

Orange County Health Department

Environmental Health Division

P.O. Box 8181, 131 West Margaret Lane, Suite 100

Hillsborough, NC 27278

Phone 245-2360 Fax 644-3006

www.co.orange.nc.us



EXISTING WELL / SEPTIC SYSTEM AUTHORIZATION

Parcel Pin: 9769297272
Application Date: 08/08/2013
Request for: unpermitted work in basement

TMBL: 7
Permit #: XS13-00270

Applicant: CUSTOM CARPENTRY GROUP
Address: 212 HILLSBOROUGH RD
CARRBORO, NC
27510
Phone: 919-929-8482

Owner: SAMULSKI THADDEUS V
Address: 801 CREEKSTONE DR
CHAPEL HILL NC
27516
Phone:

Property Desc.: #6 PH 1 DURHAM ESTATES P55/27
Prop Address: 801 CREEKSTONE DR OCPL
Permit Type:
Facility Type: RES SFD
Water Supply: PRIVATE WELL

Lot Size: 7.4

Status: APPROVED

Authorization for: Rooms in basement.

1: No additional flow. Open room with no privacy.

The Following Conditions Shall Be Met Prior To The Issuance of The CERTIFICATE OF OCCUPANCY

*

*

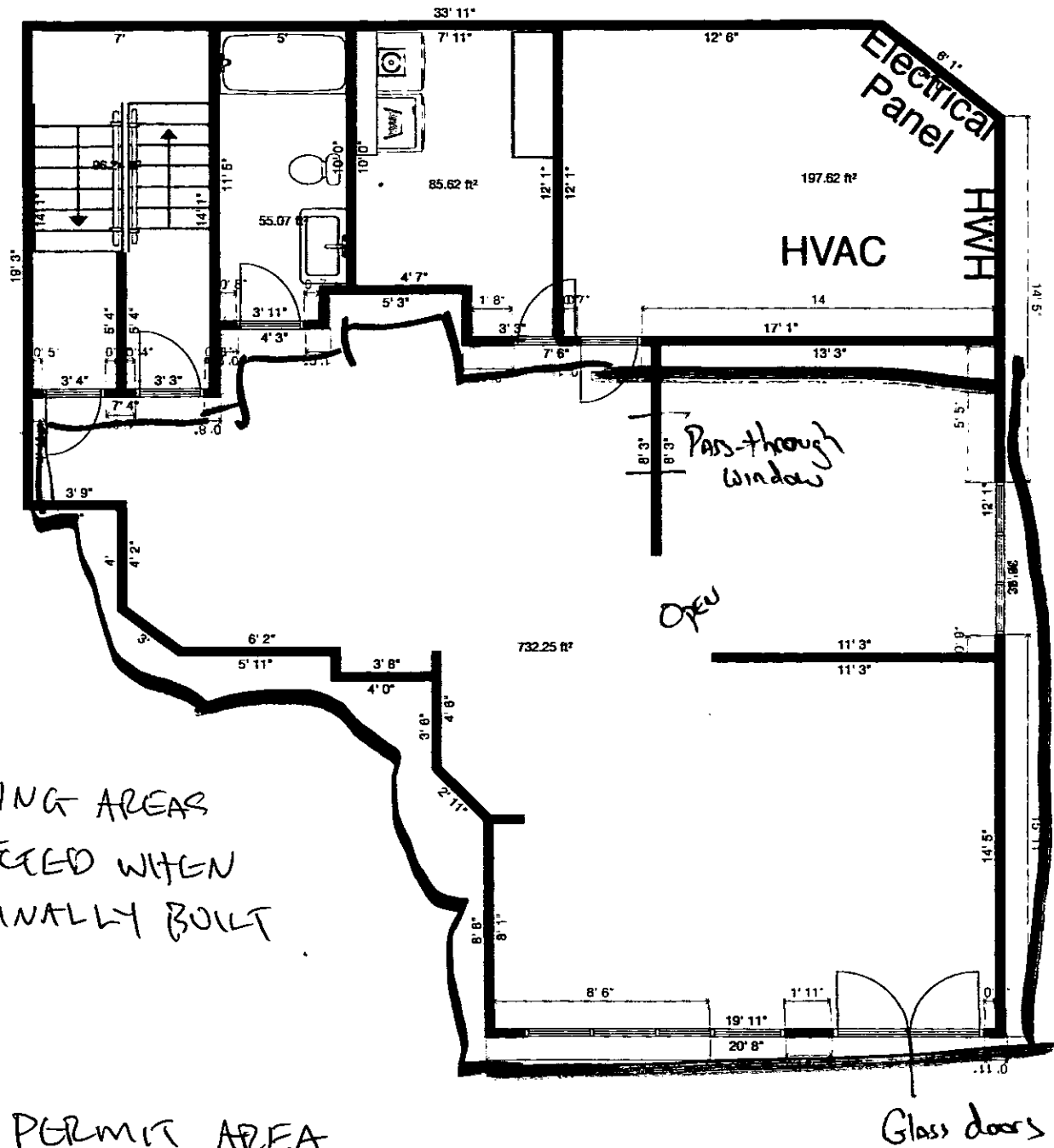
- * REFER TO THE SITE PLAN / FLOOR PLAN SHOWING THE SYSTEM AND FACILITY LOCATIONS AND SPECIFICATIONS OF THE AUTHORIZATION.
- * THIS AUTHORIZATION SHALL BECOME INVALID AND MAY BE REVOKED IF:
 - THE INFORMATION SUBMITTED ON THE APPLICATION IS INCORRECT, FALSIFIED, OR CHANGES, OR
 - THE PROPOSAL IS ALTERED.
- * THIS AUTHORIZATION IS VALID FOR A PERIOD OF 6 MONTHS AFTER THE DATE OF ISSUANCE.
- * THIS AUTHORIZATION IS CONDUCTED IN ACCORDANCE WITH:
 - ORANGE COUNTY RULES FOR WASTEWATER TREATMENT AND DISPOSAL SYSTEMS AS ADOPTED BY THE ORANGE COUNTY BOARD OF HEALTH.
 - ORANGE COUNTY GROUNDWATER REGULATIONS.
 - ORANGE COUNTY WASTEWATER SYSTEM SPECIFICATIONS, AND
 - ORANGE COUNTY ENVIRONMENTAL HEALTH DIVISION POLICY.

ISSUED: 08/16/2013

Environmental Health Specialist

EXPIRES: 08/16/2014

Somulski



EXISTING AREAS
INBUILT WHEN
ORIGINALLY BUILT

NEW PERMIT AREA
OPFITTED WITH
NO PERMIT

Floor 1

Typical Setbacks Required By State and Local Rules Unless Otherwise Specified In Writing:

(1)	Any private water supply source, including any well or spring	100 feet
(2)	Any public water supply source	100 feet
(3)	Streams classified as WS-I	100 feet
(4)	Any other stream, canal, marsh, or other surface water	50 feet
(5)	Any Class I or Class II reservoir	100 feet from normal pool elevation
(6)	Any permanent storm water retention pond	50 feet from flood pool elevation
(7)	Any other lake or pond	50 feet from normal pool elevation
(8)	Any building foundation or building footing	15 feet
(9)	Any basement	15 feet
(10)	Any property line	10 feet
(11)	Top of slope of embankments or cuts of 2 feet or more vertical height	15 feet
(12)	Any water line	10 feet
(13)	Drainage systems:	
	(A) Interceptor drains, foundation drains, and storm water diversions	
	(I) upslope from system	10 feet
	(II) sideslope from system	15 feet
	(III) downslope from system	25 feet
	(B) groundwater lowering ditches and devices	25 feet
(14)	Any swimming pool	25 feet
(15)	Any other nitrification field (except repair area)	20 feet
(16)	Drip line (Outermost edge of a structure)	5 feet

Any changes to the proposed plans must be approved by the OCHD

*

Please do not allow any traffic, construction, excavation, utilities, material storage, or any other disturbance to take place on the designated septic area or repair area. These activities may void your permit.

*

The owner is responsible for marking any property lines and corners. The Contractor is responsible for ensuring that the well or septic system is installed in the proper location and that all setbacks are met.

*

The system must be installed/repaired by an Orange County Registered Septic System Contractor.

*

A list of Orange County Registered Septic System Contractors is available upon request.

*

The system installation must be inspected by OCHD at certain stages during the installation.

*

For systems with pumps, the Registered Septic System Contractor is responsible for insuring the proper installation of the electrical components. The electrical installer must possess at minimum a valid North Carolina SP-PH Electrical license.

*

It is the responsibility of the Registered Septic System Contractor to call the OCHD to schedule the installation inspections.

*

The OCHD must issue an Operation Permit (indicating system approval) before the facility can be occupied, before the Certificate of Occupancy can be issued by the Planning Jurisdiction, and before permanent electrical can be released.

*

The Registered Septic System Contractor is responsible for backfilling the system components so that no areas are subject to the retention or ponding of surface water.

*

After the installation is completed, some settling of the backfill material may take place. The system owner is responsible for eliminating settled or sunken area, stabilization, and final landscaping of the ground surface.

