

AMEER DIAGNOSTIC LABORATORY

A DOH ACCREDITED WATER AND DRUG TESTING LABORATORY

DOH Accreditation No.: 03-004-76-LW-2 & 03-0028-16-PFSS-R

A. Mabini St., Mojon, Malolos City (Beside SSS Office)

Tel. No. 662-6448; Globeline: 305 0430 ; Cell No. 0925 525 5504/ 0923 737 88982/ 0925 525 5505/ 0917 525 8199

EMAIL : ameerdtl_lab@yahoo.com

BACTERIOLOGICAL TEST RESULT FOR DRINKING WATER

Date: **DECEMBER 17, 2016**

Name of Client: **LICO**
Business Name: **SAN RAFAEL WATER DISTRICT**

PHYSICAL CHARACTERISTICS : **Clear, No Sediments**

SAMPLE DESCRIPTION:

Sample Taken By : **REGINO V. GONZALES**
Date Received : **DECEMBER 15, 2016**
Date of Sampling : **DECEMBER 15, 2016**
Time of Sampling : **03:33 AM**
Place of Sampling : **SAN RAFAEL, BULACAN**
Source of Sample : **DEEPWELL**

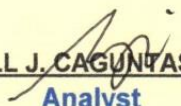
Test Performed	Methodology	No. of Positive Tubes (out of 5 tubes)	Result MPN / 100 mL	Standard MPN / 100 mL
Total Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Fecal Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Heterotrophic Plate Count	Pour Plate Method		30 CFU/mL	<500 CFU/mL

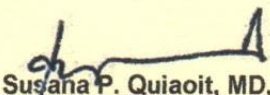
REMARKS: The sample **PASSED** to the Philippine National Standards for Drinking Water (Department of Health 2007) with respect to coliform bacteria and heterotrophic plate count.

REFERENCES: Philippine National Standards for Drinking Water of 2007

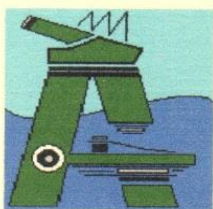
NOTE: Test result is based on sample as received and it is valid for **one (1) month** from the date issued.

RESULT VALID ONLY WITH DRY SEAL


LYNELL J. CAGUNTAS, RMT
Analyst


Susana P. Quiaoit, MD, FPSP
Head of the Laboratory

CTL#:6022-16



AMEER DIAGNOSTIC LABORATORY

A DOH ACCREDITED WATER AND DRUG TESTING LABORATORY

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EMAIL : ameerdtl_lab@yahoo.com

BACTERIOLOGICAL TEST RESULT FOR DRINKING WATER

Date: **DECEMBER 17, 2016**

Name of Client: **CAINGIN**

Business Name: **SAN RAFAEL WATER DISTRICT**

PHYSICAL CHARACTERISTICS : **Clear, No Sediments**

SAMPLE DESCRIPTION:

Sample Taken By : **REGINO V. GONZALES**
Date Received : **DECEMBER 15, 2016**
Date of Sampling : **DECEMBER 15, 2016**
Time of Sampling : **03:45 AM**
Place of Sampling : **SAN RAFAEL, BULACAN**
Source of Sample : **DEEPWELL**

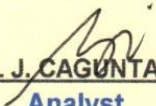
Test Performed	Methodology	No. of Positive Tubes (out of 5 tubes)	Result MPN / 100 mL	Standard MPN / 100 mL
Total Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Fecal Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Heterotrophic Plate Count	Pour Plate Method		15 CFU/mL	<500 CFU/mL

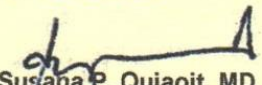
REMARKS: The sample **PASSED** to the Philippine National Standards for Drinking Water (Department of Health 2007) with respect to coliform bacteria and heterotrophic plate count.

