DWP 2022-6933

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
Process for Drinking Water Analysis

City Water, Springs, Surface Water or Public/Community water systems serving more than 14 homes/25+ people cannot be sampled by Environmental Health. If you are served by the city or a community water system, you should contact the respective office and request a copy of their most recent testing results.

Environmental Health does not have an in-house lab that can analyze water samples. Sampling containers and kits are purchased from the North Carolina State Lab. Water samples taken are sent by state Courier to the State Lab located in Raleigh for analysis. Currently it is taking approximately two (2) weeks to get written Bacteriological test results and three (3) to four (4) weeks to get Inorganic test results back. Due to the state Courier pick-up and delivery schedule, the EH staff only collect samples on Monday – Wednesday of each week as needed.

We DO NOT perform free water testing even if requested by a dentist or doctor.

You may come into one of the ICHD-EH offices to apply and pay for whichever sample you want to have done. You may also complete this form and mail it with your payment, payable to IREDELL COUNTY HEALTH DEPT. to the appropriate office address. Current pricing is:

$200.00 Bacteria
$250.00 **each** – Inorganic, Fluoride, Petroleum/VOC, Nitrate/Nitrite, Coal Ash and Hexavalent Chromium
$250.00 Pesticide—You must indicate the SPECIFIC pesticide you want the water tested for
** *Not the brand name, like ROUNDUP or SPECTRACIDE***

ICHD-Environmental Health
610 E. Center Avenue
Mooresville, NC 28115
704-660-3625
(Located on 2nd floor)

ICHD-Environmental Health CENTRAL
Building Standards Center
349 N. Center Street
Statesville, NC 28677
704-878-5305 x3456

IREDELL COUNTY HEALTH DEPARTMENT
ENVIRONMENTAL HEALTH DIVISION
Application for Drinking Water Analysis

Date	PAID
Amount _____	
Received By _____	

NAME: REBA CONNOLLY PHONE: 704 633439
MAILING ADDRESS: _____ EMAIL: —
LOCATION ADDRESS: 608 LINWOOD RD

TYPE OF ANALYSIS REQUESTED: Bacteria _____ Fluoride _____ Inorganic Chemistry ✓
Petroleum/VOC _____ Nitrate/Nitrite ✓ Coal Ash and Hexavalent Chromium _____
Pesticide – specify chemical _____ Other (specify): _____

Is power on at the well? ✓ YES ___ NO Where do you want the sample taken from? NOW (well or kitchen faucet)
Are there any aggressive pets loose on site? ✓ YES ___ NO (If yes, pets MUST be confined at time of our arrival)
DIRECTIONS TO SITE: _____

Applicant Signature: Reba Connolly Date: 8-14-22

Cost: $200 – Bacteria
$250 each – Fluoride, Inorganic, Petroleum/VOC, Nitrate/Nitrite, Coal Ash &Hexavalent Chromium, Pesticide, Other

Public Health
Prevent. Promote. Protect.
Iredell County Health Department

IREDELL COUNTY DEPARTMENT OF ENVIRONMENTAL HEALTH

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DOCUMENTATION TO AUTHORIZE AN OWNER'S LEGAL REPRESENTATIVE

(Check and sign only ONE of the options below)

☐ **1. * APPLICANT AND OWNER ARE THE SAME. *** (*Sign here*) Erika F Connolly

Applications for permits require the "signature of the owner or owner's legal representative" (15A NCAC 18A .1937). If the owner does not sign the application himself or herself, they can submit any one of the following documents to designate their legal representative: *Power of Attorney; Real Estate Contract; Estate executor; Bankruptcy trustee; Court ordered guardianship*
In the absence of the above documentation, the property owner may provide the local health department with documentation that designates a legal representative. A property owner may:
Complete this form to document his or her legal representative, or provide his or her own form that contains the information in this form. If there are multiple property owners, then all property owners must sign the form that designates a legal representative.
By signing a form that designates a legal representative for purposes of 15A NCAC 18A .1937, the property owner authorizes that representative to act on their behalf in matters pertaining to the application and permitting process, including signing or receiving any application, document or permit. The owner retains full responsibility to meet all permit conditions specified by the local health department.

☐ **2.** I, _____, am the legal owner(s) of the property located at _____, identified as PIN (Parcel Identification Number)_____, located in Iredell County, North Carolina.

I do hereby authorize (**print legal representative/company name**) _____, _____, to act as an agent on my behalf in applying for/signing/obtaining any of the documents described below.

- Application for Improvement Permit (IP) / Authorization to Construct (AC)
- Improvement Permit (IP) / Authorization to Construct (AC)
- Application for soil-site evaluation (new/repair)
- Application/permit for private drinking water well/well abandonment
- Application for Compliance Inspection

I agree to abide by all decisions and/or conditions between the legal representative acting on my behalf and the Iredell County Department of Public Health, Environmental Health Division.

