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:	NEW HANC	OVER		
Water System ID #:	ter System ID #: 70-65-059					
Name of System: PRINGLE DENTISTRY						
Sample Type:	5 (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)					
Collected on: DATE:	10/15/14 TIME: 11:07 AM					
Location where collected:	DR PRINGLES BATHROOM					
Location Type:	(1 = Entry Tap; 2 = General Tap; 3 = End Tap; 4 = Source/Intakes; 5 = Other)					
Location Code:		Collected	Ву:	Allen Baker		
FOR REPEAT SAMPLE: FOR RE			EPLACEMENT SAMPLE:	ACEMENT SAMPLE:		
Previous Positive Location Code:			Original Sample Type:			
Positive Collection Date:				(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)		
Time:				Original Collection Date:		
Proximity:			Time	Time		
(1 = Same; 2 = Upstream	; 3 = Downstream)				_	
Mail Results To: Type of Supply:						
WILMINGTON REGIONAL OFFICE PWSS						
WILMINGTON, NC 28405-3845 Type of Treatment: Chlorinated						
Telephone No. 910-796-7215				Non-Chlorinated		
EIN #: 56 2033372 Q COURIER #: 04-16-33			16-33	Free Chlorine Residual:		
				Total Chlorine Residual:		
RESULTS			INVALID CODES			
CONTAMINANT METHOD PRESENT ABSENT INVALID Total Coliform Colisure X Image: Coliser of the second s			 2) TNTC/No Coliform Found 3) Turbid Culture/No Coliform 4) Over 30 Hours Old 	3) Turbid Culture/No Coliform Found		
Repeat Samples Required				Replacement Samples Re	Replacement Samples Required	
Date Analysis Begun:	10/16/14			Time Analysis Begun:	07:55 AM	
Date Analysis Completed: 10/17/14				Time Analysis Completed:	09:00 AM	
Laboratory Log #:				Certified By: Susan B		
COMMENTS: Special / Non-compliance (SP), System Type: TNC, Water Source: GW,						

Disinfectant Used: N/A.