REFERENCES: Philippine National Standards for Drinking Water of 2007

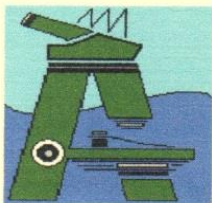
NOTE: Test result is based on sample as received and it is valid for **one (1) month** from the date issued.

RESULT VALID ONLY WITH DRY SEAL


LYNELL J. CAGUNTAS, RMT
Analyst


Susana P. Quiaoit, MD, FPSP
Head of the Laboratory

CTL#:6023-16



AMEER DIAGNOSTIC LABORATORY

A DOH ACCREDITED WATER AND DRUG TESTING LABORATORY

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EMAIL : ameerdtl_lab@yahoo.com

BACTERIOLOGICAL TEST RESULT FOR DRINKING WATER

Date: **DECEMBER 17, 2016**

Name of Client: **CAPIHAN**
Business Name: **SAN RAFAEL WATER DISTRICT**

PHYSICAL CHARACTERISTICS : **Clear, No Sediments**

SAMPLE DESCRIPTION:

Sample Taken By : **REGINO V. GONZALES**
Date Received : **DECEMBER 15, 2016**
Date of Sampling : **DECEMBER 15, 2016**
Time of Sampling : **04:40 AM**
Place of Sampling : **SAN RAFAEL, BULACAN**
Source of Sample : **DEEPWELL**

Test Performed	Methodology	No. of Positive Tubes (out of 5 tubes)	Result MPN / 100 mL	Standard MPN / 100 mL
Total Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Fecal Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Heterotrophic Plate Count	Pour Plate Method		12 CFU/mL	<500 CFU/mL

REMARKS: The sample **PASSED** to the Philippine National Standards for Drinking Water (Department of Health 2007) with respect to coliform bacteria and heterotrophic plate count.

REFERENCES: Philippine National Standards for Drinking Water of 2007

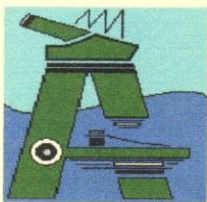
NOTE: Test result is based on sample as received and it is valid for **one (1) month** from the date issued.

RESULT VALID ONLY WITH DRY SEAL

LYNELL J. CAGUNYAS, RMT
Analyst

Susana P. Quiaoit, MD, FPSP
Head of the Laboratory

CTL#:6024-16



AMEER DIAGNOSTIC LABORATORY

A DOH ACCREDITED WATER AND DRUG TESTING LABORATORY

DOH Accreditation No.: 03-004-76-LW-2 & 03-0028-16-PFSS-R

A. Mabini St., Mojon, Malolos City (Beside SSS Office)

Tel. No. 662-6448; Globeline: 305 0430 ; Cell No. 0925 525 5504/ 0923 737 88982/ 0925 525 5505/ 0917 525 8199

EMAIL : ameerdtl_lab@yahoo.com

BACTERIOLOGICAL TEST RESULT FOR DRINKING WATER

Date: **DECEMBER 17, 2016**

Name of Client: **SAN ROQUE**
Business Name: **SAN RAFAEL WATER DISTRICT**

PHYSICAL CHARACTERISTICS : **Clear, No Sediments**

SAMPLE DESCRIPTION:

Sample Taken By : **REGINO V. GONZALES**
Date Received : **DECEMBER 15, 2016**
Date of Sampling : **DECEMBER 15, 2016**
Time of Sampling : **04:50 AM**
Place of Sampling : **SAN RAFAEL, BULACAN**
Source of Sample : **DEEPWELL**

Test Performed	Methodology	No. of Positive Tubes (out of 5 tubes)	Result MPN / 100 mL	Standard MPN / 100 mL
Total Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Fecal Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Heterotrophic Plate Count	Pour Plate Method		32 CFU/mL	<500 CFU/mL

REMARKS: The sample **PASSED** to the Philippine National Standards for Drinking Water (Department of Health 2007) with respect to coliform bacteria and heterotrophic plate count.

REFERENCES: Philippine National Standards for Drinking Water of 2007

NOTE: Test result is based on sample as received and it is valid for **one (1) month** from the date issued.

