

Bureau of Environmental Health
8930 Stanford Blvd
Columbia, MD 21045
(410) 313-2640 Fax (410) 313-2648
TDD (410) 313-2323 Toll Free 1-866-313-6300
website: www.hchealth.org

Maura J. Rossman, M.D., Health Officer

March 31, 2015

Mr. Joe Oferrall
1671 HENRYTON ROAD
MARRIOTTSVILLE, MD 21104

RE: Water Sample Results
1671 HENRYTON ROAD
Invoice #: 29862

Dear Mr. Oferrall,

We have received the results from the testing of the water sample(s) taken from the above referenced property on March 18, 2015. 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 outdoor 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 **Turbidity** sample was collected to determine the amount of suspended particulates in your water supply. The turbidity level was 15.1 nephelometric turbidity units (NTU's). The MCL for turbidity is 10.0 NTU's.

A sample was collected to determine the **Nitrate** level in your water supply. The nitrate level was 2.38 parts per million. The MCL for nitrate is 10.0 parts per million.

Please contact the Health Department at (410) 313-1773 between 8:30 a.m. and 4:30 p.m., Monday through Friday if you have any questions regarding these test results.

Sincerely,

Ramar Martin, R.S.
Community Hygiene Program

Enclosures



State of Maryland
DHMH-Laboratories Administration
Division of Environmental Chemistry
INORGANICS ANALYTICAL LABORATORY
201 W. Preston Street, Baltimore, Maryland 21201
Robert Myers, Ph.D., Director



Certificate of Analysis

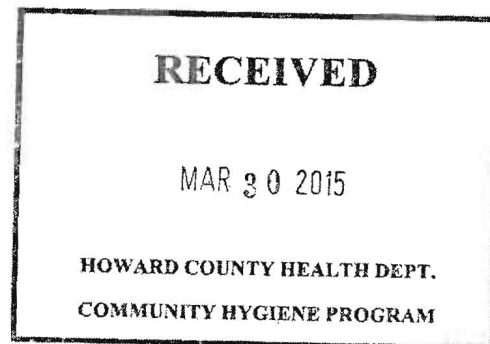
HOWARD CO ENVIRONMENTAL HLTH
8930 STANFORD BLVD
COLUMBIA, MD 21045

Lab Project NoE15002901 Date Coll. 03/18/2015 Date Received 03/18/2015 Submitted By:Shklyar

Field ID: HC 1671
Lab No.: E15002901001

| <u>Analyte</u> | <u>Method</u> | <u>Result</u> | <u>Units</u> | <u>Date Analyzed</u> |
|-------------------------|---------------|---------------|--------------|----------------------|
| Nitrate + Nitrite, as N | EPA 353.2 | 2.38 | mg N/L | 03/24/2015 |
| Turbidity | EPA 180.1 | 15.1 | NTU | 03/19/2015 |

Comments:



Approved by: Shahla Aneli

Approval date: 03/25/2015

*The following methods are included in our A2LA Scope of Accreditation: EPA150.1, EPA 353.2, EPA 375.2, SM4500F C, SM 4500-CN G & QCM-CN, QCM-CN.

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) 767-6190 and arrange for return or destruction.

Telephone: (410) 767 - 6190

Fax: (410) 225 - 3175

S:\EnviroFinal-InorganicsA.rpt

SEND REPORT TO:

Howard County Health Department
Bureau of Environmental Health
8930 Stanford Blvd.
Columbia, Maryland 21045

STATE OF MARYLAND

DEPARTMENT OF HEALTH AND MENTAL HYGIENE
LABORATORIES ADMINISTRATION
201 West Preston Street, Baltimore MD 21201
Robert A. Myers, Ph.D., Director

410-465-5129

LABORATORY:

- CENTRAL (410) 767-8145
- E. SHORE REGIONAL (410) 219-9005
- W. MD REGIONAL (301) 759-5115

BACTERIOLOGICAL DRINKING WATER REPORT

PHONE NO.:

Category Code: 4G Inv. No. 29802

Lab No.:

009734

FIELD RECORD

Sample Type:

- Community
- Non-Community
- Non-Transient
- Private
- Check Sample
- C.O.P.
- Bottled Water
- OTHER:

Source: Joe Offervall
 Location: 1671 Henry-ton Rd, Marriuttsville
 Iced: Yes No Treated: Yes No
 Date Collected: 3/18/15 Time Collected: 10:00 a.m. p.m.
 Collector Name: Boleslav Shklyav Collector ID No.: 3179 BS
 Collector Tel. No.: 410-313-1787 Bottle No.: HC1671 County: Howard

Test Requested:

- Quantitative: Colilert®-QT Enterolert®
- P/A: Colilert® Enterolert®
- Multiple Tube Fermentation: MTF MTF (A1 Method-Source Waters Only)
- Heterotrophic Plate Count (HPC-Pour Plate Method)
- OTHER:

13 0000 0000
 County Plant No. Sampling Station
 65 00 00 00
 pH Res. Cl: Free Total Card No.

