



CERTIFICATE OF ANALYSIS

L8K0550

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

Date Reported 11/12/2018
Date Due 11/19/2018
Date Received 11/08/2018
Customer # E6072

WTP - Total Coliforms

Analysis	OOB	Qualifier	Result	Units	Min	Max	Method	Rpt Limit	Analysis Date	Tech
Sample: 01 17 South Main St									Sampled	11/08/2018 @ 10:42
Sampled By	Customer									
Location Code	138									
DWSampleType	RT									
WSF ID	0410107DS001									
Plant ID	NA									
PWS Name	Dry Ridge, City of									
Chlorine, Free Available			0.82	mg/L			CLIENT SPECIFIED	0.02	11/08/2018 10:42	CUS
Coliforms and E. Coli - DW							SM9223B (Colilert-18)			
Coliform, Total			Absent	per 100mL				1	11/08/2018 16:51	AKM

Qualifier Definitions

The following analyses were subcontracted to a qualified laboratory:

Laboratory	Analysis	Method
Lexington	Coliforms and E. Coli - DW	SM9223B (Colilert-18)

Project Requested Certification(s):

Certificate ID	Agency
00040	Kentucky Drinking Water Accreditation

THIS REPORT HAS BEEN REVIEWED AND APPROVED FOR RELEASE:

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

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18K0550 Anne Daniels

IS #: KY 0410107

ent: CITY OF DRY RIDGE

P.O. BOX 145

DRY RIDGE, KY 4035

Kathy Bone

mples Collected by (Signature):

ip. Upon Receipt in Lab (°C):

3.6 Infrared Therm. ID: L10

de Type: 120 mL Plastic with Sodium Thiosulfate

Sample Volume: 100 mLs

Relinquished by (Signature):

Kathy Bone

Received by (Signature):

Joanna

Relinquished by (Signature):

Received by (Signature):

P.O.#

Payment \$

Cash

Check #

Phone No.:

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: 11-08-2018 Time: 1:05

samples received: 1 Date: 11-8-18 Time: 1305

samples relinquished: Date: Time:

samples received: Date: Time:

No.	Location Code	*	Location	Replacement (Y or N)	Collection		Sample Type	Special Sample Reason	Disinfectant Residual			Analysis
					Date	Time			Type	Total	Free	
001	138		17 S. Main ST.	✓	11-08-2018	10:42	RT		3	89	.82	TC
002												
003												
004												
005												
006												
007												
008												
009												
010												

Reason for Sample Rejection:

* OR - Original
DN - Down
UP - Upstream

Sample Type: RT - Routine
SP - Special
RP - Repeat

Special Sample Reason: 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