RESULT VALID ONLY WITH DRY SEAL

LYNELL J. CAGUNTAS, RMT
Analyst

Susana P. Quiaoit, MD, FPSP
Head of the Laboratory

CTL#:6025-16



AMEER DIAGNOSTIC LABORATORY

A DOH ACCREDITED WATER AND DRUG TESTING LABORATORY

DOH Accreditation No.: 03-004-76-LW-2 & 03-0028-16-PFSS-R

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Tel. No. 662-6448; Globeline: 305 0430 ; Cell No. 0925 525 5504/ 0923 737 88982/ 0925 525 5505/ 0917 525 8199

EMAIL : ameerdtl_lab@yahoo.com

BACTERIOLOGICAL TEST RESULT FOR DRINKING WATER

Date: **DECEMBER 17, 2016**

Name of Client: **MAGUINAO GULOD**
Business Name: **SAN RAFAEL WATER DISTRICT**

PHYSICAL CHARACTERISTICS : **Clear, No Sediments**

SAMPLE DESCRIPTION:

Sample Taken By : **REGINO V. GONZALES**
Date Received : **DECEMBER 15, 2016**
Date of Sampling : **DECEMBER 15, 2016**
Time of Sampling : **05:15 AM**
Place of Sampling : **SAN RAFAEL, BULACAN**
Source of Sample : **DEEPWELL**

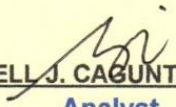
Test Performed	Methodology	No. of Positive Tubes (out of 5 tubes)	Result MPN / 100 mL	Standard MPN / 100 mL
Total Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Fecal Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Heterotrophic Plate Count	Pour Plate Method		8 CFU/mL	<500 CFU/mL

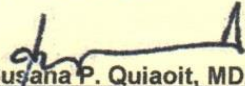
REMARKS: The sample **PASSED** to the Philippine National Standards for Drinking Water (Department of Health 2007) with respect to coliform bacteria and heterotrophic plate count.

REFERENCES: Philippine National Standards for Drinking Water of 2007

NOTE: Test result is based on sample as received and it is valid for **one (1) month** from the date issued.

RESULT VALID ONLY WITH DRY SEAL


LYNELL J. CAGUNTAS, RMT
Analyst


Susana P. Quiaoit, MD, FPSP
Head of the Laboratory

CTL#:6026-16



AMEER DIAGNOSTIC LABORATORY

A DOH ACCREDITED WATER AND DRUG TESTING LABORATORY

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Tel. No. 662-6448; Globeline: 305 0430; Cell No. 0925 525 5504/ 0923 737 88982/ 0925 525 5505/ 0917 525 8199

EMAIL : ameerdtl_lab@yahoo.com

BACTERIOLOGICAL TEST RESULT FOR DRINKING WATER

Date: **DECEMBER 17, 2016**

Name of Client: **CRUZ NA DAAN**
Business Name: **SAN RAFAEL WATER DISTRICT**

PHYSICAL CHARACTERISTICS : **Clear, No Sediments**

SAMPLE DESCRIPTION:

Sample Taken By : **REGINO V. GONZALES**
Date Received : **DECEMBER 15, 2016**
Date of Sampling : **DECEMBER 15, 2016**
Time of Sampling : **05:34 AM**
Place of Sampling : **SAN RAFAEL, BULACAN**
Source of Sample : **DEEPWELL**


Test Performed	Methodology	No. of Positive Tubes (out of 5 tubes)	Result MPN / 100 mL	Standard MPN / 100 mL
Total Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Fecal Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Heterotrophic Plate Count	Pour Plate Method		24 CFU/mL	<500 CFU/mL

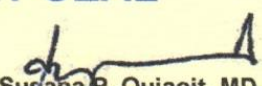
REMARKS: The sample **PASSED** to the Philippine National Standards for Drinking Water (Department of Health 2007) with respect to coliform bacteria and heterotrophic plate count.