SKETCH/AREA TABLE ADDENDUM

SUBJECT	Property Address 801 Creekview Dr	State NC	Zip																																																																																																										
	City Chapel Hill																																																																																																												
	Borrower																																																																																																												
	Lender/Client																																																																																																												
IMPROVEMENTS SKETCH	Appraiser Name																																																																																																												
	<div style="display: flex; justify-content: space-around;"> <div style="width: 45%;"> <p style="text-align: center;"><u>Upper Level</u></p> </div> <div style="width: 45%;"> <p style="text-align: center;"><u>Main Level</u></p> </div> </div> <div style="display: flex; justify-content: space-around; margin-top: 20px;"> <div style="width: 45%;"> <p style="text-align: center;"><u>Lower Level</u></p> </div> <div style="width: 45%;"> </div> </div>																																																																																																												
	Comments:																																																																																																												
	<div style="display: flex; justify-content: space-between;"> <div style="width: 48%;"> <p style="text-align: center;">AREA CALCULATIONS SUMMARY</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th>Code</th> <th>Description</th> <th>Net Size</th> <th>Net Totals</th> </tr> </thead> <tbody> <tr> <td>GLA1</td> <td>First Floor</td> <td>2328.46</td> <td rowspan="2">3510.26</td> </tr> <tr> <td></td> <td>Finished Basement</td> <td>1181.80</td> </tr> <tr> <td>GLA2</td> <td>Second Floor</td> <td>959.52</td> <td>959.52</td> </tr> <tr> <td>P/P</td> <td>Deck</td> <td>473.80</td> <td rowspan="5">1302.31</td> </tr> <tr> <td></td> <td>Deck</td> <td>385.05</td> </tr> <tr> <td></td> <td>Deck</td> <td>49.00</td> </tr> <tr> <td></td> <td>Deck</td> <td>394.46</td> </tr> <tr> <td></td> <td>Deck</td> <td>49.00</td> </tr> <tr> <td>OTH</td> <td>Mechanical / Storage</td> <td>206.00</td> <td>206.00</td> </tr> </tbody> </table> </div> <div style="width: 48%;"> <p style="text-align: center;">LIVING AREA BREAKDOWN</p> <table border="1" style="width:100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Breakdown</th> <th>Subtotals</th> </tr> </thead> <tbody> <tr> <td colspan="3">First Floor</td> </tr> <tr> <td>16.1 x</td> <td>63.4</td> <td>1020.74</td> </tr> <tr> <td>6.4 x</td> <td>28.4</td> <td>181.76</td> </tr> <tr> <td>8.2 x</td> <td>58.4</td> <td>478.88</td> </tr> <tr> <td>14.6 x</td> <td>22.2</td> <td>324.12</td> </tr> <tr> <td>2.0 x</td> <td>34.8</td> <td>69.60</td> </tr> <tr> <td>3.3 x</td> <td>36.8</td> <td>121.44</td> </tr> <tr> <td>0.5 x</td> <td>4.0</td> <td>8.00</td> </tr> <tr> <td>0.5 x</td> <td>5.0</td> <td>12.50</td> </tr> <tr> <td>0.5 x</td> <td>3.0</td> <td>4.50</td> </tr> <tr> <td>0.5 x</td> <td>2.0</td> <td>2.00</td> </tr> <tr> <td>4.3 x</td> <td>24.4</td> <td>104.92</td> </tr> <tr> <td colspan="3">Finished Basement</td> </tr> <tr> <td>24.5 x</td> <td>2.0</td> <td>49.00</td> </tr> <tr> <td>11.5 x</td> <td>22.2</td> <td>255.30</td> </tr> <tr> <td>11.5 x</td> <td>24.5</td> <td>281.75</td> </tr> <tr> <td>7.5 x</td> <td>43.5</td> <td>326.25</td> </tr> <tr> <td>7.0 x</td> <td>38.5</td> <td>269.50</td> </tr> <tr> <td colspan="3">Second Floor</td> </tr> <tr> <td>36.8 x</td> <td>16.0</td> <td>588.80</td> </tr> <tr> <td>6.4 x</td> <td>14.8</td> <td>94.72</td> </tr> <tr> <td>7.0 x</td> <td>18.0</td> <td>126.00</td> </tr> <tr> <td>6.0 x</td> <td>25.0</td> <td>150.00</td> </tr> </tbody> </table> </div> </div>			Code	Description	Net Size	Net Totals	GLA1	First Floor	2328.46	3510.26		Finished Basement	1181.80	GLA2	Second Floor	959.52	959.52	P/P	Deck	473.80	1302.31		Deck	385.05		Deck	49.00		Deck	394.46		Deck	49.00	OTH	Mechanical / Storage	206.00	206.00	Breakdown		Subtotals	First Floor			16.1 x	63.4	1020.74	6.4 x	28.4	181.76	8.2 x	58.4	478.88	14.6 x	22.2	324.12	2.0 x	34.8	69.60	3.3 x	36.8	121.44	0.5 x	4.0	8.00	0.5 x	5.0	12.50	0.5 x	3.0	4.50	0.5 x	2.0	2.00	4.3 x	24.4	104.92	Finished Basement			24.5 x	2.0	49.00	11.5 x	22.2	255.30	11.5 x	24.5	281.75	7.5 x	43.5	326.25	7.0 x	38.5	269.50	Second Floor			36.8 x	16.0	588.80	6.4 x	14.8	94.72	7.0 x	18.0	126.00	6.0 x	25.0
Code	Description	Net Size	Net Totals																																																																																																										
GLA1	First Floor	2328.46	3510.26																																																																																																										
	Finished Basement	1181.80																																																																																																											
GLA2	Second Floor	959.52	959.52																																																																																																										
P/P	Deck	473.80	1302.31																																																																																																										
	Deck	385.05																																																																																																											
	Deck	49.00																																																																																																											
	Deck	394.46																																																																																																											
	Deck	49.00																																																																																																											
OTH	Mechanical / Storage	206.00	206.00																																																																																																										
Breakdown		Subtotals																																																																																																											
First Floor																																																																																																													
16.1 x	63.4	1020.74																																																																																																											
6.4 x	28.4	181.76																																																																																																											
8.2 x	58.4	478.88																																																																																																											
14.6 x	22.2	324.12																																																																																																											
2.0 x	34.8	69.60																																																																																																											
3.3 x	36.8	121.44																																																																																																											
0.5 x	4.0	8.00																																																																																																											
0.5 x	5.0	12.50																																																																																																											
0.5 x	3.0	4.50																																																																																																											
0.5 x	2.0	2.00																																																																																																											
4.3 x	24.4	104.92																																																																																																											
Finished Basement																																																																																																													
24.5 x	2.0	49.00																																																																																																											
11.5 x	22.2	255.30																																																																																																											
11.5 x	24.5	281.75																																																																																																											
7.5 x	43.5	326.25																																																																																																											
7.0 x	38.5	269.50																																																																																																											
Second Floor																																																																																																													
36.8 x	16.0	588.80																																																																																																											
6.4 x	14.8	94.72																																																																																																											
7.0 x	18.0	126.00																																																																																																											
6.0 x	25.0	150.00																																																																																																											
Net LIVABLE Area (rounded)		4470	20 Items (rounded)	4470																																																																																																									



Call to schedule

Orange County Health Department - Environmental Health Division
APPLICATION FOR PERMITS

PIN: 9769-29-7272

Please mail or bring in the first two pages of this completed form, with payment including the signature of the owner*, a floor plan (where applicable) and a site plan as indicated. Please call our office if you have any questions about filling out this form or the amount of payment needed.

GENERAL INFORMATION

APPLICANT: CRAY GUNN PROPERTY OWNER: RICKA Samuels
 ADDRESS 215 Hillsborough Rd ADDRESS 801 Creekstone
Carburo NC 27516 Chapel Hill NC 27516
 EMAIL _____ EMAIL _____
 PHONE NUMBER 919-929-8482 PHONE NUMBER 919 929-6463
 LOT SIZE _____ SUBDIVISION / LOT# _____ DATE LOT RECORDED _____
 LOCATION ADDRESS: 801 Creekstone DIRECTIONS / LOCATION: West on Perryland
Ed from old 86 1 mile left on road springs Rd 1st right

PROJECT INFORMATION

- ☐ NEW BUILDING ☐ EXPANSION TO EXISTING FACILITY ☐ SEPTIC SYSTEM OR WELL REPAIR *on*
☐ WELL OR SEPTIC PERMIT RENEWAL ☐ PERMIT REVISION *Creekstone*
☐ ABANDONMENT OF WELL OR SEPTIC SYSTEM ☐ SUBDIVISION/RECOMBINATION OF PROPERTY
 PROJECT DESCRIPTION: consultation for septic work

☐ SINGLE FAMILY HOME Size 4000 sq ft Number of Bedrooms 4 Number of occupants 1
☐ APARTMENT / EFFICIENCY / GUEST HOUSE
☐ BUSINESS/OTHER

Please describe the business, number of employees, square footage, etc. Use attachments if necessary.

TYPE OF WATER SUPPLY

- ☐ PUBLIC
☒ PRIVATE WELL
☐ COMMUNITY WELL
☐ OTHER

PLEASE CHECK IF APPLICABLE:

- ☒ BASEMENT WITH PLUMBING
☐ WASTEWATER OTHER THAN SEWAGE GENERATED
☐ PROPERTY CONTAINS DESIGNATED WETLANDS
☐ SITE IS SUBJECT TO APPROVAL BY OTHER AGENCY
☐ FACILITY WILL HAVE A GARBAGE DISPOSAL OR WATER SOFTENER

REQUESTED SYSTEM TYPE:

- ☒ CONVENTIONAL *CR*
☐ OTHER (SPECIFY): _____
☐ or see REQUEST FORM

IMPORTANT: All applications must contain the following information in order to be processed:

- ☐ A SITE PLAN OR PLAT SHOWING: ☐ EXISTING AND ANY PROPOSED PROPERTY LINES WITH DIMENSIONS
EASEMENTS, RIGHTS-OF-WAY, AND BUFFERS
☐ LOCATION OF ALL PROPOSED STRUCTURES, DRIVEWAYS,
 ADDITIONS, OR OTHER IMPROVEMENTS LABELED WITH SETBACKS.
☐ A FLOOR PLAN OF THE STRUCTURE - NOT REQUIRED FOR WELL OR IMPROVEMENT PERMIT APPLICATIONS
 FOR ADDITIONS, A CURRENT AND PROPOSED FLOOR PLAN MAY BE REQUIRED
☐ THE FOLLOWING MUST BE STAKED ON SITE: ☐ LOCATION OF PROPOSED STRUCTURES
☐ EXISTING AND PROPOSED PROPERTY LINES/CORNERS/EASEMENTS

Check All Sections That Apply:

SITE EVALUATION / IMPROVEMENT PERMIT SECTION

#

(THIS IS AN EVALUATION OF THE SOIL FOR A SEPTIC SYSTEM)

- ☐ IMPROVEMENT PERMIT (Up to 600 GPD) _____ NUMBER OF SITES X \$ 350 PER SITE
☐ INDIVIDUAL LOT ☐ SUBDIVISION * ☐ RECOMBINATION * ☐ EXISTING SYSTEM ☐ EXPANSION
☐ SITE REVISIT TO REISSUE OR MODIFY A VALID IMPROVEMENT PERMIT (with no increase flow) \$ 125 PER SITE

EACH SITE EVALUATION CONSISTS OF UP TO 2 ACRES.

PROJECTS GREATER THAN 5 BEDROOMS AND NON-RESIDENTIAL PROJECTS (>600 gpd) REQUIRE ADDITIONAL FEES
 PLEASE SEE HEALTH DEPARTMENT FOR SPECIFIC INFORMATION.

PROJECTS GREATER THAN 5 BEDROOMS, NON-RESIDENTIAL PROJECTS (>600 gpd), AND SUBDIVISIONS REQUIRE THAT THE
 APPLICANT PROVIDE A BACKHOE AND OPERATOR ON SITE TO DIG PITS.

*FOR SUBDIVISIONS & RE-COMBINATIONS, A CONCEPT PLAN APPROVAL OR A PLAT PREPARED BY A SURVEYOR MUST BE
 SUBMITTED WITH THE APPLICATION.

CONSTRUCTION AUTHORIZATION SECTION

#

(A CONSTRUCTION AUTHORIZATION IS NEEDED TO OBTAIN A BUILDING PERMIT AND INSTALL A SEPTIC SYSTEM)

- ☐ CONSTRUCTION AUTHORIZATION FOR NEW CONSTRUCTION OR EXPANSION\$ 260 (Up to 600 GPD)
☐ SITE REVISIT TO REISSUE OR MODIFY A VALID CONSTRUCTION AUTHORIZATION\$ 125 (Up to 600 GPD)

* CHANGES TO THE SITE PLAN, FLOOR PLAN, OR APPLICATION REQUIRE A NEW APPLICATION AND ADDITIONAL FEES.
* SYSTEMS WITH A DESIGN FLOW OVER 600 GALLONS PER DAY WILL REQUIRE ADDITIONAL FEES.

WELL PERMIT SECTION

- ☐ NEW ☐ REPLACEMENT** ☐ IRRIGATION**
☐ MONITORING WELL (PER WELL FIELD) ☐ GEOTHERMAL WELL (PER WELL FIELD).....\$430

** Well permit fee includes initial water samples for water supply wells.

If the well will serve more than one purpose (example: drinking water supply AND geothermal), indicate so on page 1 under "Describe your project".

- ☐ PERMIT RENEWAL, ALTERATION, OR SITE REVISIT.....\$125
☐ WELL REPAIR PERMIT (LINER INSTALLATION, DEEPENING OF EXISTING WELL, HYDRO-FRACTURING)
☐ WELL ABANDONMENTNO FEE

CHECK THE BOX AND SHOW ON THE SITE PLAN IF ANY OF THE FOLLOWING ARE ON OR ADJACENT TO THIS PROPERTY:

- ☐ EXISTING SEPTIC SYSTEMS OR SEWER LINES ☐ CHEMICAL OR PETROLEUM STORAGE TANKS

EXISTING SYSTEM / MOBILE HOME PARK AUTHORIZATION SECTION**XS13-00270**

- ☐ EXISTING SEPTIC SYSTEM / WELL AUTHORIZATION INSPECTION WITH NO INCREASE IN WASTE FLOW.....\$ 125
☐ MOBILE HOME SPACE RECONNECTION INSPECTION - PER SPACE.....\$ 75
☐ IN-OFFICE REVIEW FOR AUTHORIZATION\$ 20

ORIGINAL OWNER _____ SYSTEM IS: ☐ IN USE or ☐ VACANT since _____ (date)

SIGNATURE SECTION

TOTAL AMOUNT DUE

\$ **125.00**RECEIPT # **R13-002720**

Make checks payable to : Orange County Health Department

PLEASE CHECK WITH ENVIRONMENTAL HEALTH STAFF TO DISCUSS THE AMOUNT OF ADDITIONAL FEES FOR NON-RESIDENTIAL PROJECTS AND HOMES LARGER THAN 5 BEDROOMS.

THIS APPLICATION MUST BE SIGNED BY THE CURRENT OWNER OF THE PROPERTY OR THE OWNER'S LEGAL REPRESENTATIVE (e.g., SPOUSE, POWER OF ATTORNEY, EXECUTOR, OR OTHER LICENSED PROFESSIONAL (ATTORNEY, REALTOR, BUILDER, etc.) WHO HAS ENTERED INTO A CONTRACT OR LEASE WITH THE OWNER AND WHO CAN LEGALLY REPRESENT THE PROPERTY OWNER IN TRANSACTIONS REGARDING THE PROPERTY)

ONLY ORIGINAL SIGNATURES (NOT FAXED) CAN BE ACCEPTED.

I AM THE PROPERTY OWNER OR THE PROPERTY OWNER'S LEGAL REPRESENTATIVE. I HAVE READ THIS APPLICATION AND AUTHORIZE THE OCHD TO ENTER THE PROPERTY AND PERFORM THE SERVICE(S) REQUESTED.

I UNDERSTAND THAT I AM RESPONSIBLE FOR MAKING THE SITE ACCESSIBLE FOR THE EVALUATION/PERMITTING PROCESS.

OWNER: _____

DATE: _____

APPLICATION #: _____

OCPD CONFIRMED: _____

DATE RECEIVED: _____

REVIEWED BY: _____

ASSIGNED TO: _____

NOTES:

CONSTRUCTION AUTHORIZATION SECTION

#

(A CONSTRUCTION AUTHORIZATION IS NEEDED TO OBTAIN A BUILDING PERMIT AND INSTALL A SEPTIC SYSTEM)

- ☐ CONSTRUCTION AUTHORIZATION FOR NEW CONSTRUCTION OR EXPANSION\$ 260 (Up to 600 GPD)
☐ SITE REVISIT TO REISSUE OR MODIFY A VALID CONSTRUCTION AUTHORIZATION\$ 125 (Up to 600 GPD)

- * CHANGES TO THE SITE PLAN, FLOOR PLAN, OR APPLICATION REQUIRE A NEW APPLICATION AND ADDITIONAL FEES.
* SYSTEMS WITH A DESIGN FLOW OVER 600 GALLONS PER DAY WILL REQUIRE ADDITIONAL FEES.

WELL PERMIT SECTION

- ☐ NEW ☐ REPLACEMENT** ☐ IRRIGATION**
☐ MONITORING WELL (PER WELL FIELD) ☐ GEOTHERMAL WELL (PER WELL FIELD).....\$430

** Well permit fee includes initial water samples for water supply wells.

If the well will serve more than one purpose (example: drinking water supply AND geothermal), indicate so on page 1 under "Describe your project".

- ☐ PERMIT RENEWAL, ALTERATION, OR SITE REVISIT.....\$125
☐ WELL REPAIR PERMIT (LINER INSTALLATION, DEEPENING OF EXISTING WELL, HYDRO-FRACTURING)
☐ WELL ABANDONMENTNO FEE

CHECK THE BOX AND SHOW ON THE SITE PLAN IF ANY OF THE FOLLOWING ARE ON OR ADJACENT TO THIS PROPERTY:

- ☐ EXISTING SEPTIC SYSTEMS OR SEWER LINES ☐ CHEMICAL OR PETROLEUM STORAGE TANKS

EXISTING SYSTEM / MOBILE HOME PARK AUTHORIZATION SECTION**XS13-00270**

- ☐ EXISTING SEPTIC SYSTEM / WELL AUTHORIZATION INSPECTION WITH NO INCREASE IN WASTE FLOW.....\$ 125
☐ MOBILE HOME SPACE RECONNECTION INSPECTION - PER SPACE.....\$ 75
☐ IN-OFFICE REVIEW FOR AUTHORIZATION\$ 20

ORIGINAL OWNER _____ SYSTEM IS: ☐ IN USE or ☐ VACANT since _____ (date)

SIGNATURE SECTION

TOTAL AMOUNT DUE

\$ 125.00

RECEIPT #

R13-00270

Make checks payable to : Orange County Health Department

PLEASE CHECK WITH ENVIRONMENTAL HEALTH STAFF TO DISCUSS THE AMOUNT OF ADDITIONAL FEES FOR NON-RESIDENTIAL PROJECTS AND HOMES LARGER THAN 5 BEDROOMS.

THIS APPLICATION MUST BE SIGNED BY THE CURRENT OWNER OF THE PROPERTY OR THE OWNER'S LEGAL REPRESENTATIVE (e.g., SPOUSE, POWER OF ATTORNEY, EXECUTOR, OR OTHER LICENSED PROFESSIONAL (ATTORNEY, REALTOR, BUILDER, etc.) WHO HAS ENTERED INTO A CONTRACT OR LEASE WITH THE OWNER AND WHO CAN LEGALLY REPRESENT THE PROPERTY OWNER IN TRANSACTIONS REGARDING THE PROPERTY)

ONLY ORIGINAL SIGNATURES (NOT FAXED) CAN BE ACCEPTED.

I AM THE PROPERTY OWNER OR THE PROPERTY OWNER'S LEGAL REPRESENTATIVE. I HAVE READ THIS APPLICATION AND AUTHORIZE THE OCHD TO ENTER THE PROPERTY AND PERFORM THE SERVICE(S) REQUESTED.

I UNDERSTAND THAT I AM RESPONSIBLE FOR MAKING THE SITE ACCESSIBLE FOR THE EVALUATION/PERMITTING PROCESS.

