



Burlington, WA *Corporate Laboratory (a)*
1620 S Walnut St - Burlington, WA 98233 - 800.755.9295 • 360.757.1400

Bellingham, WA *Microbiology (b)*
805 Orchard Dr Ste 4 - Bellingham, WA 98225 - 360.715.1212

Portland, OR *Microbiology/Chemistry (c)*
9725 SW Commerce Cr Ste A2 - Wilsonville, OR 97070 - 503.682.7802

Corvallis, OR *Microbiology/Chemistry (d)*
1100 NE Circle Blvd, Ste 130 - Corvallis, OR 97330 - 541.753.4946

Bend, OR *Microbiology (e)*
20332 Empire Blvd Ste 4 - Bend, OR 97701 - 541.639.8425



Washington State Department of Health WATER BACTERIOLOGICAL ANALYSIS

Client Name: **Burton Water Company / Evan Simmons**
PO Box 1938
Vashon, WA 98070

Reference Number: 22-04024
Project: Bacteria

System Name: BURTON WATER CO
System ID Number: 09800L
DOH Source Number: 00 - Distribution Sample (Bacteria)
Sample Type: D - Drinking Water
Sample Purpose: C - Compliance
Sample Location: Loesch
County: King
Sampled By: Evan Simmons
Sampler Phone:

Repeat Sample Number:
Lab Number: 164-07832
Field ID:
Date Collected: 2/2/22 15:40
Date Received: 2/3/22
Date Set: 2/3/22 12:20
Date Analyzed: 2/4/22 10:06
Report Date: 2/4/22
Comment: Cl2: 0.60
Approved By: ckk,clh

Authorized by:

Ceann K Knox
Lab Manager, Bellingham

DOH#	PARAMETER	RESULT	Qualifier	UNITS	Analyst	METHOD	Batch	COMMENT
1	TOTAL COLIFORM	Satisfactory, Coliforms Absent		per 100mL	rml	SM9223 B	m_220203a	
2	E. COLI	Absent		per 100mL		SM9223 B	m_220203a	

If the sample is unsatisfactory you can get information at the following health department websites or phone numbers:

- Island Co: <http://www.islandcounty.net/health/Envh/DrinkingWater/index.htm>
- San Juan Co: <http://www.sanjuanco.com/health/ehswater.aspx>
- Skagit Co: http://www.skagitcounty.net/drinkingwater_ or 360-336-9380
- Snohomish Co: 425-339-5250
- Whatcom Co: http://www.co.whatcom.wa.us/health/environmental/drinking_water/index.jsp
- WSDOH: <http://www.doh.wa.gov/ehp/dw/Programs/coliform.htm>

NOTES:

If the result is Unsatisfactory, three (3) repeat samples and groundwater source samples are required for Group A Public Water Systems. Private individuals should investigate the cause of the unsatisfactory result and resample.
If E. Coli or Fecal Coliform are present in sample do not drink the water until it is properly treated.

*If data qualifiers are present, see accompanying Qualifier Definition report.



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PO Box 1938
Vashon, WA 98070

Reference Number: **22-04024**
Project: **Bacteria**

System Name: **BURTON WATER CO**
System ID Number: **09800L**
DOH Source Number: **00 - Distribution Sample (Bacteria)**
Sample Type: **D - Drinking Water**
Sample Purpose: **C - Compliance**
Sample Location: **Station 0.70**
County: **King**
Sampled By: **Evan Simmons**
Sampler Phone:

Repeat Sample Number:
Lab Number: **164-07833**
Field ID:
Date Collected: **2/2/22 15:20**
Date Received: **2/3/22**
Date Set: **2/3/22 12:20**
Date Analyzed: **2/4/22 10:06**
Report Date: **2/4/22**
Comment: **Cl2: 0.70**
Approved By: **ckk,clh**

Authorized by:

Ceann K Knox
Lab Manager, Bellingham

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- Skagit Co: http://www.skagitcounty.net/drinkingwater_ or 360-336-9380
- Snohomish Co: [425-339-5250](http://www.snohomishcountywa.gov/health/ehs/ehs250)
- Whatcom Co: http://www.co.whatcom.wa.us/health/environmental/drinking_water/index.jsp
- WSDOH: <http://www.doh.wa.gov/ehp/dw/Programs/coliform.htm>

NOTES:

If the result is Unsatisfactory, three (3) repeat samples and groundwater source samples are required for Group A Public Water Systems. Private individuals should investigate the cause of the unsatisfactory result and resample.
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