

359 SOUTH PARK DRIVE COLCHESTER, VT 05446 (802) 338-4724 or (800) 660-9997 (VT only) www.healthvermont.gov

Results Report

State Health Dept #: Report Status: 17-WB-08515

Final

Date Report Released:

10/03/2017

Report To

Daniel Perkins

Stowe, VT 05672

WSID

Oct /2017

Address

ATTN OF

2521 Stowe Hollow Rd

Account Name

DANIEL PERKINS

10/02/2017

Time Received

Date Received

15:22

Approved Date

10/03/2017

Sample Desc.

KIT NU

Collection Date

10/02/2017

Collection Time

12:35

Sampled By

Daniel Perkins

Sampling Location

Street Address

Town

<u>Test</u>

Set Tub, Basement 2521 Stowe Hollow Rd

Stowe

Sample Type

Free Chlorine Residual Total Chlorine Residual

Chlorinated?

Nο

Field Temp.

Field Fluoride Temp at Receipt

Sampler's Comments

Enzyme Substrate Test Quantitation

Date/Time of Analysis 10/03/2017 11:52

Test Method SM20 9223B-QT

Analyte

Total Coliform

E.coli

MPN/100mL

201

0

THIS WATER SAMPLE TESTED POSITIVE FOR EITHER COLIFORM OR COLIFORM AND E.COLI BACTERIA. The presence of these bacteria in drinking water indicates that the water may be contaminated with organisms that can cause disease.

**IMPORTANT: DRINKING WATER FROM THIS SOURCE IS NOT ADVISED. IF WATER MUST BE USED FOR DRINKING, BOIL FOR 1 MINUTE PRIOR TO USE. Inspection of the water system and appropriate corrective action (e.g. maintenance, disinfection) should be taken before resampling.

Units of Measurement and Definitions:

mL = milliliter, > equals greater than, MPN = Most Probable Number, CFU = Colony Forming Unit, TNTC = Too Numerous To Count

The test results included on this report meet all National Environmental Laboratory Accreditation Program requirements unless noted otherwise. Test results relate only to the samples tested and are representative of the samples as they were received at the laboratory This is a public record. Information contained in this report may be used for statistical purposes and may be released upon request, pursuant to Vermont Access to Public Documents law (1 V.S.A. 315-320).

This report shall not be reproduced, except in full, without the written approval of the laboratory.

Test Report Authorized By:

Mary Wat

Mary Celotti, Laboratory Director

If you have received this report in error or have questions about this report, please call the laboratory at (802) 338-4724.

Admin 305 Rev.1 (07/2017)

Date Printed Tuesday, October 3, 2017

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