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: CUMI	MBERLAND	
Water System ID #:	03-26-682			
Name of System:	SAVANNAH BAP	Т		
Sample Type:	5 (1 = Routine; 2	? = Repeat; 3 = Replac	acement; 4 = Plan Approval; 5 = Other)	
Collected on: DATE:	10/28/14	TIME: 10:15 AM	AM_	
Location where collected:	FRONT MEN'S RE	ESTROOM		
Location Type:	(1 = Entry Tap;	; 2 = General Tap; 3 =	= End Tap; 4 = Source/Intakes; 5 = Other)	
Location Code:	2	Collected By:	Carlton Smith	
FOR REPEAT SAMPLE:		FC	FOR REPLACEMENT SAMPLE:	
Previous Positive Loca	tion Code:		Original Sample Type:	
Positive Collection Date:			(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:		Ту	Type of Supply:	
FAYETTEVILLE REC	GIONAL OFFICE	PWSS	☐ Community ☐ NTNC	
225 GREEN STREE	Г		X Non-Community Private	
FAYETTEVILLE, NC		Τ\	Type of Treatment:	
	104861191	. ,	X Non-Chlorinated	
EIN #: 562033116M		IER #: 14-56-48	Free Chlorine Residual: 0 r Total Chlorine Residual: 0 r	
	RESULTS		INVALID CODES	
CONTAMINANT METHO Total Coliform 9223E Fecal/E. Coli Heterotrophic P.C.		ABSENT INVAL	ALID 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	
Repeat Samples Required	d		Replacement Samples Required	
Date Analysis Begun: Date Analysis Completed: Laboratory Log #: COMMENTS:	10/29/14 10/30/14		Time Analysis Begun: 08:55 AM Time Analysis Completed: 09:00 AM Certified By: Susan Beasley	_