private	Tim	ne:	Original Collection Date:				
Mail Results To: WILMINGTON REGIONAL OFFICE PWSS WILMINGTON, NC 28405-3845 Telephone No. 910-796-7215 RESULTS Type of Treatment: Chlorinated Non-Chlorinated Free Chlorine Residual: Total Chlorine Residual: Total Coliform 9223B	Proximity:				Time:		
WILMINGTON, NC 28405-3845 WILMINGTON, NC 28405-3845 Type of Treatment: Chlorinated Non-Chlorinated Non-Chlorinate	(1 = Same; 2 = Upstrear	m; 3 = Downstream)					
WILMINGTON, NC 28405-3845 WILMINGTON, NC 28405-3845 Type of Treatment: Chlorinated Non-Chlorinated Non-Chlorinate	Mail Results To:	Type of Supply:					
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Telephone No. 910-796-7215 RESULTS INVALID CODES CONTAMINANT METHOD PRESENT ABSENT INVALID Total Coliform 9223B X X	WILMINGTON, NC	28405-3845		Type of Treatm	nent: Chlorinated		
RESULTS INVALID CODES CONTAMINANT METHOD PRESENT ABSENT INVALID Total Coliform 9223B Fecal/E. Coli 9223B Heterotrophic P.C. Repeat Samples Required Date Analysis Begun: 10/06/10 Date Analysis Completed: 10/07/10 Laboratory Log #: 21241 INVALID CODES 1) Confluent Growth/No Coliform Found 2) TNTC/No Coliform Found 3) Turbid Culture/No Coliform Found 4) Over 30 Hours Old 5) Improper Sample or Analysis Replacement Samples Required Time Analysis Begun: 08:15 AM Time Analysis Completed: 09:30 AM Certified By: Joy Hayes					=	d	
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COMMENTS:	COMMENTS:				- Jug	R. Hayes	