

Nash County Health Department

Environmental Health
Nash County Administration Building
120 West Washington Street - Suite 2127
Nashville, N.C. 27856
(252) 459-9829

NAME: _____

ADDRESS: _____

LOCATION: Nashville, NC

PHONE: _____ WELL ORDINANCE _____ OTHER ☒

WELL HEAD EVALUATION

Appears to be properly protected: Yes ☒ No _____

If the well appears not to be protected, a bacterial water sample cannot be taken. A well that is not properly protected is not considered to be a safe water supply, regardless of any water analysis. If the well was found not to be properly protected, please refer to the recommended corrective measures noted below.

_____ PROPERLY INSTALL WELL SEAL

_____ REPAIR WELL CASING

_____ REPAIR OR INSTALL REQUIRED GROUT

_____ OTHER _____

WATER SUPPLY ANALYSIS

The results of the drinking water coliform analysis for your water supply are as follows:

I. ☒ Coliform bacteria were not found (absent)

_____ Coliform bacteria were found (present)

II. ☒ Fecal coliform bacteria were not found (absent)

_____ Fecal coliform bacteria were found (present)

_____ Other _____

COLLECTED BY: _____

Date: 3-10-10

Time: 12:40 am

Sample Number 8845

Received in Lab: Date: 3-10-10

Time: 1:30 pm

Date Reported 3-11-10

Technician Johnson

RECOMMENDATIONS

☒

NONE INDICATED

_____ DISINFECT WATER SUPPLY

OTHER COMMENTS _____

DATE 3-15-10