

Nova Scotia Health Authority
 SOUTH SHORE REGIONAL HOSPITAL
 90 GLEN ALLAN DRIVE
 BRIDGEWATER , NS
 B4V 3S6

NAME: REGION, OF QUEENS MUNICIPALITY
 ACCT#:DK0001088/24
 ADDRESS: PO BOX 1264
 ADDRESS: LIVERPOOL, NS, B0T 1K0
 PHONE#: (902)354-7170
 LOCATION: SS.LABO
 SUBMITTING DR: CASH WATER CLIENT
 COPIES TO : FAX, 9023545038, RQM

Specimen: WT24:W0007698R Collected: 17/09/24-0730 Status: COMP Req#: 14669868
 Received: 17/09/24-1151

Source: MUNICIPAL

Sp Desc:TREATED

Ordered: WATER P/A

Queries: Analysis Requested Both Total and E.coli
 Sample Information SAMPLE PORT
 Drinking Water Category? GOVERNMENT
 Contact Telephone Number 9023547170
 Source Address SCHOOL STREET
 Postal Code B0T 1K0
 Sample Collected By DHL
 Date Refrigerated 17/09/24
 Time Refrigerated 0730
 Delivery By Fax Y

PERFORMING SITE: YARMOUTH REGIONAL HOSPITAL

MICROBIOLOGY

> WATER PRESENT/ABSENCE	Final	18/09/24-1342	YR
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.

YR - YARMOUTH REGIONAL HOSPITAL

***** Test Performed at Yarmouth Regional Hospital LAB *****
 Lab Fax (902)749-1576

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 ACCT#:DK0001088/24
 ADDRESS: PO BOX 1264
 ADDRESS: LIVERPOOL, NS, BOT 1K0
 PHONE#: (902)354-7170
 LOCATION: SS.LABO
 SUBMITTING DR: CASH WATER CLIENT
 COPIES TO : FAX, 9023545038, RQM

Specimen: WT24:W0007701R Collected: 17/09/24-0555 Status: COMP Req#: 14669879
 Received: 17/09/24-1157

Source: MUNICIPAL
 Sp Desc:TREATED
 Ordered: WATER P/A
 Queries: Analysis Requested Both Total and E.coli
 Sample Information LAB
 Drinking Water Category? GOVERNMENT
 Contact Telephone Number 9023547071
 Source Address WATERPLANT
 Postal Code B0J 1T0
 Sample Collected By DLH
 Date Refrigerated 17/09/24
 Time Refrigerated 0730

PERFORMING SITE: YARMOUTH REGIONAL HOSPITAL

MICROBIOLOGY

>	WATER PRESENT/ABSENCE	Final	18/09/24-1342	YR
	TOTAL COLIFORM	ABSENT/100ML		
	E.coli	ABSENT/100ML		

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 ADDRESS: PO BOX 1264
 ADDRESS: LIVERPOOL, NS, B0T 1K0
 PHONE#: (902)354-7170
 LOCATION: SS.LABO
 SUBMITTING DR: CASH WATER CLIENT
 COPIES TO : FAX, 9023545038, RQM

Specimen: WT24:W0007703R Collected: 17/09/24-0645 Status: COMP Req#: 14669884
 Received: 17/09/24-1159

Source: MUNICIPAL

Sp Desc:TREATED

Ordered: WATER P/A

Queries: Analysis Requested Both Total and E.coli
 Sample Information SAMPLE PORT
 Drinking Water Category? GOVERNMENT
 Contact Telephone Number 9023547170
 Source Address BROOKLYN
 Postal Code B0T 1K0
 Sample Collected By DHL
 Date Refrigerated 17/09/24
 Time Refrigerated 0730
 Delivery By Fax Y

PERFORMING SITE: YARMOUTH REGIONAL HOSPITAL

MICROBIOLOGY

> WATER PRESENT/ABSENCE	Final	18/09/24-1342	YR
TOTAL COLIFORM	ABSENT/100ML		
E.coli	ABSENT/100ML		

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ADDRESS: PO BOX 1264
ADDRESS: LIVERPOOL, NS, B0T 1K0
PHONE#: (902)354-7170
LOCATION: SS.LABO
SUBMITTING DR: CASH WATER CLIENT
COPIES TO : FAX, 9023545038, RQM

Specimen: WT24:W0007705R Collected: 17/09/24-0710 Status: COMP Req#: 14669892
Received: 17/09/24-1202

Source: MUNICIPAL

Sp Desc:TREATED

Ordered: WATER P/A

Queries: Analysis Requested Both Total and E.coli
Sample Information SAMPLE PORT
Drinking Water Category? GOVERNMENT
Contact Telephone Number 9023547170
Source Address OLD COHN
Postal Code B0T 1K0
Sample Collected By DHL
Date Refrigerated 17/09/24
Time Refrigerated 0730
Delivery By Fax Y

PERFORMING SITE: YARMOUTH REGIONAL HOSPITAL

MICROBIOLOGY

> WATER PRESENT/ABSENCE	Final	18/09/24-1342	YR
TOTAL COLIFORM	ABSENT/100ML		
E.coli	ABSENT/100ML		

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 LOCATION: SS.LABO
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 COPIES TO : FAX, 9023545038, RQM

Specimen: WT24:W0007710R Collected: 17/09/24-0625 Status: COMP Req#: 14669909
 Received: 17/09/24-1206

Source: MUNICIPAL

Sp Desc:TREATED

Ordered: WATER P/A

Queries: Analysis Requested Both Total and E.coli
 Sample Information SAMPLE PORT
 Drinking Water Category? GOVERNMENT
 Contact Telephone Number 9023547170
 Source Address WORKS DEPT
 Postal Code BOT 1K0
 Sample Collected By DLH
 Date Refrigerated 17/09/24
 Time Refrigerated 0730
 Delivery By Fax Y

PERFORMING SITE: YARMOUTH REGIONAL HOSPITAL

MICROBIOLOGY

>	WATER PRESENT/ABSENCE	Final	18/09/24-1342	YR
	TOTAL COLIFORM	ABSENT/100ML		
	E.coli	ABSENT/100ML		

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