OWNER:

Rickie Samulski

DATE:

August 9, 2013

APPLICATION #:

OCPD CONFIRMED:

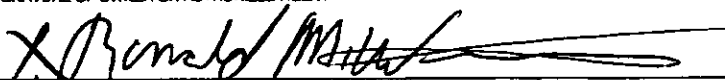

DATE RECEIVED:

REVIEWED BY:

ASSIGNED TO:

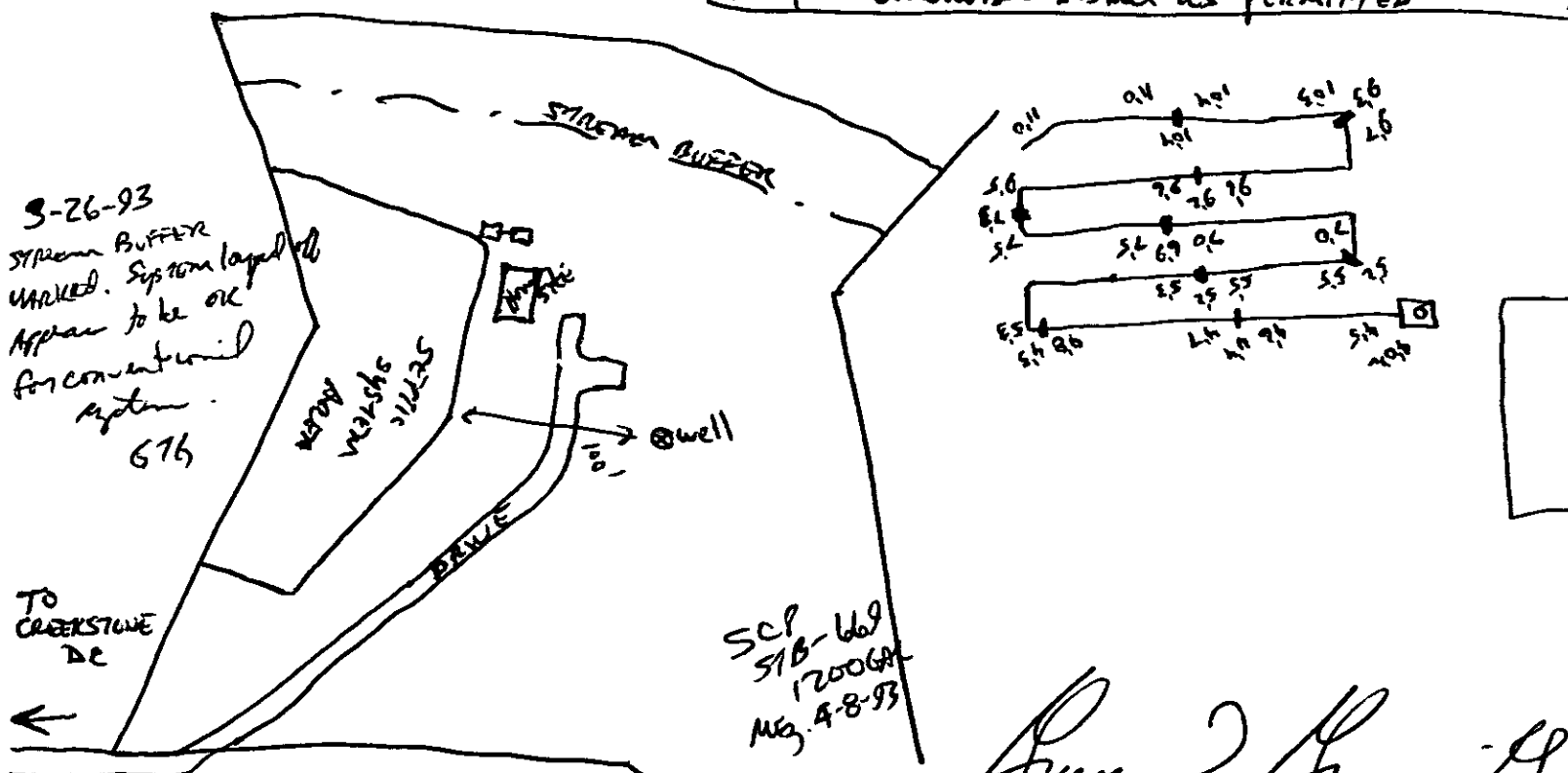
NOTES:

ORANGE COUNTY HEALTH DEPARTMENT

REFERENCE NUMBER 7070461 IMPROVEMENT PERMIT	DATE 01.18.02	PIN 9700-00-0012	MAP REFERENCE 7070461
REQUESTED BY JAMES L. JONES JR. 2000 W. 1000 S. P.O. BOX 311 TWINFORD, ND 58122 405-0967	OWNER: SANDY L. JONES JR. & RENE L. 2000 W. 1000 S. TWINFORD, ND 58122 405-0967		
TELEPHONE:	LOT SIZE / ACREAGE 97.4		DESIGNATED WETLAND? YES _____ NO _____
SPECIFICATIONS: NO BUILD 4' IN OFF			
LOCATION / DIRECTIONS: LOT 3 DITCH ADJACENT TO DISCHARGE TO			
FEE: \$00	RECEIPT 01.18.02	SIGNATURE OF OWNER OR AUTHORIZED AGENT 	
CONFIRMED BY PLANNER:	PLANNER 	DATE	CLERK

WATER	4	WATER	No	WATER	—	WATER	—
SIZE	1200 Gm	SIZE	1200 Gm	SIZE	530'x3'	SIZE	YES
REMARKS	Shallow system on contour, Max trench depth 24", 2"sch 40 to approved area. Contact H.D for specific area prior to any portion of the installation. Pump must deliver 30 GPM @ 7DH to be determined at the installation. 220V 1/2 HP require simplex panel. Stream Buffer must be marked if a gravity						

Stream Buffer must be marked if a gravity system is obtainable & hold house 3 ft high on slope. Otherwise instill as permitted



DATE ISSUED 11-20-92

DATE APPROVED 5-28-93

~~OWN HEALTH SPEC~~

ENVIRONMENTAL HEALTH

SEE IMPORTANT INFORMATION ON THE REVERSE SIDE

PERMIT INFORMATION

I. General Information - Contact Information

When contacting the Health Department concerning this document, be sure to know the reference number. This number must be used in all inquiries and inspection requests.

No substantial changes or deviations from the information on the front of this document are allowed unless prior approval is obtained from the Health Department.

The Environmental Health Staff is located at 306-C Revere Road, Hillsborough, N.C. The staff is available in this office or by telephone, Mon. - Fri., 8:00 AM - 9:00 AM and 4:30 PM - 5:00 PM. Messages can be left for the staff at the following numbers:

Hillsborough	732-8181, ext. 2360
Mebane	227-2031, ext. 2360
Durham	688-7331, ext. 2360
Chapel Hill	967-9251, ext. 2360

The issuance of the Improvements Permit in no way guarantees the issuance of other permits (e.g. Building Permits).

Septic tank contractors and well contractors are responsible for notifying the Health Department for final inspections.

II. Sewage Disposal Information

Water supply and sewage disposal facilities, location, installation and protection must meet state and / or local regulations.

The area approved for the installation of the sewage disposal system must be left in an undisturbed state. Disturbance of this area may void permit.

Septic tank and nitrification line must be inspected and approved by a representative of the Orange County Health Department staff before any portion of the installation is covered and / or put into use.

This permit is only valid for structure listed for 5 years following date of issuance.

Septic tank should be pumped out every 3 to 5 years and shall be maintained in such a manner as not to create a public health hazard.

Nitrification line shall be installed with an undisturbed earth dam each 50 feet.

Each septic tank shall be installed with an access riser on the inlet end that extends to grade level.

A Certificate of Completion or issuance of a operations permit shall indicate the septic system has been constructed to the standards set forth in the regulations, but shall in no way be taken as a guarantee that the system will function satisfactorily for any given period of time.

III. Water Supply Information

Well location, installation, and protection must meet state and local regulations and must be inspected and approved by a representative of the Orange County Health Department before any portion of the installation is put into use.

A well permit must be issued by the Orange County Health Department before construction of a well begins.

The Well Permit is valid for one year following date of issuance.

The siting of the well by the Health Department staff is to provide protection from known possible sources of contamination. No volume of water is guaranteed at any site designated by the Health Department.

The well owner should pour a 4-1/2' x 4-1/2' cement slab surrounding the well casing after the well contractor has completed the grouting of the well. The well casing should be in the center of the slab.

IV. Minimum Distances*

A. Sewage Disposal Systems

1. Private water supplies	100'
2. Public water supply sources tributaries	100'
3. A-1 Streams	50'
4. Lakes, ponds, impoundments	50'
5. Building foundations	15'
6. Basements	15'
7. Property lines	10'
8. Embankments or cuts	15'
9. Water lines	10'
10. Swimming pools.	25'

B. Private Wells*

1. Watertight sewer lines	50'
2. Ground absorption sewage disposal systems	100'
3. Property lines	10'
4. Building foundations	50'

*Variances can be given on some distances; please call Health Department if you feel a variance is necessary.

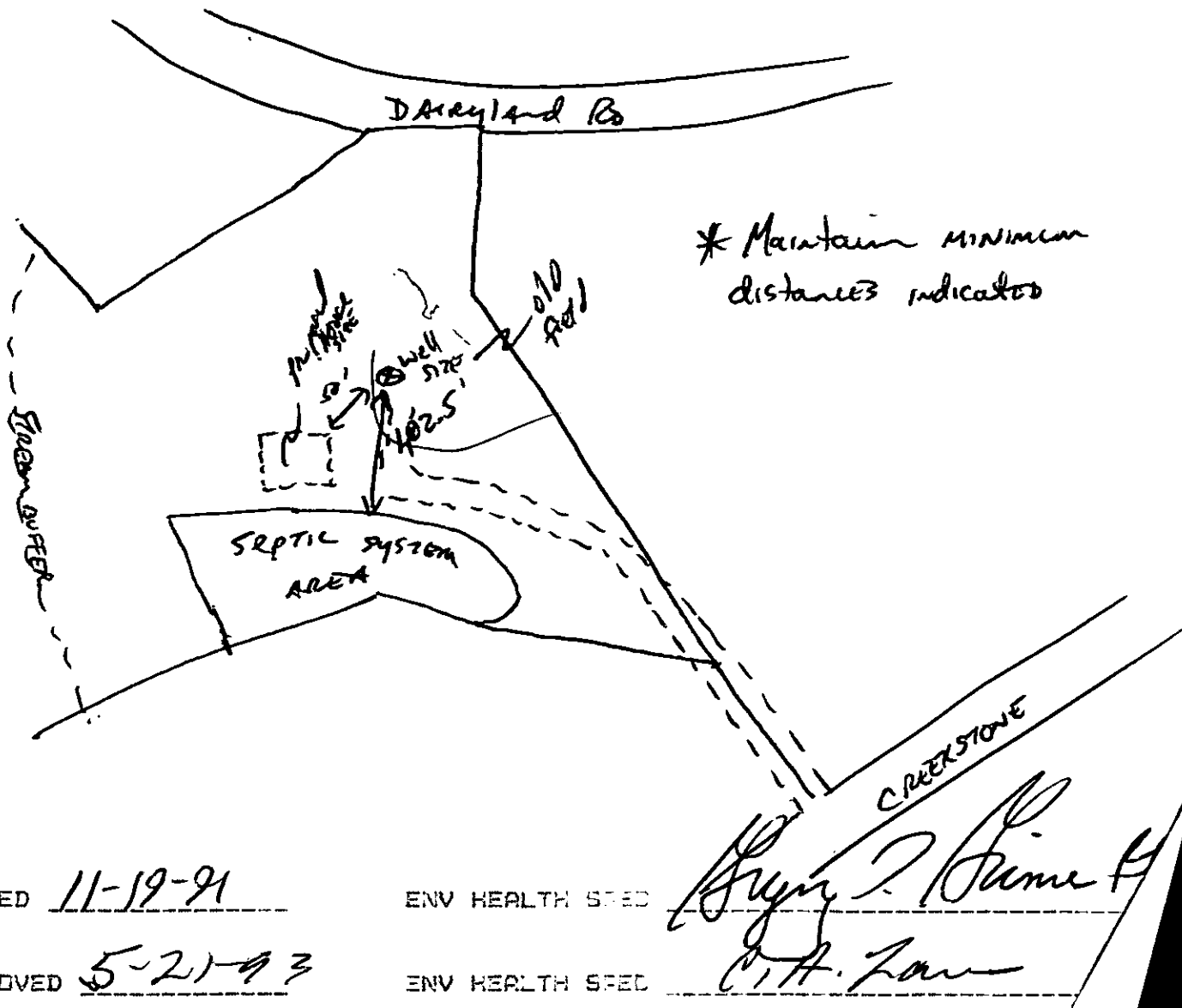
*Add 2.5' for a low pressure pipe system.

