City of Mount Clemens Water Purification Plant
36570 Jefferson, Harrison Township, MI 48045

MEQ Certified Lab # 4510

Bacteriological Samples

Month of Sept, 20 26

Address #1	Location	Chlorine (Free) / Total	Date Collected	Time Collected	Samplers Signature	Sample Type	Date Received	Time Received
322 S. Main Citgo	Sink	1.19	9-28-26	11:36	[signature]	(Routine) Repeat Special	9.28.26	1320
Analysis Requested: Coliforms	Test Type Colilert Method 9233B		Date Planted	Time Planted	Signature	Date Read	Time Read	Signature
Received for Lab by: A. Fuchs	24 hour		9.28.26	1328	[signature]	9-29-26	1325	[signature]
Note any remarks or deficiency in the condition of the sample.		Emergency contact for positive samples.				Sample Result A WATER CONSIDERED SAFE		
Date, Time, and Name of Person Contacted for positive sample results. (Notification must be made within 24 hours)								

Address #2	Location	Chlorine (Free) / Total	Date Collected	Time Collected	Samplers Signature	Sample Type	Date Received	Time Received
121 W. St clair Romeo PD	Sink	.82	9-28-26	11:51	[signature]	(Routine) Repeat Special	9.28.26	1320
Analyses Requested: Coliforms	Test Type Colilert Method 9233B		Date Planted	Time Planted	Signature	Date Read	Time Read	Signature
Received for Lab by: A. Fuchs	24 hour		9.28.26	1328	[signature]	9-29-26	1325	[signature]
Note any remarks or deficiency in the condition of the sample.		Emergency contact for positive samples.				Sample Result A WATER CONSIDERED SAFE		
Date, Time, and Name of Person Contacted for positive sample results. (Notification must be made within 24 hours)								

Company Name: Village of Romeo DPW **WSSN#** 5780

Billing Address Or Attach Business Card
(only if company has never been here)

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Bacteriological Samples

Month of Sept, 20 26

Address #3	Location	Chlorine Free / Total	Date Collected	Time Collected	Samplers Signature	Sample Type	Date Received	Time Received
6 water Sheet 2	Sink	.58	9-28-26	12:24	[signature]	(Routine) Repeat Special	9.28.26	1320
Analysis Requested: Coliforms	Test Type Colilert Method 9233B		Date Planted	Time Planted	Signature	Date Read	Time Read	Signature
Received for Lab by: A. Fuhs	24 hour		9.28.26	1325	[signature]	9.29.26	1325	[signature]
Note any remarks or deficiency in the condition of the sample.		Emergency contact for positive samples.				Sample Result A WATER CONSIDERED SAFE		
Date, Time, and Name of Person Contacted for positive sample results. (Notification must be made within 24 hours)								

Address #4	Location	Chlorine Free / Total	Date Collected	Time Collected	Samplers Signature	Sample Type	Date Received	Time Received
Romeo Rental	Sink	.85	9-28-26	12:50	[signature]	(Routine) Repeat Special	9.28.26	1320
Analyses Requested: Coliforms	Test Type Colilert Method 9233B		Date Planted	Time Planted	Signature	Date Read	Time Read	Signature
Received for Lab by: A. Fuhs	24 hour		9.28.26	1325	[signature]	9.29.26	1325	[signature]
Note any remarks or deficiency in the condition of the sample.		Emergency contact for positive samples.				Sample Result A WATER CONSIDERED SAFE		
Date, Time, and Name of Person Contacted for positive sample results. (Notification must be made within 24 hours)								

Company Name: Village of Romeo DPW **WSSN#** 5780

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