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: CUMBERLAND                  |                                                                                                                                                                                                  |  |
|-----------------------------------------------------------------------|----------------------------------------------------------------------------|-------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|--|
| Water System ID #:                                                    | 03-26-682                                                                  |                                     |                                                                                                                                                                                                  |  |
| Name of System:     SAVANNAH BAPTIST CHURCH                           |                                                                            |                                     |                                                                                                                                                                                                  |  |
| Sample Type:                                                          | 5 (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other) |                                     |                                                                                                                                                                                                  |  |
| Collected on: DAT                                                     |                                                                            | TIME: 10:44 AM                      |                                                                                                                                                                                                  |  |
| Location where collecte                                               |                                                                            |                                     |                                                                                                                                                                                                  |  |
| Location Type:                                                        | (1 = Entry Tap;                                                            | 2 = General Tap; 3 = End Tap; 4 = S |                                                                                                                                                                                                  |  |
| Location Code:                                                        |                                                                            | Collected By: Winston C             |                                                                                                                                                                                                  |  |
| FOR REPEAT SAMPLI                                                     | E:                                                                         | FOR REPLACE                         | MENT SAMPLE:                                                                                                                                                                                     |  |
| Previous Positive                                                     | e Location Code:                                                           | Origina                             | Il Sample Type:                                                                                                                                                                                  |  |
| Positive Collection                                                   | on Date:                                                                   | (1=Rou                              | tine; 2=Repeat; 3=Plan Approval; 4=Other)                                                                                                                                                        |  |
|                                                                       | Time:                                                                      | Origina                             | I Collection Date:                                                                                                                                                                               |  |
| Proximity:                                                            |                                                                            |                                     | Time                                                                                                                                                                                             |  |
| (1 = Same; 2 = Up                                                     | ostream; 3 = Downstream)                                                   |                                     |                                                                                                                                                                                                  |  |
| Mail Results To: Type of Supply:                                      |                                                                            |                                     |                                                                                                                                                                                                  |  |
| FAYETTEVILL                                                           | E REGIONAL OFFICE I                                                        | PWSS                                | Community NTNC                                                                                                                                                                                   |  |
| 225 GREEN S                                                           | TRFFT                                                                      |                                     | Non-Community Private                                                                                                                                                                            |  |
|                                                                       |                                                                            |                                     |                                                                                                                                                                                                  |  |
|                                                                       |                                                                            |                                     |                                                                                                                                                                                                  |  |
| Telephone No                                                          |                                                                            |                                     | Free Chlorine Residual:                                                                                                                                                                          |  |
| EIN #: 562033 <sup>,</sup>                                            | 116M COURI                                                                 | IER #: 14-56-48                     | Total Chlorine Residual:                                                                                                                                                                         |  |
|                                                                       | RESULTS                                                                    |                                     | INVALID CODES                                                                                                                                                                                    |  |
| CONTAMINANT M<br>Total Coliform<br>Fecal/E. Coli<br>Heterotrophic P.C | METHOD PRESENT                                                             | ABSENT INVALID                      | <ol> <li>Confluent Growth/No Coliform Found</li> <li>TNTC/No Coliform Found</li> <li>Turbid Culture/No Coliform Found</li> <li>Over 30 Hours Old</li> <li>Improper Sample or Analysis</li> </ol> |  |
| Repeat Samples Re                                                     | equired                                                                    |                                     | Replacement Samples Required                                                                                                                                                                     |  |
| Date Analysis Begun:<br>Date Analysis Complet<br>Laboratory Log #:    | ed:                                                                        |                                     | Time Analysis Begun:      : AM         Time Analysis Completed:      : AM         Certified By:       Susan Beasley                                                                              |  |
| COMMENTS: <u>Sa</u>                                                   | Sample received 10/09/14 @ 15:09 PM; Too Old - Sample over 30 hours old    |                                     |                                                                                                                                                                                                  |  |

when received.