



ST HELENA PUBLIC HEALTH LABORATORY
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WATER MICROBIOLOGY TEST REPORT



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

Sample collection details: *Collected by: Brian Young* Name & Address of Customer: *Connect St Helena Seales Corner* Collection date: *27/09/2019*

Sample receipt details: *Date Received in Lab: 27/09/2019* Testing Date: *30/09/2019*

Lab No.	Source/Site	* Macroscopic Appearance	* Cl. Levels (ppm)		* WMM 004 Total Colony Count cfu/1ml			WMM 002 Microbiology Results		WMM 003
			Free	Total	22°C/72h	37°C/48h	Coliforms cfu/100 ml	E.coli cfu/100 ml	Enterococci cfu/100ml	
W997/1	Standpipe Solomon Shop Levelwood	Clear	2.65	2.86	Not examined	Not examined	Not examined	Not examined	Not detected	

KEY: cfu – colony forming units
 NE – Not examined

Reported by Food Microbiologist:	Kudzaishe Nayoto	Signature:		Date:	03/10/19
Checked by Ag Quality Manager:	Geoffrey Benjamin	Signature:		Date:	03/10/19
Authorized by Lab Manager:	Geoffrey Benjamin	Signature:		Date:	03/10/19

- 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 tested.
 4. Chlorine levels and macroscopic appearance of water samples are provided by the customer on the request form and not by the Laboratory.
 5. This report shall not be reproduced except in full, without written approval of the St Helena Public Health Laboratory.