



MERITECH, INC.

ENVIRONMENTAL LABORATORIES

642 Tamco Rd., Reidsville, NC 27320

Phone: (336) 342-4748 Fax: (336) 342-1522

Email: info@meritechlabs.com Web Site: www.meritechlabs.com

BACTERIOLOGICAL ANALYSIS

Note: All applicable information must be supplied for compliance credit.

Water System Number: NC - - County:

Name of Water System: System Type: Water Source:

Distribution System — Revised Total Coliform Rule (RTCR) Facility ID: D01

Sample Type: Routine (RT) Repeat (RP) Special / Non-compliance (SP)

Location Code: Tap Location: Street Address: City:

Check (✓) if sample site is owned or controlled by water system.

Check (✓) if sample site is a daycare or a K-12 school.

Sample Point: Routine Original (RTOR) Repeat-Original Tap (RPOR) Repeat-Upstream (RPUP) Repeat-Downstream (RPDN)

Source Water — Ground Water Rule (GWR)

Sample Type: Triggered (TG) Additional/Confirmation (CO) Assessment (RT) Triggered/Distribution Repeat (TD) *

Facility ID: Sample Point:

* for systems with a population ≤ 1,000

Collected — BY: DATE: / / TIME: : , m

Mail Results to (water system representative):

Phone #:

Fax #:

Responsible Person's email:

Complete for Repeat, Triggered, or Additional / Confirmation Samples:

Previous Positive Laboratory ID Number:

" Positive Laboratory Log Number:

" Positive Location Code:

" Positive Collection Date: / /

Disinfectant Used:

Total Chlorine Residual (chloramines): mg/L

Free Chlorine Residual (chlorine): mg/L

Laboratory ID Number: Repeat Samples Required from Client Resample Required from Client

| CONTAM CODE | CONTAMINANT | METHOD CODE | RULE | RESULTS | | Invalid Code |
|-------------|---------------------------------|-------------|----------|------------------------|----------------------|----------------------|
| | | | | Present ^{1,2} | Absent | |
| 3100 | Total Coliform | Colitag | RTCR/GWR | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 3014 | <i>E. coli</i> | Colitag | RTCR/GWR | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 3002 | Enterococci | | GWR | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 3028 | Coliphage | | GWR | <input type="text"/> | <input type="text"/> | <input type="text"/> |
| 3001 | Heterotrophic P.C. ³ | | | cfu/mL or MPN | | <input type="text"/> |

INVALID CODES:

| | |
|---|---|
| 1 | Confluent Growth / No Coliform Growth Found |
| 2 | TNTC/No Coliform Growth Found |
| 3 | Turbid Culture / No Coliform Growth Found |
| 4 | Over 30 Hours Old |
| 5 | Improper Sample or Analysis ⁴ |

¹If *E. coli*, enterococci or coliphage is present, lab must report results to State on day test completed. ²If total coliform bacteria is present, lab must report results to State within 48 hours. ³If HPC is absent, enter a "0" left of the "cfu/mL or MPN" units; if present, enter a whole number. ⁴Explain invalid code below in comments.

Analyses Begun — DATE: / / TIME: : , m (Date as: mm/dd/yy)

Analyses Completed — DATE: / / TIME: : , m (Time as: h:mm am/pm)

Laboratory Log Number: Certified By:

(Print and sign name)

COMMENTS: