



CERTIFICATE OF ANALYSIS

L8H1340

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

Date Reported 08/24/2018
Date Due 08/31/2018
Date Received 08/22/2018
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 17 South Main St and analysis 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 Lexington, Coliforms and E. Coli - DW, using SM9223B (Colilert-18) method.

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
Louisville 502-962-6400 - Lexington 859-276-3506 - Paducah 270-898-3637 - Hazard 606-487-0511 - Evansville, IN 812-464-9000

18H1340 Anne Daniels

MS #: Ky 0410107
Client: CITY OF WRY RIDGE
P.O. BOX 145
WRY RIDGE, KY 4035

P.O.# _____
Payment \$ _____
Cash _____
Check # _____

Phone No.: _____
Fax No.: _____

mples Collected by (Signature): _____

Special Instructions: _____

mp. Upon Receipt in Lab (°C): 4.0 Infrared Therm. ID: L24 Rec. on Ice (Y/N): Y
ottle Type: 120 mL plastic with Sodium Thiosulfate Sample Volume: 100 mL

Shipped to Lab Via (if applicable): UPS Fed Ex Other
Condition of Sample(s) Upon Receipt: Acceptable Not Acceptable

Relinquished by (Signature): [Signature] # samples relinquished: 1 Date: 08-22-2018 Time: 1255
Received by (Signature): [Signature] # samples received: 1 Date: 8-22-18 Time: 1255
Relinquished by (Signature): _____ # samples relinquished: _____ Date: _____ Time: _____
Received by (Signature): _____ # samples received: _____ Date: _____ Time: _____

No.	Location Code	*	Location	Replacement (Y or N)	Collection		Sample Type	Special Sample Reason	Disinfectant Residual			
					Date	Time			Type	Total	Free	
001	130		17 South Main St.	N	08-22-2018	10:38	RT		3	96	85	Analysis (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