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 #: Water System ID #:	<u>37501</u> 02-01-489	County: ALAN			
Name of System: PLEASANT GRO		 /E REC CENTER			
Sample Type:					
Collected on: DATE:	 11/04/14 TIME: 12:45 PM				
Location where collected:					
Location Type:	(1 = Entry Tap;	2 = General Tap; 3 = E	nd Tap; 4 = Source/Intakes; 5 = Other)		
Location Code:	MB1	Collected By:	Blair Murray		
FOR REPEAT SAMPLE:		FOF	REPLACEMENT SAMPLE:		
Previous Positive Loca	tion Code:	Original Sample Type:			
Positive Collection Date	e:	(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: Type of Supply:					
WINSTON SALEM R	EGIONAL OFFIC	E PWSS	Community [ Non-Community [	NTNC Private	
WINSTON SALEM, NC 27107-2241 Type of Treatment: Chlorinated					
Telephone No. 3	36-771-5000		Non-Chlorinat	ed	
EIN #: 56 6000372 XX COURIER #: 13-15-0			Free Chlorine Residual:		
			Total Chlorine Resi	dual:	
	RESULTS		INVALID CODES		
CONTAMINANT       METHOD       PRESENT       ABSENT       INVALID         Total Coliform       9223B       Image: Coliform       Image: Coliform <td< td=""><td><ol> <li>2) TNTC/No Coliform Fou</li> <li>3) Turbid Culture/No Coli</li> <li>4) Over 30 Hours Old</li> </ol></td><td colspan="2"><ol> <li>Confluent Growth/No Coliform Found</li> <li>TNTC/No Coliform Found</li> <li>Turbid Culture/No Coliform Found</li> <li>Over 30 Hours Old</li> <li>Improper Sample or Analysis</li> </ol></td></td<>		<ol> <li>2) TNTC/No Coliform Fou</li> <li>3) Turbid Culture/No Coli</li> <li>4) Over 30 Hours Old</li> </ol>	<ol> <li>Confluent Growth/No Coliform Found</li> <li>TNTC/No Coliform Found</li> <li>Turbid Culture/No Coliform Found</li> <li>Over 30 Hours Old</li> <li>Improper Sample or Analysis</li> </ol>		
Repeat Samples Required			Replacement Sample	Replacement Samples Required	
Date Analysis Begun:	11/05/14		Time Analysis Begun:	08:25 AM	
Date Analysis Completed:	11/06/14		Time Analysis Completed	1: 08:40 AM	
Laboratory Log #:				an Beasley	
COMMENTS: Special / Non-compliance (SP), System Type: TNC, Water Source: GW,					

Disinfectant Used: NA