AND DO THE ONDER OF THE OWNER OWNER OF THE OWNER OWN	North Carolina State Enviror M Certifie	ces		MS Ral http Pho Fax	4312 District Drive MSC 1918 Raleigh, NC 27699-1918 http://slph.ncpublichealth.com Phone: 919-733-7308 Fax: 919-715-8611 FINAL REPORT	
Report to: Seth Titley	Name of System:					
WINSTON SALEM REG 450 WEST HANES MILL RD Winston Salem, NC 27105			S	anders I	Ridge	
EIN: 566000372X	Delivery: NC	Courier				Yadkin County
StarLiMS ID: ES200723-007	70 Date Collected: Date Received:	07/22/2020 07/23/2020	Time Collected: Time Received:	12:41 08:42	By: By:	Seth Titley Angela Heybroek
Water System ID: 30-99-03 Facility ID:	3 System Type:	NTNC	Water Source: Sample Type:	Ground Water Special/Non-Compliance		
Sample Location: Handsink Disinfectant Used:	<pre>k # 1 Location Type: Free Chlorine:</pre>	HS1	Location Code: Total Chlorine:			
Comments:						
PWS - Colilert Profile				М	ethod: SM 9223B	
Analyte	Test Result	Unit	Conclusion		Da	ite Tested
Total Coliform E. coli	Absent Absent			07/23/2020 07/23/2020		
Report Date: 07/24/202	20	Reported	i By: KPLEMMONS	5		

Explanations of Coliform Analysis:

If coliform bacteria are **Absent**, the water is considered safe for drinking purpose. If coliform bacteria are **Present**, the water is considered unsafe for drinking purpose. Presence of *E. coli* (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.