Buckingham Road, Mount Croix, Port Elizabeth, EC, 6001 Tel: 041 395 6111, Fax: 041 395 6144

Practice Number 5200296

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FULL FINAL LABORATORY REPORT

LAB NUMBER: UH 01345635

SAMPLE:

INDOOR SPORT CENTRE

SOURCE:

TAP WATER

Sample Ref:

REPORT TO: PH19/1193 P.SIDEBA

Client Ref No: 08:05

EH Makana Municipality

Outbreak Case No:

Medical Officer Po Box 176

Collected: 19/06/2019 10:10 Received: 20/06/2019 10:10 Grahamstown Printed: 27/06/2019 16:00 Eastern Cape

6140

PUBLIC HEALTH

Specimen received: Water

EH Makana Municipality

Tests requested: Potable water

Potable Water:

SUBMITTED BY:

Medical Officer

P. SIDEBA

Po Box 176

6140

Grahamstown Eastern Cape

Coliform count (Colilert)

0 per 100ml

E coli count (Colilert)

0 per 100ml

WATER DOMESTIC

ESSENTIAL MICROBIOLOGICAL CRITERIA AS PER SANS 241

Total bacterial count.....<=1000 per mL Total coliforms.....<=10 per 100mL

The above test result relates only to the item/sample as received

REFERENCE METHOD(S):

Authorised by: D Bezuidenhout (Medical Technologist) Potable water

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Practice Number 5200296

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FULL FINAL LABORATORY REPORT

LAB NUMBER: UH 01345639

SAMPLE:

EXT 7 CLINIC

SOURCE:

TAP WATER

SUBMITTED BY:

Sample Ref:

REPORT TO: PH19/1194 P.SIDEBA

P.SIDEBA

Client Ref No: 08:25

EH Makana Municipality

Outbreak Case No:

Medical Officer

Collected: 19/06/2019 10:10

EH Makana Municipality Medical Officer

Po Box 176 Grahamstown

20/06/2019 10:10

Po Box 176

Eastern Cape

Received: 20/06/2019 10:10 Classifier Cape 27/06/2019 16:00 Eastern Cape 6140

6140

6140

PUBLIC HEALTH

Specimen received: Water

Tests requested: Potable water

Potable Water:

Coliform count (Colilert)

0 per 100ml

E coli count (Colilert)

0 per 100ml

WATER DOMESTIC

ESSENTIAL MICROBIOLOGICAL CRITERIA AS PER SANS 241

Total bacterial count.....<=1000 per mL Total coliforms.....<=10 per 100mL

The above test result relates only to the item/sample as received

REFERENCE METHOD(S):

Coliform Count - Colilert Method......Colilert SANS 5521

Authorised by: D Bezuidenhout (Medical Technologist) Potable water



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EH Makana Municipality

Medical Officer

Po Box 176

6140

Grahamstown Eastern Cape pg 1 of 1

FULL FINAL LABORATORY REPORT

LAB NUMBER: UH 01345644

J'STREET COMMUNAL SAMPLE:

SOURCE: TAP WATER

SUBMITTED BY: PH11/1195 Sample Ref: P. SIDEBA

Client Ref No: 08:40

Outbreak Case No:

Collected: 19/06/2019 10:10

Received: 20/06/2019 10:10 Cape Finted: 27/06/2019 16:00 Eastern Cape

REPORT TO:

P.SIDEBA

EH Makana Municipality

Medical Officer

Po Box 176

6140

PUBLIC HEALTH

Specimen received: Water

Tests requested: Potable water

Potable Water:

Coliform count (Colilert) E coli count (Colilert)

0 per 100ml 0 per 100ml

WATER DOMESTIC

ESSENTIAL MICROBIOLOGICAL CRITERIA AS PER SANS 241 Total bacterial count.....<=1000 per mL Total coliforms.....<=10 per 100mL Escherichia coli......Absent in 100mL

The above test result relates only to the item/sample as received

REFERENCE METHOD(S):

Authorised by: D Bezuidenhout (Medical Technologist) Potable water



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Practice Number 5200296

EH Makana Municipality

Medical Officer

Po Box 176

6140

Grahamstown

Eastern Cape

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FULL FINAL LABORATORY REPORT

LAB NUMBER: UH 01345647

ENVIROMENTAL HEALTH OFFICE SAMPLE:

SOURCE: TAP WATER

SUBMITTED BY: Sample Ref: P.SIDEBA

PH19/1196

Client Ref No: 09:20

Outbreak Case No:

Collected: 19/06/2019 10:10

Received: 20/06/2019 10:10 Grahamstown 27/06/2019 16:00

Printed:

REPORT TO:

P.SIDEBA

EH Makana Municipality

Medical Officer Po Box 176

Eastern Cape

6140

PUBLIC HEALTH

Specimen received: Water

Tests requested: Potable water

Potable Water:

Coliform count (Colilert)

0 per 100ml

E coli count (Colilert)

0 per 100ml

WATER DOMESTIC

ESSENTIAL MICROBIOLOGICAL CRITERIA AS PER SANS 241

Total bacterial count.....<=1000 per mL Total coliforms.....<=10 per 100mL Escherichia coli......Absent in 100mL

The above test result relates only to the item/sample as received

REFERENCE METHOD(S):

Authorised by: D Bezuidenhout (Medical Technologist) Potable water

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Practice Number 5200296

EH Makana Municipality

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FULL FINAL LABORATORY REPORT

LAB NUMBER: UH 01345649

SAMPLE:

PURIFICATION WORKS

SOURCE:

FINAL FLOW

PH19/1197

Sample Ref: Client Ref No: 09:55 Outbreak Case No:

REPORT TO: P.SIDEBA

EH Makana Municipality

Medical Officer

Po Box 176

Collected: 19/06/2019 10:10

Received: 20/06/2019 10:10 Gramman Printed: 27/06/2019 16:00 Eastern Cape 6140

6140

PUBLIC HEALTH

Specimen received: Water

Tests requested: Potable water

Potable Water:

SUBMITTED BY:

Medical Officer

P.SIDEBA

Po Box 176

6140

Grahamstown Eastern Cape

Coliform count (Colilert)

0 per 100ml

E coli count (Colilert)

0 per 100ml

WATER DOMESTIC

ESSENTIAL MICROBIOLOGICAL CRITERIA AS PER SANS 241

Total bacterial count.....<=1000 per mL Total coliforms.....<=10 per 100mL

The above test result relates only to the item/sample as received

REFERENCE METHOD(S):

Coliform Count - Colilert Method......Colilert SANS 5521

Authorised by: D Bezuidenhout (Medical Technologist) Potable water