ORANGE COUNTY HEALTH DEPARTMENT

REFERENCE NUMBER -115724W WELL PERMIT	DATE 11.14.91	PIN 9759-80-7871	MAP REFERENCE 7-1111-17
REQUESTEE: SAMULSKI RICKA 2508 MILLWOOD COURT CHAPEL HILL NC 27514 928-6463	OWNER: SAMULSKI RICHARD W & RICKA J 2508 MILLWOOD COURT CHAPEL HILL NC 27514		
TELEPHONE:			
SPECIFICATIONS: DRILL	LOT SIZE / ACREAGE: 07.42	DESIGNATED WETLAND? YES _____ NO _____	
LOCATION / DIRECTIONS: #6 DURHAM ESTATES - OFF DARYLAND ROAD			
FEE: 100	RECEIPT: 029030	SIGNATURE OF OWNER OR AUTHORIZED AGENT: <i>X Ricka Jean Samulski</i>	
CONFIRMED BY PLANNER:	PLANNER	DATE	CLERK

TYPE Drilled SIZE 4" DEPTH 185' CASE DEPTH 104'
 GROUT Sand + cement YIELD 156 gpm LEVEL 8' WATER ZONE 170'
 CONTRACTOR: Hudson Well Co. DRILLER: Ronnie

REMARKS: _____

DATE ISSUED 11-19-91

ENV HEALTH SPEC

DATE APPROVED 5-21-93

ENV HEALTH SPEC

PERMIT INFORMATION

General Information - Contact Information

When contacting the Health Department concerning this document, be sure to know the reference number. This number must be used in all inquiries and inspection requests.

No substantial changes or deviations from the information on the front of this document are allowed unless prior approval is obtained from the Health Department.

The Environmental Health Staff is located at 306-C Revere Road, Hillsborough, N.C. The staff is available in this office or by telephone, Mon. - Fri., 8:00 AM - 9:00 AM and 4:30 PM - 5:00 PM. Messages can be left for the staff at the following numbers:

Hillsborough	732-8181, ext. 2360
Mebane	227-2031, ext. 2360
Durham	688-7331, ext. 2360
Chapel Hill	967-9251, ext. 2360

The issuance of the Improvements Permit in no way guarantees the issuance of other permits (e.g. Building Permits).

Septic tank contractors and well contractors are responsible for notifying the Health Department for final inspections.

II. Sewage Disposal Information

Water supply and sewage disposal facilities, location, installation and protection must meet state and/or local regulations.

The area approved for the installation of the sewage disposal system must be left in an undisturbed state. Disturbance of this area may void permit.

Septic tank and nitrification line must be inspected and approved by a representative of the Orange County Health Department staff before any portion of the installation is covered and/or put into use.

This permit is only valid for structure listed for 5 years following date of issuance.

Septic tank should be pumped out every 3 to 5 years and shall be maintained in such a manner as not to create a public health hazard.

Nitrification line shall be installed with an undisturbed earth dam each 50 feet.

Each septic tank shall be installed with an access riser on the inlet end that extends to grade level.

A Certificate of Completion or issuance of a operations permit shall indicate the septic system has been constructed to the standards set forth in the regulations, but shall in no way be taken as a guarantee that the system will function satisfactorily for any given period of time.

III. Water Supply Information

Well location, installation, and protection must meet state and local regulations and must be inspected and approved by a representative of the Orange County Health Department before any portion of the installation is put into use.

A well permit must be issued by the Orange County Health Department before construction of a well begins.

The Well Permit is valid for one year following date of issuance.

The siting of the well by the Health Department staff is to provide protection from known possible sources of contamination. No volume of water is guaranteed at any site designated by the Health Department.

The well owner should pour a 4 1/2' x 4 1/2' cement slab surrounding the well casing after the well contractor has completed the grouting of the well. The well casing should be in the center of the slab.

IV. Minimum Distances*

A. Sewage Disposal Systems

- | | |
|--|------|
| 1. Private water supplies | 100' |
| 2. Public water supply sources tributaries | 100' |
| 3. A-II Streams | 50' |
| 4. Lakes, ponds, impoundments | 50' |
| 5. Building foundations | 15' |
| 6. Basements | 15' |
| 7. Property lines | 10' |
| 8. Embankments or cuts | 15' |
| 9. Water lines | 10' |
| 10. Swimming pools | 25' |

B. Private Wells*

- | | |
|--|------|
| 1. Watertight sewer lines | 50' |
| 2. Ground absorption sewage disposal systems | 100' |
| 3. Property lines | 10' |
| 4. Building foundations | 50' |

*Variances can be given on some distances; please call Health Department if you feel a variance is necessary.

*Add 2.5' for a low pressure pipe system.

R13-001421

APPLICATION FOR WATER SAMPLES PRIVATE WATER SUPPLIES

PHONE: 919-245-2360
FAX 919-644-3006

WWW.ORANGECOUNTYNC.GOV

DATE RECEIVED: 4-23-13 WELL PERMIT # H15724W

Orange County Health Department
Environmental Health Division
P.O. Box 8181, 131 W. Margaret Lane Suite 100
Hillsborough, NC 27278



6.1 pH
7.3 pH

APD# WS 13-00103 PIN 9769-29-7272

APPLICATION

APPLICANT: Ricka Samulski PROPERTY OWNER: Ricka Samulski
Mailing Address 801 Creekstone Dr Mailing Address 801 Creekstone Dr.
Chapel Hill NC Chapel Hill NC
Phone Number 919 929 6463 Phone Number 919 929 6463
EMAIL bj12scee@bellsouth.net EMAIL cell 919 9714.1954
PROPERTY ADDRESS AND DIRECTIONS 801 Creekstone Dr. / 86 So. -> Right on
Dairyland Rd. -> Left on Laurel Spring -> right on Creekstone Dr.

WELL INFORMATION (IF KNOWN):

TYPE OF WELL: ☒ DRILLED (6" DIAMETER) ☐ BORED WELL ☐ HAND DUG WELL
TYPE OF SAMPLE: ☒ NEW SAMPLE ☐ RE-SAMPLE (following previous positive results)
TYPE OF FACILITY ☒ RESIDENCE (Owner Occupied) ☐ RENTAL ☐ BUSINESS
WHEN WAS THE WELL LAST CHLORINATED? Never
DESCRIBE ANY CURRENT PROBLEMS WITH YOUR WATER. Leave a light brown film on sink drain
WATER TREATMENT: ☐ CHLORINATOR ☐ ULTRA VIOLET (UV) DISINFECTION ☐ PH NEUTRALIZER
☒ WATER SOFTENER ☒ SEDIMENT FILTER ☐ IRON REMOVAL ☐ OTHER

TYPE OF SAMPLE REQUESTED:

<input type="checkbox"/> BACTERIOLOGIC SAMPLE	\$25.00	<input type="checkbox"/> NITRATE/NITRITE SAMPLE	\$25.00
<input type="checkbox"/> INORGANIC SAMPLE (ALKALINITY, ARSENIC, CALCIUM, CHLORIDE, COPPER, FLOURIDE, HARDNESS, IRON, LEAD, MAGNESIUM, MANGANESE, pH, SODIUM, ZINC)	\$35.00		
<input checked="" type="checkbox"/> FULL SAMPLE SUITE (INCLUDES THE THREE SAMPLES ABOVE PLUS: BARIUM, CADMIUM, CHROMIUM, MERCURY, SELENIUM, SILVER)	\$100.00		
<input type="checkbox"/> VOC (PETROLEUM) SAMPLE	\$75.00	<input type="checkbox"/> PESTICIDE SAMPLE	\$75.00
<input type="checkbox"/> IRON BACTERIA SAMPLE	\$25.00	<input type="checkbox"/> SULFUR BACTERIA SAMPLE	\$25.00
<input type="checkbox"/> RADON IN WATER TEST KIT *	\$20.00	<input type="checkbox"/> RADON IN AIR TEST KIT *	\$20.00

* We provide radon kits for the applicant to mail in to the lab

WATER SAMPLES MUST BE REQUESTED BY THE OWNER OR TENANT OF THE PROPERTY WITH A SIGNATURE ON THIS FORM
THE WELL HEAD AND SAMPLING SPIGOTS MUST BE EXPOSED AND MADE ACCESSIBLE TO THE OCHD.

THE RESULTS OF THE REQUESTED WATER SAMPLES ARE NOT INTENDED FOR USE IN PROPERTY TRANSACTIONS, LOAN APPROVALS, OFFERS TO PURCHASE, OR REAL ESTATE CONTRACTS.

PLEASE DO NOT CHLORINATE THE WELL BEFORE SAMPLING UNLESS INSTRUCTED TO DO SO BY THE OCHD.