REFERENCES: Philippine National Standards for Drinking Water of 2007

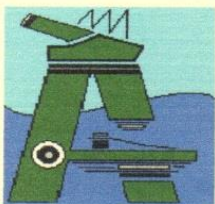
NOTE: Test result is based on sample as received and it is valid for **one (1) month** from the date issued.

RESULT VALID ONLY WITH DRY SEAL


LYNELL J. CAGUNTAS, RMT
Analyst


Susana P. Quiaoit, MD, FPSP
Head of the Laboratory

CTL#:6027-16



AMEER DIAGNOSTIC LABORATORY

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DOH Accreditation No.: 03-004-76-LW-2 & 03-0028-16-PFSS-R

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Tel. No. 662-6448; Globeline: 305 0430; Cell No. 0925 525 5504/ 0923 737 88982/ 0925 525 5505/ 0917 525 8199

EMAIL : ameerdtl_lab@yahoo.com

BACTERIOLOGICAL TEST RESULT FOR DRINKING WATER

Date: **DECEMBER 17, 2016**

Name of Client: **MAASIM**
Business Name: **SAN RAFAEL WATER DISTRICT**

PHYSICAL CHARACTERISTICS : **Clear, No Sediments**

SAMPLE DESCRIPTION:

Sample Taken By : **REGINO V. GONZALES**
Date Received : **DECEMBER 15, 2016**
Date of Sampling : **DECEMBER 15, 2016**
Time of Sampling : **05:48 AM**
Place of Sampling : **SAN RAFAEL, BULACAN**
Source of Sample : **DEEPWELL**

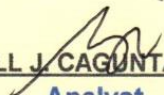
Test Performed	Methodology	No. of Positive Tubes (out of 5 tubes)	Result MPN / 100 mL	Standard MPN / 100 mL
Total Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Fecal Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Heterotrophic Plate Count	Pour Plate Method		16 CFU/mL	<500 CFU/mL

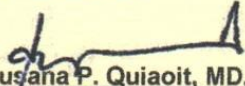
REMARKS: The sample **PASSED** to the Philippine National Standards for Drinking Water (Department of Health 2007) with respect to coliform bacteria and heterotrophic plate count.

REFERENCES: Philippine National Standards for Drinking Water of 2007

NOTE: Test result is based on sample as received and it is valid for **one (1) month** from the date issued.

RESULT VALID ONLY WITH DRY SEAL


LYNELL J. CAGUNTAS, RMT
Analyst


Susana P. Quiaoit, MD, FPSP
Head of the Laboratory

CTL#:6028-16



AMEER DIAGNOSTIC LABORATORY

A DOH ACCREDITED WATER AND DRUG TESTING LABORATORY

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EMAIL : ameerdtl_lab@yahoo.com

BACTERIOLOGICAL TEST RESULT FOR DRINKING WATER

Date: **DECEMBER 17, 2016**

Name of Client: **SAN AGUSTIN**
Business Name: **SAN RAFAEL WATER DISTRICT**

PHYSICAL CHARACTERISTICS : **Clear, No Sediments**

SAMPLE DESCRIPTION:

Sample Taken By : **REGINO V. GONZALES**
Date Received : **DECEMBER 15, 2016**
Date of Sampling : **DECEMBER 15, 2016**
Time of Sampling : **06:16 AM**
Place of Sampling : **SAN RAFAEL, BULACAN**
Source of Sample : **DEEPWELL**

Test Performed	Methodology	No. of Positive Tubes (out of 5 tubes)	Result MPN / 100 mL	Standard MPN / 100 mL
Total Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Fecal Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Heterotrophic Plate Count	Pour Plate Method		40 CFU/mL	<500 CFU/mL

REMARKS: The sample **PASSED** to the Philippine National Standards for Drinking Water (Department of Health 2007) with respect to coliform bacteria and heterotrophic plate count.

