

Fax:

ANALYTICAL RESULTS

Batch ID/Form: B400172 - TOTAL COLIFORM RULE					Submitting Lab ID: 3000				
PWS ID/Name: 0211010 - BENNINGTON WATER DEPT - BENNINGTON					Report Date:	Report Date: 01/16/2024			
Collector: MATT MILLER		Phone: 603-588-2433			Collect Date:	01/11/2024 09:45:00			
Lab Sample ID: B400172001		Matrix: WATER				Received:	: 01/11/2024 12:25:00		
Sample Location ID: 001		Sample Type: ROUTINE-SAMPLE				Compliance Period:	JAN 2024		
Description: TOWN HALL SCHOO		L ST				Receipt Temp.:	8 C		
Analyte	Results	Units	RDL	DF	Prepared Date	Analysis Date	Analyte Code	Analyst	Qual.
Analytical Method: 922	3B	Analyzing Lab: 3000-NEW HAMPSHIRE DHHS PUBLIC HEALTH LABORATORIES							
ESCHERICHIA COLI	ABSENT	P-A/100ML			01/11/2024 13:37:00	01/12/2024 10:34:00	2525		
TOTAL COLIFORMS	ABSENT	P-A/100ML			01/11/2024 13:37:00	01/12/2024 10:34:00	2500		
Analytical Method: Fiel	d Result								
RESIDUAL FREE CHLORINE 0.01		P-A/100ML							

This report is derived from the original 'Report of Laboratory Analysis' and is not intended as a replacement.