I AUTHORIZE THE OCHD TO ENTER THE PROPERTY AND PERFORM THE SERVICE REQUESTED.

OWNER / TENANT: Ricka Samulski DATE: April 23, 2013

RETURN WITH PAYMENT TO:

ORANGE COUNTY HEALTH DEPARTMENT, ENVIRONMENTAL HEALTH SERVICES
P.O. BOX 8181, 131 W. MARGARET LN, SUITE 100, HILLSBOROUGH, NC 27278

Payment must be included with this application in order to complete the services

Date	Notes
5-6-13	BH
5-22-13	
5-24	

Please give me a call to set an appointment to come inside to test water. 36711

B&A 2/0

ORANGE COUNTY HEALTH DEPARTMENT INDIVIDUAL WELL SAMPLE ANALYSIS



Please refer to the attached lab report for the results of the inorganic water sample taken at:

801 Creekstone Dr (Location Address)

BACTERIA SAMPLE RESULTS

☒ **No bacteria found**

☐ **Bacteria was found** – see attached recommendations ☐ Total Coliform ☐ Fecal Coliform

INORGANIC SAMPLE RESULTS

☒ **No problems were identified in this inorganic sample.** The analysis of the sample indicates that the water is within the recommended and safe limits for drinking water.

☐ The analysis of the sample indicates that some of the recommended limits for drinking water were exceeded. At the levels found, they are considered a nuisance and not a health threat.

☐ The analysis of the sample indicates that some of the primary limits for drinking water were exceeded. It is recommended that a treatment system be installed, or other repairs be made to the well if the water is intended to be used for drinking or preparing food or drinks.

☐ **IRON was high in the** ☐ TREATED SAMPLE ☐ UNTREATED SAMPLE ☐ BOTH

☐ **MANGANESE was high in the** ☐ TREATED SAMPLE ☐ UNTREATED SAMPLE ☐ BOTH

These elements will cause red or brown staining of fixtures, clothes and cooking utensils. They can also impart undesirable tastes to the water.

☐ At the level found, this is considered to be a nuisance and not a health threat.

☐ At the level found, it is recommended that a treatment system be installed if the water is to be used for drinking or cooking. (>2.8 mg/l iron or >1.6 mg/l manganese)

A specialized water softener or other treatment system can be installed to reduce the effects of these elements. The type of system depends on the levels of the mineral(s) and the pH of your water.

☐ **HARDNESS was high in the** ☐ TREATED SAMPLE ☐ UNTREATED SAMPLE ☐ BOTH

This condition causes whitish or gray residues/deposits on cooking utensils and causes soap and shampoo to not lather very well. It can also cause premature burnout of electric hot-water heater elements. Very hard water is considered to be above 180 mg/l. **A water softener or other treatment system can be installed to reduce the effects of this condition.**

☐ **THE pH was low in the** ☐ TREATED SAMPLE ☐ UNTREATED SAMPLE ☐ BOTH

A pH lower than 6.5 units indicates the water is acidic and this condition may cause blue/green staining of the fixtures. It can also impart a bitter taste to the water. In some cases, it can cause undesired levels of copper and lead in the tap water and lead to erosion of copper pipes. **This condition can be remedied with a neutralizing system.**

☐ **ARSENIC ADVISORY ATTACHED**

☐ **OTHER CONTAMINANTS -**

☒ **OTHER COMMENTS -** outside spigot appears to go through water
softener as well.

If there are children who live at this address, please let their dentist or pediatrician know the fluoride level as this element directly affects the development of their teeth.

If you have questions concerning these results, please call the Environmental Health Services Division at 919-245-2360 or visit our website at <http://www.orangecountync.gov/envhlth/inspections/WaterTesting.asp>



North Carolina State Laboratory of Public Health
Environmental Sciences
Inorganic Chemistry
Certificate of Analysis

RECEIVED MAY 21 2013

P.O. Box 28047
4312 District Drive
Raleigh, NC 27611-8047
<http://slph.ncpublichealth.com>
Phone: 919-733-3937
Fax: 919-715-8610

Report To:

ORANGE CO ENVIRONMENTAL HEALTH

131 W MARGARET LANE

SUITE 100

HILLSBOROUGH, NC 27278

EIN: 566000327EH

Name of System:

RICKA SAMULSKI

801 CREEKSTONE DR

CHAPEL HILL, NC 27514

Courier # 17-50-13

StarLIMS ID: ES050713-0074001

Date Collected: 05/06/13

Time Collected: 2:20 PM

Date Received: 05/07/13

Collected By: B Hawsworth

Sample Type: Treated

Sample Source: Well

Sampling Point: R/C

Temp. at Receipt:

Well Permit #:

GPS #:

Sample Description:

Comment:

Inorganic Chemical + Metals I (Profile)

Analyte	Result	Allowable Limit	Unit	Qualifier(s)
Arsenic	< 0.005	0.010	mg/L	
Barium	0.2	2.00	mg/L	
Cadmium	< 0.005	0.005	mg/L	
Calcium	3		mg/L	
Chloride	22.00	250	mg/L	
Chromium	< 0.05	0.40	mg/L	
Copper	< 0.05	1.3	mg/L	
Fluoride	< 0.20	4.00	mg/L	
Iron	< 0.10	0.30	mg/L	
Lead	< 0.005	0.015	mg/L	
Magnesium	1		mg/L	
Manganese	< 0.03	0.05	mg/L	
Mercury	< 0.0005	0.002	mg/L	
pH	7.9		N/A	
Selenium	< 0.005	0.05	mg/L	
Silver	< 0.05	0.10	mg/L	
Sodium	15.00		mg/L	
Sulfate	< 5.00	250	mg/L	
Total Alkalinity	14		mg/L	
Total Hardness	12		mg/L	
Zinc	< 0.05	5.00	mg/L	

Report Date: 05/15/2013

Reported By: Arnold Hall



North Carolina State Laboratory of Public Health
Environmental Sciences
Inorganic Chemistry
Certificate of Analysis

RECEIVED MAY 31 2013

P.O. Box 28047
4312 District Drive
Raleigh, NC 27611-8047
<http://slph.ncpublichealth.com>
Phone: 919-733-3937
Fax: 919-715-8610

Report To:

ORANGE CO ENVIRONMENTAL HEALTH
131 W MARGARET LANE
SUITE 100
HILLSBOROUGH, NC 27278
EIN: 566000327EH

Name of System:

RICKA SAMULSKI
801 CREEKSTONE DR
CHAPEL HILL, NC 27516

Courier # 17-50-13

StarLIMS ID: ES050713-0072001

Date Collected: 05/06/13

Time Collected: 2:35 PM

Date Received: 05/07/13

Collected By: B Hawskworth

Sample Type: Treated
Sample Source: Well

Sampling Point: Bathroom tap
Temp. at Receipt:

Well Permit #:
GPS #:

Sample Description:
Comment:

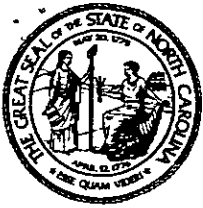
Inorganic Chemical + Metals I (Profile)

Analyte	Result	Allowable Limit	Unit	Qualifier(s)
Arsenic	< 0.005	0.010	mg/L	
Barium	< 0.1	2.00	mg/L	
Cadmium	< 0.001	0.005	mg/L	
Calcium	< 1.0		mg/L	
Chloride	< 5.00	250	mg/L	
Chromium	< 0.01	0.10	mg/L	
Copper	< 0.05	1.3	mg/L	
Fluoride	< 0.20	4.00	mg/L	
Iron	< 0.10	0.30	mg/L	
Lead	< 0.005	0.015	mg/L	
Magnesium	< 1.0		mg/L	
Manganese	< 0.03	0.05	mg/L	
Mercury	< 0.0005	0.002	mg/L	
pH	8.0		N/A	
Selenium	< 0.005	0.05	mg/L	
Silver	< 0.05	0.10	mg/L	
Sodium	62.00		mg/L	
Sulfate	20.00	250	mg/L	
Total Alkalinity	98		mg/L	
Total Hardness	< 7		mg/L	
Zinc	< 0.05	5.00	mg/L	

Report Date: 05/15/2013

Reported By: Arnold Hall

If you have any questions
about these results, you may call
Orange County Environmental
Health at 245-2361.



North Carolina State Laboratory of Public Health
Environmental Sciences
Inorganic Chemistry
Certificate of Analysis

RECEIVED MAY 21 2013

P.O. Box 28047
4312 District Drive
Raleigh, NC 27611-8047
<http://stph.ncpublichealth.com>
Phone: 919-733-3937
Fax: 919-715-8610

Report To:

ORANGE CO ENVIRONMENTAL HEALTH
131 W MARGARET LANE
SUITE 100
HILLSBOROUGH, NC 27278
EIN: 566000327EH

Name of System:

RICKY SAMUSKI
801 CREEKSTONE DR.
CHAPEL HILL, NC

Courier # 17-50-13

StarLiMS ID: ES050713-0071001

Date Collected: 05/06/13

Time Collected: 2:45 PM

Date Received: 05/07/13

Collected By: B Hawksworth

Sample Type: Raw
Sample Source: Well

Sampling Point: Outside hose bib
Temp. at Receipt:

Well Permit #:
GPS #:

Sample Description:

Comment:

*Appears to go through
water softener*

Inorganic Chemical + Metals I (Profile)

Analyte	Result	Allowable Limit	Unit	Qualifier(s)
Arsenic	< 0.005	0.010	mg/L	
Barium	< 0.1	2.00	mg/L	
Cadmium	< 0.001	0.005	mg/L	
Calcium	< 1.0		mg/L	
Chloride	< 5.00	250	mg/L	
Chromium	< 0.01	0.10	mg/L	
Copper	< 0.05	1.3	mg/L	
Fluoride	< 0.20	4.00	mg/L	
Iron	< 0.10	0.30	mg/L	
Lead	< 0.005	0.015	mg/L	
Magnesium	< 1.0		mg/L	
Manganese	< 0.03	0.05	mg/L	
Mercury	< 0.0005	0.002	mg/L	
pH	8.1		N/A	
Selenium	< 0.005	0.05	mg/L	
Silver	< 0.05	0.10	mg/L	
Sodium	58.00		mg/L	
Sulfate	20.00	250	mg/L	
Total Alkalinity	108		mg/L	
Total Hardness	< 7		mg/L	
Zinc	< 0.05	5.00	mg/L	

