

Bureau of Environmental Health  
7178 Columbia Gateway Drive  
Columbia, MD 21046-2147  
(410) 313-2640 Fax (410) 313-2648  
TDD (410) 313-2323 Toll Free 1-866-313-6300  
website: [www.hchealth.org](http://www.hchealth.org)

Peter L. Beilenson, M.D., M.P.H., Health Officer

February 12, 2009

KATHY SARTORI  
7615 LAKE GLEN DR  
GLENN DALE, MD 20769

*(letter was returned)  
remailed  
on 2/26/09  
to*

RE: **Water Sample Results**  
**15271 RIDGE HUNT DR** ←  
**Invoice #: 5-14074**

Dear KATHY SARTORI,

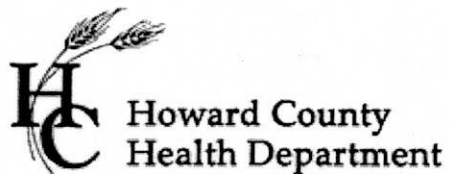
We have received the results from the testing of the water sample(s) taken from the above referenced property on February 03, 2009. A description of the results and the established standards for each test is included below. Standards such as maximum contaminant levels (MCL), secondary maximum contaminant levels (SMCL), and drinking water equivalency levels (DWEL) are established by the EPA and other agencies to provide a reference for determining when action should be taken. These standards help to improve the overall quality of your water or ensure that steps are taken to treat the water to prevent you and your family from getting sick. Typically, no water is completely free of contamination but you should be concerned if the level of contamination for a particular test exceeds the standard.

The results from the **Bacteria** testing found that your well water sampled from the bathroom faucet contains no bacteria at this time and is considered safe for all uses. According to drinking water standards there should be no bacteria present.

A sample was collected to determine the **Nitrate** level in your water supply. The nitrate level was 9.2 parts per million. The MCL for nitrate is 10.0 parts per million.

A **Turbidity** sample was collected to determine the amount of suspended particulates in your water supply. The turbidity level was <0.5 nephelometric turbidity units (NTU's). The MCL for turbidity is 10.0 NTU's.

Please contact the Health Department at (410) 313-1792 between 8:30 a.m. and 4:30 p.m., Monday through Friday if you have any questions regarding these test results.



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Peter L. Beilenson, M.D., M.P.H., Health Officer

Sincerely,



Hank Oswald, R.S.  
Community Hygiene Program

Enclosures

STATE OF MARYLAND  
DEPARTMENT OF HEALTH AND MENTAL HYGIENE  
LABORATORIES ADMINISTRATION  
201 W. Preston Street  
PO BOX 2355, Baltimore, Maryland 21203  
John M. Deboy, Dr. P.H., Director

Category Code 46

Lab. No. 012118

**BACTERIOLOGICAL DRINKING WATER REPORT**  
Field Record SARTORI

Community ☐  
Non-Community ☐  
Non-Transient ☐  
Private ☒  
Check Sample ☐  
C.O.P. ☐

Source Kalky Intersect point back sink  
Location: 1527 Ridge Hunt Road  
Iced: Yes ☒ No ☐ a.m. ☒ p.m. ☐  
Treated: Yes ☐ No ☒ Time Collected 10:00  
Collector # 99001V Bottle No. HW-15279-3  
Collector Name B. Smokey County HOWARD

TEST  
QUANTITATIVE ☒  
P/A ☐  
MTF ☐

County 13 Plant No. 1111 Sampling Station 1111 Date Collected 2 3 09

pH 6.8 Res. Cl: Free 00 Total 00 Card No. 11

**LABORATORY RECORD**

Thiosulfate: Pres. ☐ Absent ☐ Undetermined ☐

**PRESUMPTIVE MTF • P/A TEST\***

**CONFIRMED MTF • P/A TEST**

ml of Sample	10 ml.	100 ml.
Gas, 24 hours		
Gas, 48 hours		

ml of Sample	10 ml.	100 ml.	No. of +
Coliforms †			
Fecal + Coliforms ‡			

**P/A TEST (CONFIRMED) \*\*\***

ml. of Sample	100 ml.
Total Coliforms	
E. Coli	

**QUANTITATIVE TEST (CONFIRMED) \*\*\***

100 ml. of Sample	No. of Pos	MPN
Total Coliforms	<u>0</u>	<u>&lt;1</u>
E. Coli	<u>0</u>	<u>&lt;1</u>

\*\* Presumptive Coliforms/100 mi. (Membrane Filter) =

† Verified Total Coliforms/100 mi. (Membrane Filter) ÷

‡ Verified Fecal Coliforms/100 mi. (Membrane Filter) =

24 • 48 • 72 Hrs/Heterophic Plate Count \$/ml. =

Temp. 25 °C  
Control 1 mp

- \*\* using m Endo-Agar LES at 35° C incubation
- \* using Lauryl Sulfate Trypticase Broth at 35° C incubation
- † using Brilliant Green Lactose Bile Broth at 35° C incubation
- ‡ using EC Broth at 44.5° C incubation
- \$ using Plate Count Agar at 35° C incubation
- \*\*\* using ONPG-MCG at 35° C incubation

