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:	MOO	RE
Water System ID #:	50-63	_		
Name of System: LEGACY GOLF LINK				
Sample Type:	5 (1 = Routine; 2	= Repeat; 3	= Replaceme	ent; 4 = Plan Approval; 5 = Other)
Collected on: DATE:	10/14/15	TIME: _1	2:45 PM	
Location where collected:	BAR TAP			
Location Type:	(1 = Entry Tap;			I Tap; 4 = Source/Intakes; 5 = Other)
Location Code:		Collected	By:	Carlton Smith
FOR REPEAT SAMPLE:			FOR	REPLACEMENT SAMPLE:
Previous Positive Loca	tion Code:			Original Sample Type:
Positive Collection Dat			(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)	
Time	e:			Original Collection Date:
Proximity:				Time
(1 = Same; 2 = Upstream	; 3 = Downstream)			
Mail Results To:			Туре	of Supply:
FAYETTEVILLE RE	GIONAL OFFICE	PWSS		☐ Community ☐ NTNC
225 GREEN ST STE	714			Non-Community Private
FAYETTEVILLE, NO	28301		Tyne	of Treatment:
Telephone No.			1,700	Non-Chlorinated
-	COUR	IED #. 44 /	-0.40	Free Chlorine Residual: 0 mg.
EIN #: 562033116M	COUR	IER #: 14-	06-48	Total Chlorine Residual: 0 mg/
RESULTS				INVALID CODES
CONTAMINANT METHO	DD PRESENT	ABSENT	INVALID	1) Confluent Growth/No Coliform Found
Total Coliform 9223I	в	X		2) TNTC/No Coliform Found
Fecal/E. Coli				Turbid Culture/No Coliform Found Over 30 Hours Old
Heterotrophic P.C.		/ml		5) Improper Sample or Analysis
	(number)			, , , , , , , , , , , , , , , , , , , ,
Repeat Samples Required	d			Replacement Samples Required
Date Analysis Begun: 10/15/15				Time Analysis Begun: 08:30 AM
Date Analysis Completed: 10/16/15				Time Analysis Completed: 08:35 AM
Laboratory Log #:				Certified By: Susan Beasley
COMMENTS: Specia/ N	Non-compliance, Systo	em Type: TN	C	Turan Baarley