

Nova Scotia Health Authority
 VALLEY REGIONAL HOSPITAL
 150 EXHIBITION STREET
 KENTVILLE , NS
 B4N 5E3

NAME: AVSB, AVSB
 ACCT#:DU0002586/18
 ADDRESS: PO BOX 340 121 ORCHARD ST
 ADDRESS: BERWICK,NS,B0P 1B0
 PHONE#: (902)538-4640
 LOCATION: VR.LABO
 SUBMITTING DR: ANNAPOLIS VALLEY SCHOOL BOARD
 COPIES TO :

Specimen: WT18:W0010969R Collected: 12/12/18-0920 Status: COMP Req#: 09649332
 Received: 12/12/18-1225

Source: DRILLED WELL

Sp Desc:TREATED

Ordered: WATER P/A

Queries: Sample Information WINDSOR FORKS SCHOOL STAFF RM
 Drinking Water Category? REGISTERED
 Registration Number{If applicable} 2001-019-484
 Contact Telephone Number 902-538-4640
 Sample temperature on receipt 10.2
 Postal Code NI
 Sample Collected By ROY MILLER
 Date Refrigerated 12/12/18
 Time 1145
 Delivery By Fax 902-538-4630

PERFORMING SITE: VALLEY REGIONAL HOSPITAL

MICROBIOLOGY

> WATER PRESENT/ABSENCE	Final	13/12/18-1141
TOTAL COLIFORM	ABSENT/100ML	
E.coli	ABSENT/100ML	

These results relate only to the water sample submitted for testing.

Report authorization is available on request.

For interpretation contact Nova Scotia Environment
 at 1-877-936-8476 or visit
www.gov.ns.ca/nse/water/thedroponwater.asp.

RECEIVED
 DEC 13 2018

AVRCE Property Services
T.W.