



ST HELENA PUBLIC HEALTH LABORATORY
 General Hospital, Jamestown, St Helena
 Tel: +290 22500 Ext. 2035 Fax: +290 22530
 E-mail: microbiology @ sainthelena.gov.sh

WATER MICROBIOLOGY TEST REPORT

REPORT NUMBER: 0027/23
 ISSUE DATE: 06/04/2023



Sample type: *Swimming Pool* *Routine Control* **Mains – Chlorinated** *Mains – Untreated* *Other (Specify)*

Sample collection details: *Collected by: Darren Isaac* *Name & Address of Customer: Connect St Helena, Seales Corner* *Collection date: 03/04/2023*

Sample receipt details: *Date Received in Lab: 03/04/2023* *Testing Date: 03/04/2023–06/04/2023*

Lab No.	Source/Site	* Macroscopic Appearance	* Cl. Levels (ppm)		Microbiology Results				
			Free	Total	* WM 004 Total Colony Count cfu/1ml		WM 002		WM 003 <i>Enterococci</i> cfu/100ml
					22°C/72h	37°C/48h	Coliforms cfu/100 ml	<i>E.coli</i> cfu/100 ml	
W025/1	Bellstone Levelwood	Clear	1.26	1.45	3	9	Not Detected	Not Detected	Not Detected
W025/2	Nr Fox's Garage Deadwood	Clear	1.29	1.56	0	0	Not Detected	Not Detected	Not Detected
W025/3	Nr Cleughs Plain Shop	Clear	1.07	1.21	0	0	Not Detected	Not Detected	Not Detected
W025/4	Nr Museum Jamestown	Clear	1.39	1.75	0	1	Not Detected	Not Detected	Not Detected
W025/5	Nr Red Hill Levelwood Sheltered Accommodation	Clear	1.37	1.68	0	0	Not Detected	Not Detected	Not Detected
W025/6	Nr Reggies Takeaways Bottom Woods	Cloudy	1.11	1.27	1	5	Not Detected	Not Detected	Not Detected
W025/7	Cow Path Tank	Clear	1.17	1.34	0	0	Not Detected	Not Detected	Not Detected
W025/8	Nr Playground Jamestown	Clear	1.42	1.89	0	0	Not Detected	Not Detected	Not Detected

KEY: cfu – colony forming units
NE – Not examined





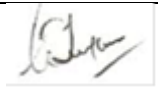
ST HELENA PUBLIC HEALTH LABORATORY
 General Hospital, Jamestown, St Helena
 Tel: +290 22500 Ext. 2035 Fax: +290 22530
 E-mail: microbiology @ sainthelena.gov.sh

WATER MICROBIOLOGY TEST REPORT

REPORT NUMBER: 0027/23
ISSUE DATE: 06/04/2023



4564

Reported by Food Microbiologist:	Kudzaiishe Nayoto	Signature:		Date:	06/04/2023
Checked by Quality Manager:	Toni Joshua	Signature:		Date:	06/04/2023
Authorized by Lab Manager:	Geoffrey Benjamin	Signature:		Date:	06/04/2023

Notes:

1. Tests marked with * are NOT UKAS accredited
2. **Opinions and interpretations expressed herein are outside the scope of UKAS Accreditation.**
3. These results relate **ONLY** to the samples as received and tested.
4. Chlorine levels and macroscopic appearance of water samples are provided by the customer on the request form and not by the Laboratory. These can affect the validity of results.
5. This report shall not be reproduced except in full, without written approval of the St Helena Public Health Laboratory.