COMMENTS: Outdoor Faucet

LABORATORY RECORD (DHMH Use Only)

- Test Method(s): SM 9223 Colilert® SM 9223 Colilert®QT SM 9223 Colilert®-18
 SM 9221 B (MTF) SM 9221 B, E (MTF) SM 9221 E (A1)
 (Check all that apply) SM 92215B (HPC) Enterolert® ASTMD 6503-99
 OTHER:

Temperature Control:

29

Thiosulfate:

- Present
- Absent
- Undetermined

P/A TEST (Colilert®/Enterolert®)

| 100 mL sample | MPN/100mL |
|-----------------|-----------|
| Total coliforms | |
| E. coli | |
| Enterococci | |

QUANTITATIVE TEST (Colilert®-QT/Enterolert®)

| Dilution | 100 mL sample | # Positive wells | MPN/100 mL |
|---------------------------------|---------------|------------------|------------|
| <input type="checkbox"/> 1:10 | | 0 | <1 |
| <input type="checkbox"/> 1:100 | | 0 | <1 |
| <input type="checkbox"/> 1:1000 | | 0 | <1 |

HETEROTROPHIC PLATE COUNT

Plate A: Plate B:
 Incubate 24.48.72 hrs/HPC (HPC/ml) =

MAR 18 '15 PM 2:31

RECEIVED

MAR 18 '15 PM 4:09

PLACED IN INCUBATOR

MAR 19 '15 PM 4:14

RESULTS READ/REPORTED

PRESUMPTIVE MTF TEST

| mL of Sample | 10 mL |
|--------------|-------------|
| Gas/24h | MAR 23 2015 |
| Gas/48h | |

CONFIRMED MTF TEST (MTF/A1 Method)

| mL of Sample | 10 mL |
|-----------------|-------|
| Total Coliforms | |
| Fecal Coliforms | |

RESULTS

| No. of Positives (+) | MPN/100mL |
|----------------------|-----------|
| | |

SAMPLE INVALIDATION:

- Sample Rejection
- Laboratory Accident
- Other:

RESAMPLE REQUIRED:

YES NO

DATE:

ANALYZED BY/DATE: J. P. 3-19-15

REVIEWED BY/DATE: J. L. 3-19-15

REMARKS:

FAX MAIL EMAIL

This report shall not be reproduced except in full without the written approval of the laboratory. Results only valid for sample received.

SEND REPORT TO:

Howard County Health Department
Bureau of Environmental Health
8930 Stanford Blvd.
Crownsville, Maryland 21045

STATE OF MARYLAND
DEPARTMENT OF HEALTH AND MENTAL HYGIENE
LABORATORIES ADMINISTRATION
201 West Preston Street, Baltimore MD 21201
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BACTERIOLOGICAL DRINKING WATER REPORT

Category Code: 4 G

Inv. No. 29802

Lab No.:

009734

FIELD RECORD

Sample Type:

- Community
- Non-Community
- Non-Transient
- Private
- Check Sample
- C.O.P.
- Bottled Water
- OTHER:

Source: Joe Offervall
 Location: 1671 Henry-ton Rd. Morriottsville
 Iced: Yes No Treated: Yes No
 Date Collected: 3/18/15 Time Collected: 10:00 a.m. p.m.
 Collector Name: Boleslav Shklyav Collector ID No.: 3179 BS
 Collector Tel. No.: 410-313-1787 Bottle No.: HC1671 County: Howard

Test Requested:

- Quantitative: Colilert®-QT Enterolert®
- P/A: Colilert® Enterolert®
- Multiple Tube Fermentation: MTF MTF (A1 Method-Source Waters Only)
- Heterotrophic Plate Count (HPC-Pour Plate Method)
- OTHER:

County Plant No. Sampling Station

 pH Res. Cl: Free Total Card No.

COMMENTS: Outdoor Faucet

LABORATORY RECORD (DHMH Use Only)

- Test SM 9223 Colilert® SM 9223 Colilert®QT SM 9223 Colilert®-18
 Method(s): SM 9221 B (MTF) SM 9221 B, E (MTF) SM 9221 E (A1)
 (Check all that apply) SM 92215B (HPC) Enterolert® ASTM D 6503-99
 OTHER:

Temperature Control:

29

Thiosulfate:

- Present
- Absent
- Undetermined

P/A TEST (Colilert®/Enterolert®)

| 100 mL sample | MPN/100mL |
|-----------------|-----------|
| Total coliforms | |
| <i>E. coli</i> | |
| Enterococci | |

QUANTITATIVE TEST (Colilert®-QT/Enterolert®)

| Dilution | 100 mL sample | # Positive wells | MPN/100 mL |
|---------------------------------|-----------------|------------------|------------|
| <input type="checkbox"/> 1:10 | Total coliforms | 0 | <1 |
| <input type="checkbox"/> 1:100 | <i>E. coli</i> | 0 | <1 |
| <input type="checkbox"/> 1:1000 | Enterococci | | |

HETEROTROPHIC PLATE COUNT

Plate A: Plate B:
 Incubate 24.48.72 hrs/HPC
 (HPC/ml) =

MAR 18 '15 PM 2:31

RECEIVED

MAR 18 '15 PM 4:09

PLACED IN INCUBATOR

MAR 19 '15 PM 4:14

RESULTS READ/REPORTED

RECEIVED

| | |
|--------------|-------|
| mL of Sample | 10 mL |
| Gas/24h | |
| Gas/48h | |

MAR 26 2015

CONFIRMED MTF TEST (MTF/A1 Method)

| | |
|-----------------|---------------------------|
| mL of Sample | HOWARD COUNTY HEALTH DEPT |
| Total Coliforms | COMMUNITY HYGIENE PROGRAM |
| Fecal Coliforms | |

RESULTS

| No. of Positives (+) | MPN/100mL |
|----------------------|-----------|
| | |
| | |

SAMPLE INVALIDATION:

- Sample Rejection
- Laboratory Accident
- Other: _____

RESAMPLE REQUIRED:

YES NO

DATE: _____

ANALYZED BY/DATE: P. Payer 3-19-15

REVIEWED BY/DATE: J. Lepore 3-19-15

REMARKS:

FAX MAIL EMAIL

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