REFERENCES: Philippine National Standards for Drinking Water of 2007

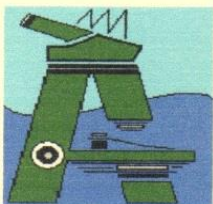
NOTE: Test result is based on sample as received and it is valid for **one (1) month** from the date issued.

RESULT VALID ONLY WITH DRY SEAL

LYNELL J. CAGUNTAS, RMT
Analyst

Susana P. Quiaoit, MD, FPSP
Head of the Laboratory

CTL#:6029-16



AMEER DIAGNOSTIC LABORATORY

A DOH ACCREDITED WATER AND DRUG TESTING LABORATORY

DOH Accreditation No.: 03-004-76-LW-2 & 03-0028-16-PFSS-R

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EMAIL: ameerdtl_lab@yahoo.com

BACTERIOLOGICAL TEST RESULT FOR DRINKING WATER

Date: **DECEMBER 17, 2016**

Name of Client: **MABALAS-BALAS**
Business Name: **SAN RAFAEL WATER DISTRICT**

PHYSICAL CHARACTERISTICS : **Clear, No Sediments**

SAMPLE DESCRIPTION:

Sample Taken By : **REGINO V. GONZALES**
Date Received : **DECEMBER 15, 2016**
Date of Sampling : **DECEMBER 15, 2016**
Time of Sampling : **06:22 AM**
Place of Sampling : **SAN RAFAEL, BULACAN**
Source of Sample : **DEEPWELL**

Test Performed	Methodology	No. of Positive Tubes (out of 5 tubes)	Result MPN / 100 mL	Standard MPN / 100 mL
Total Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Fecal Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Heterotrophic Plate Count	Pour Plate Method		24 CFU/mL	<500 CFU/mL

REMARKS: The sample **PASSED** to the Philippine National Standards for Drinking Water (Department of Health 2007) with respect to coliform bacteria and heterotrophic plate count.

REFERENCES: Philippine National Standards for Drinking Water of 2007

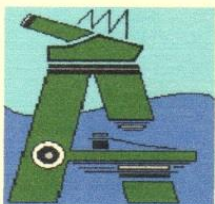
NOTE: Test result is based on sample as received and it is valid for **one (1) month** from the date issued.

RESULT VALID ONLY WITH DRY SEAL

LYNELL J. CAGUNTAS, RMT
Analyst

Susana P. Quiaoit, MD, FPSP
Head of the Laboratory

CTL#:6030-16



AMEER DIAGNOSTIC LABORATORY

A DOH ACCREDITED WATER AND DRUG TESTING LABORATORY

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Tel. No. 662-6448; Globeline: 305 0430; Cell No. 0925 525 5504/ 0923 737 88982/ 0925 525 5505/ 0917 525 8199

EMAIL: ameerdtl_lab@yahoo.com

BACTERIOLOGICAL TEST RESULT FOR DRINKING WATER

Date: **DECEMBER 17, 2016**

Name of Client: **DILIMAN**
Business Name: **SAN RAFAEL WATER DISTRICT**

PHYSICAL CHARACTERISTICS : **Clear, No Sediments**

SAMPLE DESCRIPTION:

Sample Taken By : **REGINO V. GONZALES**
Date Received : **DECEMBER 15, 2016**
Date of Sampling : **DECEMBER 15, 2016**
Time of Sampling : **06:30 AM**
Place of Sampling : **SAN RAFAEL, BULACAN**
Source of Sample : **DEEPWELL**

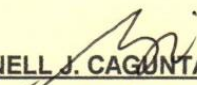
Test Performed	Methodology	No. of Positive Tubes (out of 5 tubes)	Result MPN / 100 mL	Standard MPN / 100 mL
Total Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Fecal Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Heterotrophic Plate Count	Pour Plate Method		44 CFU/mL	<500 CFU/mL

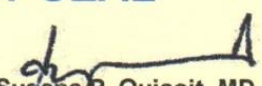
REMARKS: The sample **PASSED** to the Philippine National Standards for Drinking Water (Department of Health 2007) with respect to coliform bacteria and heterotrophic plate count.

