

Colorado Department of Public Health and Environment Compliance Assurance & Data Management Unit

REPORTING FORM FOR BACTERIOLOGICAL ANALYSIS

SAMPLER: FILL OUT ONE FORM - FOR EACH INDIVIDUAL SAMPLING POINT

PWSID #: COO 0207504 COUNTY: Larimer DATE COL					ED: 02/01/10	
SYSTEM/ESTABLISHMENT NAME: Meadow Mountain Water Company						
SYSTEM MAILING ADDRESS: P.O. Box 162 Allenspark, Colorado 805109						
Street address/PO Box			CITY		TATE ZIP	
CONTACT PERSON: Steve Tedford			PHONE: 303-800-2066			
SAMPLE COLLECTED BY: Steve Tedford			TIME COLLECTED: 6:30			
WATER TYPE: RAW (No chlorine or other treatment) CHLORINATED OTHER TREATMENT						
SAMPLE POINT (Address)			LORINE RESIDUAL	L in mg/L SAMPLE TYPE		
Fout's					Routine Repeat Special Purpose	
LABORATORY SAMPLE # S100331318 CLIENT NAME or ID# 1115-021 LABORATORY NAME: Stewart Environmental Consultants, Inc. LAB PHONE # 970-226-5500 DATE RECEIVED IN LABORATORY 02/01/10 DATE ANALYZED 02/02/10 COMMENTS:						
PARAMETER	RESULT	UNITS	ANALYSIS DATE	LABORATORY METHOD		
Coliform, TOTAL (Verified)		#/100 mL				
Coliform, FECAL/e. Coli (Verified)		#/100 mL				
Coliform, TOTAL (Absent/Present)	Absent		02/02/10	Ready Cult		
Coliform, FECAL/e. Coli (Absent/Present)						
LABORATORY: Please call Drinking Water Section with any results other than < 1 or ABSENT.						
NT = Not Tested for compound						
TNTC = Too Numerous To Count - Please resample	CG = Confluent Growth - Please resample					
OD = Outdated - Please resample <1 = Safe valid sample	LA = Lab Accident - Please resample Absent = Coliform / e.Coli /Fecal not detected					
Present Coliform / e.Coli /Fecal detected						
M flowarien Laboratory Manager 02/05/10					05/10	
Reviewed & Approved by	eviewed & Approved by		le	Date		