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: BR	UNSWICK
Water System ID #:	70-10-059		
Name of System:	LOCKWOOD FOLLY MARKET PLACE		
Sample Type:	5 (1 = Routine;	2 = Repeat; 3 = Repla	cement; 4 = Plan Approval; 5 = Other)
Collected on: DATE:	11/01/17	TIME: 09:39 AI	M
Location where collected:	3-COMP SINK		
Location Type:	(1 = Entry Tap	o; 2 = General Tap; 3 =	End Tap; 4 = Source/Intakes; 5 = Other)
Location Code:		Collected By:	Allen Baker
FOR REPEAT SAMPLE:		F	FOR REPLACEMENT SAMPLE:
Previous Positive Location Code:			Original Sample Type:
Positive Collection Date:			(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)
Tin	 ne:		Original Collection Date:
Proximity:			Time
(1 = Same; 2 = Upstream	m; 3 = Downstream)		
Mail Results To:		Т	Type of Supply:
WILMINGTON REG	IONAL OFFICE F	PWSS	Community NTNC
127 CARDINAL DR	IVE EXTENSION		Non-Community Private
WILMINGTON, NC 28405 Type of Treatment: Chlorinated			
	9107967215	·	Non-Chlorinated
·		DIED # 04.40.00	Free Chlorine Residual:
EIN #: 566000372Q	COU	RIER #: 04-16-33	Total Chlorine Residual:
	RESULTS		INVALID CODES
CONTAMINANT METH	IOD PRESENT	ABSENT INVA	LID 1) Confluent Growth/No Coliform Found
Total Coliform 9223	вв 🗌	x	2) TNTC/No Coliform Found
Fecal/E. Coli 9223	ВВ	X	3) Turbid Culture/No Coliform Found
Heterotrophic P.C.		/ml	4) Over 30 Hours Old 5) Improper Sample or Analysis
	(number	·)	o,p. op o
Repeat Samples Required			Replacement Samples Required
Date Analysis Begun:	11/02/17	Time Analysis Begun: 08:15 AM	
Date Analysis Completed:	11/03/17	Time Analysis Completed: 08:20 AM	
Laboratory Log #:			Certified By: Susan Beasley
COMMENTS: Special	/ Non-compliance (Si	P), System Type: TNC,	, Water Source: GW Turn Brasley