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 #:	<u>37501</u>	County:	ALAMANCE			
Water System ID #: 02-01-489						
Name of System:	ame of System: PLEASANT GROVE REC CENTER					
Sample Type:	5 (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)					
Collected on: DATE:	10/06/14	TIME: 08:45	AM			
Location where collected:						
Location Type:	(1 = Entry Tap; 2 = General Tap; 3 = End Tap; 4 = Source/Intakes; 5 = Other)					
Location Code:	<u>E 01</u>	Collected By:	Blair Mu	rray		
FOR REPEAT SAMPLE:			FOR REPLACE	MENT SAMPLE:		
Previous Positive Loca	Original Sample Type:					
Positive Collection Date:			(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)			
Time: O			Origin	inal Collection Date:		
Proximity:			Time			
(1 = Same; 2 = Upstream	; 3 = Downstream)					
Mail Results To: Type of Supply:						
WINSTON SALEM REGIONAL OFFICE PWSS					NTNC Private	
WINSTON SALEM, NC 27107-2241 Type of Treatment: Chlorinated						
Telephone No. 336-771-5000 Non-Chlorinated						
EIN #: 56 6000372 XX COURIER #: 13-15-01			1	Free Chlorine Residual:		
				Total Chlorine Residua	l:	
RESULTS				INVALID CODES		
CONTAMINANT METHOD PRESENT ABSENT INVALID Total Coliform 9223B Image: Colimon for the second				 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:	10/07/14			Time Analysis Begun:	09:00 AM	
Date Analysis Completed:	10/08/14			Time Analysis Completed:	09:15 AM	
Laboratory Log #:				Certified By: Susan E		
COMMENTS: Special / Non-compliance (SP), System Type: TNC, Disinfectant Used: N/A,						

Water Source: GW