

Nova Scotia Health Authority
SOUTH SHORE REGIONAL HOSPITAL
90 GLEN ALLAN DRIVE
BRIDGEWATER , NS
B4V 3S6

NAME: REINHARDT, CECE
ACCT#:DK0000922/22
ADDRESS: 261 SHERWOOD FOREST ROAD
ADDRESS: SHERWOOD,NS,B0J 1J0
PHONE#: (831)747-7088
LOCATION: SS.LABO
SUBMITTING DR: CASH WATER CLIENT
COPIES TO :

Specimen: WT22:W0006594R Collected: 29/08/22-0840 Status: COMP Req#: 12791688
Received: 29/08/22-1026

Source: LAKE

Sp Desc:RAW

Ordered: WATER QUANT

Queries: Analysis Requested Both Total and E.coli
Sample Information NINE MILE LAKE
Drinking Water Category? RESIDENTIAL
Contact/Mailing Address 261 SHERWOOD FOREST ROAD
Contact/Mailing City/Prov SHERWOOD,NS
Contact/Mailing Postal Code B0J 1J0
Contact Telephone Number 831-747-7088
Source Address 261 SHERWOOD FOREST ROAD SHERWOOD,NS
Postal Code B0J 1J0
Sample Collected By CECE REINHARDT
Date Refrigerated 29/08/22
Time Refrigerated 0956
Mail Y

PERFORMING SITE: YARMOUTH REGIONAL HOSPITAL

MICROBIOLOGY

> WATER QUANTITATIVE{MPN COUNT}	Final	30/08/22-1542	YR
TOTAL COLIFORM (MPN)	387 /100ML		
E.coli (MPN)	1 /100ML		
METHOD	Colilert		
RESULTS RELATE TO WATER	These results relate only to the water sample submitted.		
WATER AUTHORIZATION	Report authorization is available on request.		
FOR INTERPRETATION	Contact Nova Scotia Environment @ 1-877-936-8476 or visit www.gov.ns.ca/nse/water/thedroponwater.asp		

YR - YARMOUTH REGIONAL HOSPITAL

***** Test Performed at Yarmouth Regional Hospital LAB *****
Lab Fax (902)749-1576