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

DO NOT WRITE IN THIS SPACE

## **BACTERIOLOGICAL ANALYSIS - PUBLIC WATER SYSTEM**

Laboratory ID #: Water System ID #:		3 7 5 0 1 02-01-569	County:	Alama	ance			
Name of System:		Burlington Moos						
Sample Type:					ent; 4 = Plan Approval; 5 = Ot	ner)		
	DATE:	10/09/13	TIME: _1	10:11 AM				
Location where coll	ected:	Well head						
Location Type:		1 = Entry Tap			d Tap; 4 = Source/Intakes; 5 =	Other)		
Location Code:			Collected	By:	Blair Murray			
FOR REPEAT SAM			FOR	REPLACEMENT SAMPLE	:			
Previous Positive Location Code:					Original Sample Type:	П		
Positive Collection Date:			(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)					
Time:			Original Collection Date:					
Proximity:								
-	 = Upstream;	3 = Downstream)						
Mail Results To:	EGIONAL OFFI	Type of Supply:  CE PWSS						
	SALEM, N	IC 27107-2241 36-771-5000	RIER #: 13-		Non-Comm of Treatment: Chl No Free Chl	unity	Private	
		RESULTS			INVALID CO	DES		
CONTAMINANT METHOD PRESENT ABSENT INVALID  Total Coliform  9223B  Fecal/E. Coli  Heterotrophic P.C.  (number)				2) TNTC/No C 3) Turbid Cultu 4) Over 30 Ho	<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 Required					Replaceme	Replacement Samples Required		
Date Analysis Begu Date Analysis Com Laboratory Log #:	-	10/10/13			Time Analysis Time Analysis Certified By:	Completed:	08:03 AM 09:25 AM Beasley	
COMMENTS:	Special / Non-compliance (SP), System Type: TNC, Water Source:							
	GW, Sar	GW, Sample Point: W01, Disinfectant Used: NA						