REFERENCES: Philippine National Standards for Drinking Water of 2007

NOTE: Test result is based on sample as received and it is valid for **one (1) month** from the date issued.

RESULT VALID ONLY WITH DRY SEAL


LYNELL J. CAGUNTAS, RMT
Analyst


Susana P. Quiaoit, MD, FPSP
Head of the Laboratory

CTL#:6031-16



AMEER DIAGNOSTIC LABORATORY

A DOH ACCREDITED WATER AND DRUG TESTING LABORATORY

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EMAIL : ameerdtl_lab@yahoo.com

BACTERIOLOGICAL TEST RESULT FOR DRINKING WATER

Date: **DECEMBER 17, 2016**

Name of Client: **MORONQUILLO**
Business Name: **SAN RAFAEL WATER DISTRICT**

PHYSICAL CHARACTERISTICS : **Clear, No Sediments**

SAMPLE DESCRIPTION:

Sample Taken By : **REGINO V. GONZALES**
Date Received : **DECEMBER 15, 2016**
Date of Sampling : **DECEMBER 15, 2016**
Time of Sampling : **07:01 AM**
Place of Sampling : **SAN RAFAEL, BULACAN**
Source of Sample : **DEEPWELL**

Test Performed	Methodology	No. of Positive Tubes (out of 5 tubes)	Result MPN / 100 mL	Standard MPN / 100 mL
Total Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Fecal Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Heterotrophic Plate Count	Pour Plate Method		12 CFU/mL	<500 CFU/mL

REMARKS: The sample **PASSED** to the Philippine National Standards for Drinking Water (Department of Health 2007) with respect to coliform bacteria and heterotrophic plate count.

REFERENCES: Philippine National Standards for Drinking Water of 2007

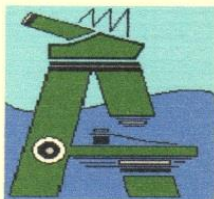
NOTE: Test result is based on sample as received and it is valid for **one (1) month** from the date issued.

RESULT VALID ONLY WITH DRY SEAL

LYNELL J. CAGUNTAS, RMT
Analyst

Susana P. Quiaoit, MD, FPSP
Head of the Laboratory

CTL#:6032-16



AMEER DIAGNOSTIC LABORATORY

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EMAIL: ameerdtl_lab@yahoo.com

BACTERIOLOGICAL TEST RESULT FOR DRINKING WATER

Date: **DECEMBER 17, 2016**

Name of Client: **PULO**
Business Name: **SAN RAFAEL WATER DISTRICT**

PHYSICAL CHARACTERISTICS : **Clear, No Sediments**

SAMPLE DESCRIPTION:

Sample Taken By : **REGINO V. GONZALES**
Date Received : **DECEMBER 15, 2016**
Date of Sampling : **DECEMBER 15, 2016**
Time of Sampling : **07:09 AM**
Place of Sampling : **SAN RAFAEL, BULACAN**
Source of Sample : **DEEPWELL**

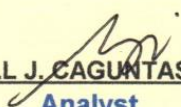
Test Performed	Methodology	No. of Positive Tubes (out of 5 tubes)	Result MPN / 100 mL	Standard MPN / 100 mL
Total Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Fecal Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Heterotrophic Plate Count	Pour Plate Method		35 CFU/mL	<500 CFU/mL

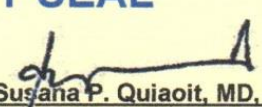
REMARKS: The sample **PASSED** to the Philippine National Standards for Drinking Water (Department of Health 2007) with respect to coliform bacteria and heterotrophic plate count.

REFERENCES: Philippine National Standards for Drinking Water of 2007

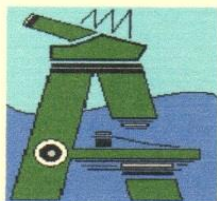
NOTE: Test result is based on sample as received and it is valid for **one (1) month** from the date issued.