Remarks

Date & Hour

Laboratory

FEB 3 '09 PM 2:14

FEB 3 '09 PM 2:33

FEB 4 '09 PM 2:36

Rec'd 1 mp  
Exam 1 mp  
Rept. 1 mp

E. SHORE REG. ☐

S. MD REG. ☐

CENTRAL ☒

W. MD REG. ☐

Bacteriologist A. Player



# SEND REPORT TO:

# DEPARTMENT OF HEALTH AND MENTAL HYGIENE

## Laboratories Administration

201 W. Preston St.

P.O. Box 2355, Baltimore, Maryland 21203



E09001866001

Received: 02/03/2009

Inorganic

HW-15271-3

## WATER ANALYSIS

G SARTORI

Do not write above this line.

A M P L E I D	Bottle Number	HW-15271-3	Name	Kathy Salvatore	County	Howard	County Code	13																
	Source	15271 Ridge Hunt Road	Hammattville, MD		Data Category Code	46																		
	Collected: Date	2/3/09	Time	10:00am	Collector & Phone	P. Sarty 410-313-4259																		
	CHECK (one per box)	<table border="0"> <tr> <td><input type="checkbox"/> Drinking Water</td> <td><input type="checkbox"/> Community</td> <td><input type="checkbox"/> Source (raw water)</td> <td><input type="checkbox"/> Emergency</td> </tr> <tr> <td><input type="checkbox"/> Landfill</td> <td><input type="checkbox"/> Non-community</td> <td><input type="checkbox"/> Distribution (treated)</td> <td><input type="checkbox"/> Routine</td> </tr> <tr> <td><input type="checkbox"/> Stream</td> <td><input type="checkbox"/> Private</td> <td><input type="checkbox"/> MCL</td> <td><input type="checkbox"/> Recheck</td> </tr> <tr> <td><input type="checkbox"/> Other</td> <td><input type="checkbox"/> Other</td> <td></td> <td><input type="checkbox"/> Special</td> </tr> </table>								<input type="checkbox"/> Drinking Water	<input type="checkbox"/> Community	<input type="checkbox"/> Source (raw water)	<input type="checkbox"/> Emergency	<input type="checkbox"/> Landfill	<input type="checkbox"/> Non-community	<input type="checkbox"/> Distribution (treated)	<input type="checkbox"/> Routine	<input type="checkbox"/> Stream	<input type="checkbox"/> Private	<input type="checkbox"/> MCL	<input type="checkbox"/> Recheck	<input type="checkbox"/> Other	<input type="checkbox"/> Other	
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<input type="checkbox"/> Other	<input type="checkbox"/> Other		<input type="checkbox"/> Special																					
	Federal Project <input type="checkbox"/> S																							

F I E L D	Plant No.		Sampling Station		Preservation: Iced	<input checked="" type="checkbox"/>	Acid	<input checked="" type="checkbox"/>	Type of Acid	H2SO4
	pH	6.8	Chlorine: Free	0.0	Total	0.0	Specific Conductance			
	Notes to Lab/Remarks: 2 bottles, 1/0 tag									

CHECK TESTS	TESTS	ERROR CODE	RESULTS
	Alkalinity (Total)		
	Ammonia - N		
	Chloride		
	Color*		
	Conductance*, Spec.		
	Dissolved Solids		
	Hardness		
	Fluoride		
	Nitrite, N		
X	Nitrate - Nitrite, N		9.2
	Sulfate		
X	Total Solids		
	Turbidity*		<0.5
	Other:		

Results reported in Units, all others in milligrams per liter (ppm)

Number of Tests Requested

Section Chief

Date Reported





State of Maryland  
DHMH-Laboratories Administration  
Division of Environmental Chemistry  
**INORGANICS ANALYTICAL LABORATORY**  
201 W. Preston Street, Baltimore, Maryland 21201  
John M. DeBoy, Dr. P.H., Director

**Certificate of Analysis**

HOWARD CO ENVIRON HLTH  
7178 COLUMBIA GATEWAY DRIVE  
COLUMBIA, MD 21046

Lab Project NoE09001866 Date Coll.02/03/2009 Date Received: 02/03/2009 Submitted By: Staniewicz

Field ID: HW-15271-3  
Lab No.: E09001866001

<u>Analyte</u>	<u>Method</u>	<u>Result</u>	<u>Units</u>	<u>Date Analyzed</u>
Nitrate + Nitrite, as N	EPA 353.2	9.2	mg/L	02/09/2009
Turbidity	EPA 180.1	<0.5	NTU	02/04/2009

**Comments:**

Approved by: 

Approval date: 02/10/2009

This document contains confidential health information that is privileged, confidential and exempt from disclosure under law. If you have received this information in error, please call (410) 767-5034 and arrange for return or destruction.

Telephone: (410) 767 - 5034

Fax: (410) 333 - 5327