AND THE STATE OF TOTAL	Nor	th Carolina State Environ Mi Certifie			MS Rai http Pho Fax	4312 District Drive MSC 1918 Raleigh, NC 27699-1918 http://slph.ncpublichealth.com Phone: 919-733-7308 Fax: 919-715-8611	
Report to: Doug V	Nhitmire			N	ame of S		
Report to: Doug Whitmire WINSTON SALEM REGIONAL OFFICE PWSS 450 WEST HANES MILL RD STE 300 Winston Salem, NC 27105				Name of System: Shak's Shell			
EIN: 566000372X		Delivery: NC	Courier				Alamance County
StarLiMS ID: ES240	314-0050	Date Collected: Date Received:	08/13/2024 08/14/2024	Time Collected: Time Received:	14:35 07:58	By: By:	D Whitmire Kaila Kurtz
Water System ID: 02 Facility ID:	2-01-612	System Type:	NTNC	Water Source: Sample Type:	Ground Special		ompliance
Sample Location: H Disinfectant Used:	andsink # 2	Location Type: Free Chlorine:		Location Code: Total Chlorine:	HS2 0.0 mg/	L	
Comments: D	isinfectant Used	nfectant Used: None					
PWS - Colilert Profile						М	ethod: SM 9223B
Analyte		Test Result	Unit	Conclusion		Da	te Tested
Total Coliform E. coli		Present Absent			08/14/2024 08/14/2024		

**Report Date:** 

08/15/2024

Reported By: DNEWBORN

## **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.