_____ _____
Signature of Owner(s) Date

Mooresville - Environmental Health

Fax: 704-662-3239
610 E. Center Avenue, Mooresville, NC 28115

Statesville - Environmental Health
ronda.hart@co.iredell.nc.us
Fax: 704-871-3483
349 N. Center Street, Statesville, NC 28677

North Carolina State Laboratory of Public Health

Environmental Sciences

Inorganic Chemistry

4312 District Drive
MSC 1918
Raleigh, NC 27699-1918

http://slph.ncpublichealth.com
Phone: 919-733-7308
Fax: 919-715-8611

Certificate of Analysis

FINAL REPORT

Report to: **Teanna Kobuck**

IREDELL CO. ENVIRONMENTAL HEALTH DEPT - MOORESVILLE
610 EAST CENTER AVENUE
MOORESVILLE, NC 28115

Name of System:

Reba Connolly
608 Linwood Rd
Mooresville, NC 28115

EIN: 566000309E **Delivery:** **NC Courier**

StarLiMS ID: **ES221102-0058**
Date Collected: 11/01/2022 Time Collected: 13:00 By: Teanna Kobuck
Date Received: 11/02/2022 Time Received: 08:19

Sample Type: Raw
Sample Source: Well water
Sampling Point: Well head
Receipt Temp. : 4.5 °C
Well Permit No. OSWP-2022-6933
GPS Number:

Profile: CA Well Monitoring

Analyte	Test Result	CAMA Screening Level	Unit	Qualifier(s)
Aluminum	<0.1	3.5	mg/L	
Antimony	<0.001	0.001	mg/L	
Arsenic	<0.001	0.010	mg/L	
Barium	<0.1	0.70	mg/L	
Beryllium	<0.001	0.004	mg/L	
Boron	<0.1	0.7	mg/L	
Cadmium	<0.0001	0.002	mg/L	
Calcium	7		mg/L	
Chloride	5.7	250	mg/L	
Chromium	0.003	0.01	mg/L	
Cobalt	<0.001	0.001	mg/L	
Copper	0.013	1.0	mg/L	
Iron	0.70	0.30	mg/L	
Lead	<0.003	0.015	mg/L	
Magnesium	2		mg/L	
Manganese	<0.005	0.05	mg/L	
Mercury	<0.0004	0.001	mg/L	
Molybdenum	<0.005	0.018	mg/L	
Nickel	<0.01	0.1	mg/L	
pH	7.2		N/A	
Potassium	1.966		mg/L	
Selenium	<0.005	0.02	mg/L	
Sodium	8.4	20.0	mg/L	
Strontium	<0.5	2.1	mg/L	
Sulfate	<5	250	mg/L	
Thallium	<0.0001	0.0002	mg/L	
Total Alkalinity	40		mg/L	
Total Dissolved Solids	86	500	mg/L	
Total Hardness	26		mg/L	
Total Suspended Solids	<5		mg/L	
Vanadium	0.0033	0.0003	mg/L	

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610 EAST CENTER AVENUE
MOORESVILLE, NC 28115

Name of System:

Reba Connolly
608 Linwood Rd
Mooresville, NC 28115

EIN: 566000309E **Delivery:** **NC Courier**

StarLiMS ID: **ES221102-0058**

Date Collected: 11/01/2022 Time Collected: 13:00 By: Teanna Kobuck
Date Received: 11/02/2022 Time Received: 08:19

Sample Type: Raw Sampling Point: Well head Well Permit No. OSWP-2022-6933
Sample Source: Well water Receipt Temp. : 4.5 °C GPS Number:

Zinc	5.44	1.0	mg/L

CAMA = Coal Ash Management Act

Report Date: 11/16/2022

Reported By:

Marc Komlos

North Carolina State Laboratory of Public Health

Environmental Sciences

Inorganic Chemistry

4312 District Drive
MSC 1918
Raleigh, NC 27699-1918

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FINAL REPORT

Report to: **Teanna Kobuck**

IREDELL CO. ENVIRONMENTAL HEALTH DEPT - MOORESVILLE
610 EAST CENTER AVENUE
MOORESVILLE, NC 28115

Name of System:

Reba Connolly
608 Linwood Rd
Mooresville, NC 28115

EIN: 566000309E

Delivery: **NC Courier**

StarLiMS ID: **ES221102-0059**

Date Collected: 11/01/2022
Time Collected: 13:00
By: Teanna Kobuck
Date Received: 11/02/2022
Time Received: 08:20

Sample Type: Raw
Sampling Point: Well head
Well Permit No. OSWP-2022-6933
Sample Source: Well water
Receipt Temp. :
GPS Number:

Profile: Hexavalent Chromium

Analyte	Test Result	Reference Level *	Unit	Qualifier(s)
Hexavalent Chromium	0.760	0.07	ug/L	

* As defined in NC Division of Water Quality Groundwater Standards per North Carolina Administrative Code (15A NCAC O2L .0200)

Report Date: 11/16/2022

Reported By:

Marc Komlos