



**DEPARTMENT OF HEALTH LABORATORY**

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(802) 863-7336 or (800) 660-9997 (VT only)  
www.healthvermont.gov

**Results Report**

**State Health Dept # : 12-WB-09890**

**Report To** JERICO UNDERHILL WATER  
**ATTN OF** MARC MAHEUX  
**Address** PO BOX 174  
  
UNDERHILL, VT 05489

**WSID** VT0005096  
**Account Name** JERICO UNDERHILL WATER  
**Date Received** 12/05/2013  
**Time Received** 16:12  
**Approved Date** 12/06/2013

**Sample Desc.** KIT AA  
**Collection Date** 12/05/2013  
**Collection Time** 12:45  
**Sampled By** Marc Maheux  
**Sampling Location** Mop Sink  
**Street Address** 419 Rte 15  
**Town** Underhill

**Sample Type**  
**Free Chlorine Residual** 0.05 mg/L  
**Total Chlorine Residual**  
**Chlorinated?** Yes  
**Field Temp.**  
**Field Fluoride**  
**Temp at Receipt**

**Test** Enzyme Substrate Test

**Date/Time of Analysis** 12/06/2013 10:15  
**Test Method:** SM20 9223B

Analyte	Result
Total Coliform	Not detected
E.coli	Not detected

**Units of Measurement and Definitions:** mL = milliliter, > equals greater than, MPN = Most Probable Number, CFU = Colony Forming Unit, TNTC = Too Numerous To Count

The test results included on this report meet all National Environmental Laboratory Accreditation Program requirements unless noted otherwise.  
Test results relate only to the samples tested and are representative of the samples as they were received at the laboratory.  
This is a public record. Information contained in this report may be used for statistical purposes and may be released upon request, pursuant to Vermont Access to Public Documents law (1 V.S.A. 315-320).  
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**Test Report Authorized By:**

*Mary Celotti*  
Mary Celotti, Laboratory Director

*If you have received this report in error or have questions about this report,  
please call the laboratory at (802) 863-7336.*