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 #:	3 7 5 0 1 04-74-045	County:	PITT				
Name of System: BELL ARTHUR WATER CORP							
Sample Type:							
Location where collect		p; 2 = General Tap; 3 =	Fnd Ton: 4 = Cour	ac/Intakas: F = 4	Other)		
Location Type:	_ ` `	•	·	ce/intakes; 5 = 0	Jiner)		
Location Code:	CL1	Collected By: _	Joey White				
FOR REPEAT SAMPL	E:	F	OR REPLACEME	NT SAMPLE:			
Previous Positive Location Code:			Original Sample Type:				
Positive Collection Date:			(1=Routine; 2=Repeat; 3=Plan Approval; 4=Other)				
	Time:		Original C	ollection Date:	· ·		
Proximity:				Time		_	
(1 = Same; 2 = U	pstream; 3 = Downstream)					_	
Mail Results To:		T	ype of Supply:				
WASHINGTO	N REGIONAL OFFICE	PWSS	x	Community	Пи	ITNC	
943 WASHING	STON SQUARE MALL			Non-Commu	nity 🔲 P	rivate	
WASHINGTO	•	т	ype of Treatment:	☐ Chic	orinated		
Telephone No	•	•	ype or rreatment.	=	-Chlorinated		
EIN #: 562033		RIER #: 16-04-01			rine Residual: orine Residual:	mg/ 1.04 mg/	
	RESULTS		11	NVALID COD	ES		
CONTAMINANT Total Coliform Fecal/E. Coli Heterotrophic P.C.	METHOD PRESENT 9223B (number	ABSENT INVA X	2 3 4) TNTC/No Co) Turbid Cultur) Over 30 Hou	re/No Coliform	Found	
Repeat Samples Required				Replacement Samples Required			
Date Analysis Begun: Date Analysis Comple Laboratory Log #:	11/06/14 ted: 11/07/14		Т	ime Analysis E ime Analysis C ertified By:	Completed: Susan Be	4	
COMMENTS:	pecial / Non-compliance (SI	P), Water Source: SWF	P, Disinfectant Used	<u>:</u>	Treans	dasley	
Ω	hloramines						