RESULT VALID ONLY WITH DRY SEAL


LYNELL J. CAGUNTAS, RMT
Analyst


Susana P. Quiaoit, MD, FPSP
Head of the Laboratory

CTL#:6033-16



AMEER DIAGNOSTIC LABORATORY

A DOH ACCREDITED WATER AND DRUG TESTING LABORATORY

DOH Accreditation No.: 03-004-76-LW-2 & 03-0028-16-PFSS-R

A. Mabini St., Mojon, Malolos City (Beside SSS Office)

Tel. No. 662-6448; Globeline: 305 0430 ; Cell No. 0925 525 5504/ 0923 737 88982/ 0925 525 5505/ 0917 525 8199

EMAIL : ameerdtl_lab@yahoo.com

BACTERIOLOGICAL TEST RESULT FOR DRINKING WATER

Date: **DECEMBER 17, 2016**

Name of Client: **BALAGTAS**
Business Name: **SAN RAFAEL WATER DISTRICT**

PHYSICAL CHARACTERISTICS : **Clear, No Sediments**

SAMPLE DESCRIPTION:

Sample Taken By : **REGINO V. GONZALES**
Date Received : **DECEMBER 15, 2016**
Date of Sampling : **DECEMBER 15, 2016**
Time of Sampling : **07:25 AM**
Place of Sampling : **SAN RAFAEL, BULACAN**
Source of Sample : **DEEPWELL**

Test Performed	Methodology	No. of Positive Tubes (out of 5 tubes)	Result MPN / 100 mL	Standard MPN / 100 mL
Total Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Fecal Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Heterotrophic Plate Count	Pour Plate Method		32 CFU/mL	<500 CFU/mL

REMARKS: The sample **PASSED** to the Philippine National Standards for Drinking Water (Department of Health 2007) with respect to coliform bacteria and heterotrophic plate count.

REFERENCES: Philippine National Standards for Drinking Water of 2007

NOTE: Test result is based on sample as received and it is valid for **one (1) month** from the date issued.

RESULT VALID ONLY WITH DRY SEAL

LYNELL J. CAGUNTAS, RMT
Analyst

CTL#:6034-16

Susana P. Quiaoit, MD, FPSP
Head of the Laboratory



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EMAIL :ameerdtl_lab@yahoo.com

BACTERIOLOGICAL TEST RESULT FOR DRINKING WATER

Date: **DECEMBER 17, 2016**

Name of Client: **POBLACION**
Business Name: **SAN RAFAEL WATER DISTRICT**

PHYSICAL CHARACTERISTICS : **Clear, No Sediments**

SAMPLE DESCRIPTION:

Sample Taken By : **REGINO V. GONZALES**
Date Received : **DECEMBER 15, 2016**
Date of Sampling : **DECEMBER 15, 2016**
Time of Sampling : **07:35 AM**
Place of Sampling : **SAN RAFAEL, BULACAN**
Source of Sample : **DEEPWELL**

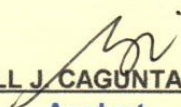
Test Performed	Methodology	No. of Positive Tubes (out of 5 tubes)	Result MPN / 100 mL	Standard MPN / 100 mL
Total Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Fecal Coliform	Multiple Tube Fermentation	0	<1.1	<1.1
Heterotrophic Plate Count	Pour Plate Method		490 CFU/mL	<500 CFU/mL

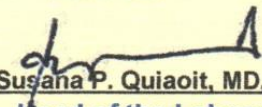
REMARKS: The sample **PASSED** to the Philippine National Standards for Drinking Water (Department of Health 2007) with respect to coliform bacteria and heterotrophic plate count.

REFERENCES: Philippine National Standards for Drinking Water of 2007

NOTE: Test result is based on sample as received and it is valid for **one (1) month** from the date issued.

RESULT VALID ONLY WITH DRY SEAL


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Analyst


Susana P. Quiaoit, MD, FPSP
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