

## BACTERIOLOGICAL ANALYSIS - PUBLIC WATER SYSTEM

Laboratory ID #: **37501** County: **Moore**  
Water System ID #: **50-63-020**  
Name of System: **Sandhills Teen Challenge**  
Sample Type: **5** (1 = Routine; 2 = Repeat; 3 = Replacement; 4 = Plan Approval; 5 = Other)  
Collected on: DATE: **10/26/11** TIME: **14:30 PM**  
Location where collected: **Dorm 2 Men's restroom**  
Location Type: **2** (1 = Entry Tap; 2 = General Tap; 3 = End Tap; 4 = Source/Intakes; 5 = Other)  
Location Code: \_\_\_\_\_ Collected By: **Carlton Smith**

### FOR REPEAT SAMPLE:

Previous Positive Location Code: \_\_\_\_\_  
Positive Collection Date: \_\_\_\_\_  
Time: \_\_\_\_\_  
Proximity: ☐ (1 = Same; 2 = Upstream; 3 = Downstream)

### FOR REPLACEMENT SAMPLE:

Original Sample Type: ☐  
(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)  
Original Collection Date: \_\_\_\_\_  
Time: \_\_\_\_\_

### Mail Results To:

**FAYETTEVILLE REGIONAL OFFICE PWSS**

**225 GREEN STREET**

**FAYETTEVILLE, 28301-5043**

**Telephone No. 910-433-3000**

**EIN #: 56 2033116 M COURIER #: 14-56-25**

### Type of Supply:

☐ Community ☐ NTNC  
☒ Non-Community ☐ Private

### Type of Treatment:

☐ Chlorinated  
☒ Non-Chlorinated  
Free Chlorine Residual: 0 mg/l  
Total Chlorine Residual: 0 mg/l

### RESULTS

| CONTAMINANT        | METHOD          | PRESENT                  | ABSENT                              | INVALID                  |
|--------------------|-----------------|--------------------------|-------------------------------------|--------------------------|
| Total Coliform     | <b>Colisure</b> | <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> |
| Fecal/E. Coli      |                 | <input type="checkbox"/> | <input type="checkbox"/>            | <input type="checkbox"/> |
| Heterotrophic P.C. |                 |                          | /ml                                 |                          |
| (number)           |                 |                          |                                     |                          |

☐ Repeat Samples Required

Date Analysis Begun: **10/27/11**  
Date Analysis Completed: **10/28/11**  
Laboratory Log #: **31555**

COMMENTS: \_\_\_\_\_

### INVALID CODES

- 1) Confluent Growth/No Coliform Found
- 2) TNTC/No Coliform Found
- 3) Turbid Culture/No Coliform Found
- 4) Over 30 Hours Old
- 5) Improper Sample or Analysis

☐ Replacement Samples Required

Time Analysis Begun: **08:45 AM**  
Time Analysis Completed: **10:15 AM**  
Certified By: **Susan Beasley**

