N.C. Department of Environmental, Health, and Natural Resources Division of Laboratory Services State Laborabory of Public Health P.O.Box 28047 - 306 N. Wilmington Street Raleigh, NC 27611-8047

DO NOT WRITE IN THIS SPACE

BACTERIOLOGICAL ANALYSIS - PUBLIC WATER SYSTEM

Laboratory ID #: Water System ID #:	<u>3 7 5 0 1</u> 04-71-452	County:	Pender	_		
Name of System:	Mako's Raw Bar & Grill					
Sample Type:						
Collected on: DATE:	10/27/09 TIME: 12:36 PM					
Location where collected:	Hand Sink Back Right Of Kitchen					
Location Type:	2 (1 = Entry Tap; 2 = General Tap; 3 = End Tap; 4 = Source/Intakes; 5 = Other)					
Location Code:		Collected				
FOR REPEAT SAMPLE:			FOR REPLACEMENT SAMPLE:			
Previous Positive Location Code:			Orig	inal Sample Type:		
Positive Collection Date:		(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)			4=Other)	
Time:		Original Collection Date:				
Proximity:		Time:				
(1 = Same; 2 = Upstrear	m; 3 = Downstream)					
Mail Results To:			Type of Supp	ly:		
			, , , , , , , , , , , , , , , , , , ,	·	NTNC	
WILMINGTON REG	IONAL OFFICE P	WSS			Private	
WILMINGTON NO	20405 2045		T			
WILMINGTON, NC	20405-3045		Type of Treat	ment: Chlorinated X Non-Chlorinated		
Telephone No.	910-796-7215			Free Chlorine Residual	:	
				Total Chlorine Residua	-	
	RESULTS			INVALID CODES		
CONTAMINANT METH	OD PRESENT	ABSENT	INVALID	1) Confluent Growth/No Coli	form Found	
Total Coliform312	<u> </u>	X		2) TNTC/No Coliform Found3) Turbid Culture/No Coliforn	n Found	
Fecal/E. Coli	⊔		Ш	4) Over 30 Hours Old	ii i odiid	
Heterotrophic P.C.	(number	/ml 5) Improper Sample or Analysis				
	,					
Repeat Samples Required				Replacement Samples Required		
Date Analysis Begun:	10/28/09			Time Analysis Begun:	08:26 AM	
Date Analysis Completed:	10/29/09			Time Analysis Completed:	09:40 AM	
Laboratory Log #:	10570	0		Certified By: Susan Beasley		
COMMENTS:						