



**ANALYTICAL RESULTS**

**Batch ID/Form:** 1509-02097 - TOTAL COLIFORM RULE

**Submitting Lab ID:** 1015

**PWS ID/Name:** 0594010 - CORNERSTONE PLACE - DEERFIELD

**Report Date:** 09/29/2015

**Collector:** DUFFY, SARAH

**Phone:** 603-432-3044

**Collect Date:** 09/28/2015 13:54:00

**Lab Sample ID:** 1509-02097-001

**Matrix:** WATER

**Received:** 09/28/2015 15:09:00

**Sample Location ID:** 015

**Sample Type:** ROUTINE-SAMPLE

**Compliance Period:** SEP 2015

**Description:** BASEMENT SINK

**Receipt Temp.:** 11.4 C

Analyte	Results	Units	RDL	DF	Prepared Date	Analysis Date	Analyte Code	Analyst	Qual.
<b>Analytical Method:</b> 9223B		<b>Analyzing Lab:</b> 1015-GRANITE STATE ANALYTICAL SERVICES LLC							
ESCHERICHIA COLI	ABSENT	P-A/100ML			09/28/2015 17:22	09/29/2015 12:40	2525		
TOTAL COLIFORMS	ABSENT	P-A/100ML			09/28/2015 17:22	09/29/2015 12:40	2500		

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