

Water Bacteriological Analysis

174 56534
Sample: Finished Sample Tap (Tanks In) S01

Invoice Number: 24-16134

Client: Glacier Springs Water System

PO Number:

PO Box 126

Project Name:

Maple Falls, WA 98226

Report Date: 8/30/2024

Phone: 360-739-3933

Email: john@watersystemsolutions.net

Approved By:


Sample Information

Date Collected:	8/29/2024	Date Received:	8/29/2024
Sample Collected by:	JM	Source Number:	0
Sample Purpose:	Investigative		
Sample Type:	Post Treatment/Finished Water Sample	Chlorine Res:	
Sample Composition:	Coliform Samples		
Sample Collection:	Flowing		
Suitability:	Yes		

System Number: 27755
System Name: GLACIER SPRINGS WATER SYSTEM

Lab #: 56534		Sample: Finished Sample Tap (Tanks In) S01					
Analyte	Results	Units	Detection Limit	Method	Analyst	Date Analyzed	Date Approved
TOTAL COLIFORM	3.0	/100ml	1	SM_9223B_Q	SK	8/30/2024	8/30/2024
E. COLI	<1	/100ml	1	SM_9223B_Q	SK	8/30/2024	8/30/2024