



CERTIFICATE OF ANALYSIS

L8J1266

Dry Ridge, City of
Robbie Bosse
31 Broadway
Dry Ridge, KY 41035

Date Reported 10/22/2018
Date Due 10/29/2018
Date Received 10/18/2018
Customer # E6072

WTP - Total Coliforms

Table with columns: Analysis, OOC, Qualifier, Result Units, Min, Max, Method, Rpt Limit, Analysis Date, Tech. Includes sample details for 101 Cull Lane and results for Chlorine, Free Available and Coliforms and E. Coli - DW.

Qualifier Definitions

The following analyses were subcontracted to a qualified laboratory:

Table with columns: Laboratory, Analysis, Method. Shows subcontracted analysis for Coliforms and E. Coli - DW at Lexington.

Project Requested Certification(s):

Table with columns: Certificate ID, Agency. Shows Certificate ID 00040 and Agency Kentucky Drinking Water Accreditation.

THIS REPORT HAS BEEN REVIEWED AND APPROVED FOR RELEASE:

Handwritten signature of Anne Daniels A.M.

Anne Daniels A.M.

Samples were received in proper condition and the reported results conform to applicable accreditation standard unless otherwise noted.

The data and information on this, and other accompanying documents, represents only the sample(s) analyzed. This report is incomplete unless all pages indicated in the footnote are present and an authorized signature is included.

The data and other information contained on this, and other accompanying documents, represents only the sample (s) analyzed and is rendered upon the condition that it is not to be reproduced wholly or in part for advertising or other purposes without written approval from the laboratory.

Microbac Laboratories, Inc.

3323 Gilmore Industrial Blvd. Louisville, KY 40213 502.962.6400 Fax: 502.962.6411
Evansville 812.464.9000 | Lexington 859.276.3506 | Paducah 270.898.3637 | Hazard 606.487.0511



# TOTAL COLIFORM CHAIN OF CUSTODY

Microbac Laboratories, Inc. - Kentucky Testing Laboratory Division - www.microbac.com  
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P.O.# \_\_\_\_\_  
Client: City of Dry Ridge  
Phone No.: 859-393-3121  
Payment \$ \_\_\_\_\_  
Cash \_\_\_\_\_  
Check # \_\_\_\_\_  
Fax No.: \_\_\_\_\_

Special Instructions: \_\_\_\_\_  
Shipped to Lab Via (if applicable): \_\_\_\_\_ UPS \_\_\_\_\_ Fed Ex  Other \_\_\_\_\_

Condition of Sample(s) Upon Receipt: \_\_\_\_\_ Acceptable \_\_\_\_\_ Not Acceptable \_\_\_\_\_  
# samples relinquished: 1 Date: 10-18-18 Time: 10:19  
# samples received: 1 Date: 10-18-18 Time: 10:19  
# samples relinquished: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_  
# samples received: \_\_\_\_\_ Date: \_\_\_\_\_ Time: \_\_\_\_\_

Temp. Upon Receipt in Lab (°C): 6.8 Infrared Therm. ID: L10 Rec. on Ice (Y/N): Y  
Bottle Type: 120 mL plastic with Sodium Thiosulfate Sample Volume: 100 mLs  
Relinquished by (Signature): [Signature]  
Received by (Signature): [Signature]  
Relinquished by (Signature): \_\_\_\_\_  
Received by (Signature): \_\_\_\_\_

No.	Location Code *	Location	Replacement (Y or N)	Collection		Sample Type	Special Sample Reason	Disinfectant Residual		Analysis	
				Date	Time			Type	Total		Free
001	144	101 Call Cave		10-18-18	8:25	RT		3	86	72	TC
002											
003											
004											
005											
006											
007											
008											
009											
010											

Reason for Sample Rejection: \_\_\_\_\_  
\* DR - Original    DN - Down    UP - Upstream    RT - Routine    SP - Special    RP - Repeat  
A - Suspected contamination    B - New plant modification; Line ext.    C - Treatment modification  
D - Study/Investigation    E - Line Break  
Disinfectant Type: 1 - Chlorine    2 - Chloramines    3 - Chlorine Dioxide    4 - Ozone  
Analysis: TC - Total Coliform



18J1266 Anne Daniels