Report Date: 05/15/2013

Reported By: Arnold Hall

RECEIVED VIA S 1 5011



RECEIVED MAY 15 2013

North Carolina State Laboratory Public Health
Environmental Sciences
Microbiology
Certificate of Analysis

P.O. Box 28047
4312 District Drive
Raleigh, NC 27611-8047
<http://slph.ncpublichealth.com>
Phone: 919-733-7834
Fax: 919-733-8695

Report To:
ORANGE CO ENVIRONMENTAL HEALTH
131 W MARGARET LANE
SUITE 100
HILLSBOROUGH, NC 27278
EIN:566000327EH

Name of System:
RICKA SAMULSKI
801 CREEKSTONE DR
CHAPEL HILL, NC 27516

COURIER #: 17-50-13

StarLIMS Sample ID: **ES050713-0012001**



Collected: 05/06/2013 14:40
Received: 05/07/2013 08:45

B Hawksworth
Susan Beasley

ES Microbiology ID:
GPS Number:

Sample Source: **Well**
Sampling Point: **Bathroom tap**

Well Permit Number:

Sample Description:
Comment:

Environmental Microbiology - Colilert Profile

Method: SM 9223B

Test Name: Colilert

Analyte	Test Result	Analyst	Date
Total Coliform, Colilert	Absent	HLBRASWELL	05/08/2013
<i>E. coli</i> , Colilert	Absent	HLBRASWELL	05/08/2013

Report Date: 05/09/2013

Reported By: **Susan Beasley**

Susan Beasley

If you have any questions
about these results, you may call
Orange County Environmental
Health at 245-2360.

Explanations of Coliform Analysis:

If coliform bacteria are **Absent**, the water is considered safe for drinking purpose. If coliform bacteria are **Present**, the water is considered unsafe for drinking purpose. Presence of *E. coli* (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.



North Carolina State Laboratory of Public Health
Environmental Sciences
Inorganic Chemistry
Certificate of Analysis

P.O. Box 28047
4312 District Drive
Raleigh, NC 27611-8047
<http://slph.ncpublichealth.com>
Phone: 919-733-3937
Fax: 919-715-8610

Report To:

ORANGE CO ENVIRONMENTAL HEALTH

131 W MARGARET LANE

SUITE 100

HILLSBOROUGH, NC 27278

EIN: 566000327EH

Name of System:

RICKA SAMULSKI

801 CREEKSTONE DR

CHAPEL HILL, NC 27516

Courier # 17-50-13

StarLiMS ID: ES050713-0042001

Date Collected: 05/06/13

Time Collected: 2:35 PM

Date Received: 05/07/13

Collected By: B Hawksworth

Sample Type: Treated

Sampling Point: Bathroom tap

Well Permit #:

Sample Source: Well

Temp. at Receipt: 30

GPS #:

Sample Description:

Comment:

Nitrate_Nitrite (Profile)

Analyte	Result	Allowable Limit	Unit	Qualifier(s)
Nitrate	< 1.00	10.00	mg/L	
Nitrite	< 0.10	1.00	mg/L	

Report Date: 05/10/2013

Reported By:

Arnold Hall

North Carolina
Public Health

If you have any questions
about these results, you may call
Orange County Environmental
Health at 245-2360.

Need to take from well - Outside house pit is marked

APPLICATION FOR WATER SAMPLES PRIVATE WATER SUPPLIES

PHONE: 919-245-2360
FAX 919-644-3006

WWW.CO.ORANGE.NC.US

Orange County Health Department
Environmental Health Division
P.O. Box 8181, 131 W. Margaret Lane Suite 100
Hillsborough, NC 27278



DATE RECEIVED: 11-28-11 WELL PERMIT #

415724W

APD# WS 15-06262 TMBL

9169297272

APPLICATION

APPLICANT: Rickia Samulski PROPERTY OWNER: Rickia Samulski
Mailing Address 801 Creekstone Dr Mailing Address 801 Creekstone Dr
Chapel Hill, NC 27516 Chapel Hill NC 27516
PHONE NUMBER 919-929-6115 714-1454(C) PHONE NUMBER 919-929-6115 714-1454 (cell)
EMAIL RSSAM@bellsouth.net PROPERTY ADDRESS 801 Creekstone Dr
DIRECTIONS / LOCATION From Hillsborough - Take Old 86 towards Carrboro. At
intersection of Old 86 and Dairyland (see BP Gas Station) turn right onto Dairyland
over 7

WELL INFORMATION (IF KNOWN):

TYPE OF WELL: ☒ DRILLED (6" DIAMETER) ☐ BORED WELL ☐ HAND DUG WELL
TYPE OF SAMPLE: ☒ NEW SAMPLE ☐ RE-SAMPLE (following previous positive results)
TYPE OF FACILITY ☒ RESIDENCE (Owner Occupied) ☐ RENTAL ☐ BUSINESS

WHEN WAS THE WELL LAST CHLORINATED? Never

DESCRIBE ANY CURRENT PROBLEMS WITH YOUR WATER. Black slimy residue on drains

WATER TREATMENT: ☐ CHLORINATOR ☐ ULTRA VIOLET (UV) DISINFECTION ☐ PH NEUTRALIZER
☒ WATER SOFTENER ☒ SEDIMENT FILTER ☐ IRON REMOVAL ☐ OTHER

TYPE OF SAMPLE REQUESTED:

PAYMENT MUST BE INCLUDED WITH THIS APPLICATION TO COMPLETE THE SERVICES.

☐ BACTERIOLOGIC SAMPLE \$25.00 ☐ NITRATE/NITRITE SAMPLE \$25.00
☐ INORGANIC CHEMICAL SAMPLE (ALKALINITY, ARSENIC, CALCIUM, CHLORIDE, COPPER, FLUORIDE, IRON, HARDNESS, MAGNESIUM, MANGANESE, LEAD, pH, ZINC) \$35.00
☒ FULL SAMPLE SUITE (BACTERIA INDICATORS, ARSENIC, BARIUM, CADMIUM, CHROMIUM, COPPER, FLUORIDE, LEAD, IRON, MAGNESIUM, MANGANESE, MERCURY, NITRATES, NITRITES, pH, SELENIUM, SILVER, SODIUM, ZINC) \$100.00
☐ VOC (PETROLEUM) SAMPLE \$75.00 ☐ PESTICIDE SAMPLE \$75.00
☐ IRON BACTERIA SAMPLE \$25.00 ☐ SULFUR BACTERIA SAMPLE \$25.00

OTHER INFORMATION:

WATER SAMPLES MUST BE REQUESTED BY THE OWNER OR TENANT OF THE PROPERTY WITH A SIGNATURE ON THIS FORM
THE WELL HEAD AND SAMPLING SPIGOTS MUST BE EXPOSED AND MADE ACCESSIBLE TO THE OCHD.

THE RESULTS OF THE REQUESTED WATER SAMPLES ARE NOT INTENDED FOR USE IN PROPERTY TRANSACTIONS, LOAN
APPROVALS, OFFERS TO PURCHASE, OR REAL ESTATE CONTRACTS.

THE WELL SHOULD NOT BE CHLORINATED PRIOR TO SAMPLING UNLESS INSTRUCTED BY THE OCHD.

I HEREBY AUTHORIZE THE OCHD TO ENTER THE PROPERTY AND PERFORM THE SERVICE REQUESTED.

OWNER / TENANT: Rickia Samulski

DATE: November 28, 2011

RETURN WITH PAYMENT TO:
ORANGE COUNTY HEALTH DEPARTMENT, ENVIRONMENTAL HEALTH DIVISION
P.O. BOX 8181, 131 W. MARGARET LN, SUITE 100, HILLSBOROUGH, NC 27278

y/n	Date	Notes
Chlorine Check		
Samples collected	11-29-11	BH
Samples collected	12-1-11	BH
Well Head Protected?		
Results mailed		emailed results 12-21-11

On Dayland follow the intersection of Laurel Springs Dr
and Dayland. Turn left onto Laurel Springs Dr.
Then take an immediate right onto Greystone Dr.
Follow till 3rd number on the right. Follow driveway
to left of number.

ORANGE COUNTY HEALTH DEPARTMENT
INDIVIDUAL WELL SAMPLE ANALYSIS



Please refer to the attached lab report for the results of the inorganic water sample taken at:

801 Creekstone Dr (Location Address)

BACTERIA SAMPLE RESULTS



No bacteria found



Bacteria was found

☐ Total Coliform

☐ Fecal Coliform

☐ See attached recommendations

INORGANIC SAMPLE RESULTS



No problems were identified in this inorganic sample. The analysis of the sample indicates that the water is within the recommended and safe limits for drinking water. *After Treatment*



The analysis of the sample indicates that some of the secondary limits for drinking water were exceeded. At the levels found, they are considered a nuisance and not a health threat.



The analysis of the sample indicates that some of the primary limits for drinking water were exceeded. It is recommended that a treatment system be installed, or other repairs be made to the well if the water is intended to be used for drinking or preparing food or drinks.

The checkboxes below indicate where your water did not meet acceptable or recommended limits. More information is available on our website. <http://www.co.orange.nc.us/envhlth/inspections/WaterTesting.asp>



IRON was high in the

☐ TREATED SAMPLE



UNTREATED SAMPLE



BOTH



MANGANESE was high in the

☐ TREATED SAMPLE



UNTREATED SAMPLE



BOTH

These elements will cause red or brown staining of fixtures, clothes and cooking utensils. They can also impart undesirable tastes to the water.



At the level found, this is considered to be a nuisance and not a health threat.



At the level found, it is recommended that a treatment system be installed if the water is to be used for drinking or cooking. (>2.8 mg/l iron or >1.6 mg/l manganese)

A specialized water softener or other treatment system can be installed to reduce the effects of these elements. The type of system depends on the levels of the mineral(s) and the pH of your water.



HARDNESS was high in the

☐ TREATED SAMPLE



UNTREATED SAMPLE



BOTH

This condition causes whitish or gray residues/deposits on cooking utensils and causes soap and shampoo to not lather very well. It can also cause premature burnout of electric hot-water heater elements. Very hard water is considered to be above 180 mg/l. **A water softener or other treatment system can be installed to reduce the effects of this condition.**



THE pH was low in the

☐ TREATED SAMPLE



UNTREATED SAMPLE



BOTH

A pH lower than 6.5 units indicates the water is acidic and this condition may cause blue/green staining of the fixtures. It can also impart a bitter taste to the water. In some cases, it can cause undesired levels of copper and lead in the tap water and lead to erosion of copper pipes. **This condition can be remedied with a neutralizing system.**



ARSENIC ADVISORY ATTACHED



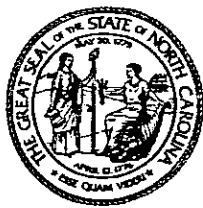
OTHER CONTAMINANTS -



OTHER COMMENTS -

If there are children who live at this address, please let their dentist or pediatrician know the fluoride level as this element directly affects the development of their teeth.

If you have questions concerning these results, please call the Environmental Health Services Division at 919-245-2360 or visit our website at WWW.CO.ORANGE.NC.US for information on specific water problems and treatment.



North Carolina State Laboratory of Public Health
Environmental Sciences
Inorganic Chemistry
 Certificate of Analysis

P.O. Box 28047
 306 N. Wilmington St.
 Raleigh, NC 27611-8047
<http://slph.ncpublichealth.com>
 Phone: 919-733-7834
 Fax: 919-733-8695

Report To:**ORANGE CO ENVIRONMENTAL HEALTH****PO BOX 8181****131 W MARGARET LANE, SUITE****HILLSBOROUGH, NC 27278****EIN: 566000327EH****Name of System:****RICKA SAMULSKI****801 CREEKSTONE DR****CHAPEL HILL, NC 27516****Courier # 17-50-13**StarLiMS ID: **ES113011-0009001**

Date Collected: 11/29/11

Time Collected: 11:40 AM

Date Received: 11/30/11

Collected By: B Hawksworth

Sample Type: Treated

Sample Source: Well

Sampling Point: Outside hose bib

Temp. at Receipt:

Well Permit #:

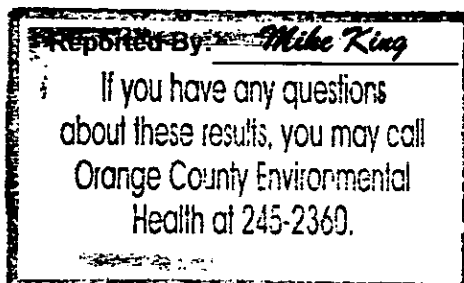
GPS #:

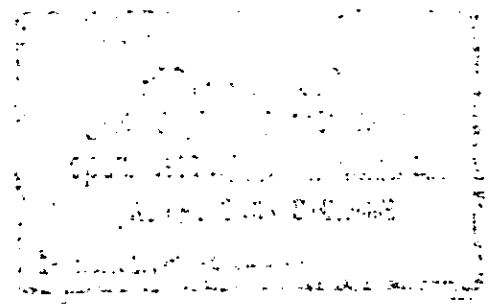
Sample Description:

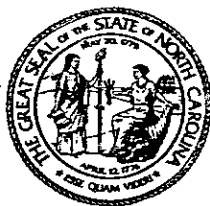
Comment:

Inorganic Chemical + Metals I (Profile)

Analyte	Result	Allowable Limit	Unit	Qualifier(s)
Arsenic	< 0.005	0.010	mg/L	
Barium	< 0.1	2.00	mg/L	
Cadmium	< 0.001	0.005	mg/L	
Calcium	< 1.0		mg/L	
Chloride	< 5.00	500	mg/L	
Chromium	< 0.01	0.10	mg/L	
Copper	< 0.05	1.3	mg/L	
Fluoride	< 0.20	4.00	mg/L	
Iron	< 0.10	0.30	mg/L	
Lead	< 0.005	0.015	mg/L	
Magnesium	< 1.0		mg/L	
Manganese	< 0.03	0.05	mg/L	
Mercury	< 0.0005	0.002	mg/L	
pH	7.1		N/A	
Selenium	< 0.005	0.05	mg/L	
Silver	< 0.05	0.10	mg/L	
Sodium	57.00		mg/L	
Sulfate	19.00	250	mg/L	
Total Alkalinity	94		mg/L	
Total Hardness	< 7		mg/L	
Zinc	< 0.05	5.00	mg/L	

Report Date: 12/12/2011





North Carolina State Laboratory of Public Health
Environmental Sciences
Inorganic Chemistry
Certificate of Analysis

P.O. Box 28047
306 N. Wilmington St.
Raleigh, NC 27611-8047
<http://slph.ncpublichealth.com>
Phone: 919-733-7834
Fax: 919-733-8695

Report To:

ORANGE CO ENVIRONMENTAL HEALTH

PO BOX 8181

131 W MARGARET LANE, SUITE

HILLSBOROUGH, NC 27278

EIN: 566000327EH

Name of System:

RICKA SAMULSKI

801 CREEKSTONE DR.

CHAPEL HILL, NC 27516

Courier # 17-50-13

StarLiMS ID: ES113011-0013001

Date Collected: 11/29/11

Time Collected: 11:30 AM

Date Received: 11/30/11

Collected By: B Hawksworth

Sample Type: Raw

Sample Source: Well

Sampling Point: Well head

Temp. at Receipt:

Well Permit #:

GPS #:

Sample Description:

Comment:

Inorganic Chemical + Metals I (Profile)

Analyte	Result	Allowable Limit	Unit	Qualifier(s)
Arsenic	< 0.005	0.010	mg/L	
Barium	< 0.1	2.00	mg/L	
Cadmium	< 0.001	0.005	mg/L	
Calcium	40		mg/L	
Chloride	< 5.00	500	mg/L	
Chromium	< 0.01	0.10	mg/L	
Copper	< 0.05	1.3	mg/L	
Fluoride	< 0.20	4.00	mg/L	
Iron	< 0.10	0.30	mg/L	
Lead	< 0.005	0.015	mg/L	
Magnesium	2		mg/L	
Manganese	0.68	0.05	mg/L	
Mercury	< 0.0005	0.002	mg/L	
pH	7.3		N/A	
Selenium	< 0.005	0.05	mg/L	
Silver	< 0.05	0.10	mg/L	
Sodium	6.70		mg/L	
Sulfate	19.00	250	mg/L	
Total Alkalinity	95		mg/L	
Total Hardness	110		mg/L	
Zinc	< 0.05	5.00	mg/L	

Report Date: 12/12/2011

Reported By: Mike King
If you have any questions
about these results, you may call
Orange County Environmental
Health at 245-2360.

RECEIVED NOV 23 2011



North Carolina State Laboratory Public Health
Environmental Sciences
Microbiology
Certificate of Analysis

P.O. Box 28047
306 N. Wilmington St.
Raleigh, NC 27611-8047
<http://slph.ncpublichealth.com>
Phone: 919-733-7834
Fax: 919-733-8695

Report To:

ORANGE CO ENVIRONMENTAL HEALTH
PO BOX 8181
131 W MARGARET LANE, SUITE
HILLSBOROUGH, NC 27278
EIN:566000327EH

Name of System:

RICKI SAMULSKI

801 CREEKSTONE DR
CHAPEL HILL, NC 27516

COURIER #: 17-50-13

StarLIMS Sample ID: ES113011-0079001



Collected: 11/29/2011 11:45

Received: 11/30/2011 08:04

B Hawksworth
Angela Heybroek

ES Microbiology ID: 32289

GPS Number:

Sample Source: Well

Sampling Point: Outside hose bib

Well Permit Number:

Sample Description:

Comment:

Environmental Microbiology - Colilert Profile

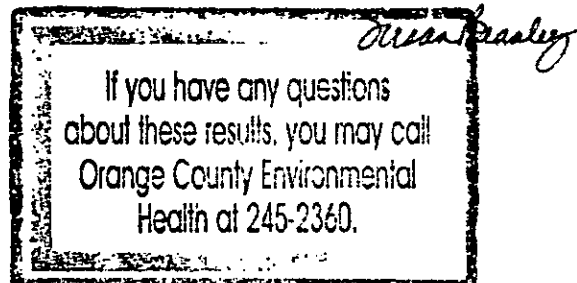
Method: SM 9223B

Test Name: Colilert

Analyte	Test Result	Analyst	Date
Total Coliform, Colilert	Absent	Dameice Lyons	12/01/2011
E. coli, Colilert	Absent	Dameice Lyons	12/01/2011

Report Date: 12/02/2011

Reported By: Susan Beasley



Explanations of Coliform Analysis:

If coliform bacteria are **Absent**, the water is considered safe for drinking purpose. If coliform bacteria are **Present**, the water is considered unsafe for drinking purpose. Presence of *E. coli* (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.



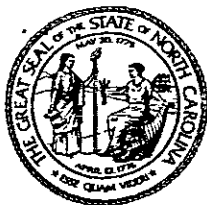
North Carolina State Laboratory of Public Health
Environmental Sciences
Inorganic Chemistry
Certificate of Analysis

P.O. Box 28047
306 N. Wilmington St.
Raleigh, NC 27611-8047
<http://slph.ncpublichealth.com>
Phone: 919-733-7834
Fax: 919-733-8695

Report To:**ORANGE CO ENVIRONMENTAL HEALTH****PO BOX 8181****131 W MARGARET LANE, SUITE
HILLSBOROUGH, NC 27278****EIN: 566000327EH****Name of System:****RICKA SAMULSKI****801 CREEKSTONE DR
CHAPEL HILL, NC 27516****Courier # 17-50-13****StarLiMS ID: ES113011-0043001****Date Collected: 11/29/11****Time Collected: 11:30 AM****Date Received: 11/30/11****Collected By: B Hawksworth****Sample Type: Raw
Sample Source: Ground****Sampling Point: Well head
Temp. at Receipt: 4.5****Well Permit #:
GPS #:****Sample Description:****Comment:****Nitrate_Nitrite (Profile)**

Analyte	Result	Allowable Limit	Unit	Qualifier(s)
Nitrate	< 1.00	10.00	mg/L	
Nitrite	< 0.10	1.00	mg/L	

Report Date: 12/06/2011**Reported By: Mike King**



North Carolina State Laboratory of Public Health
Environmental Sciences
Inorganic Chemistry
Certificate of Analysis

RECEIVED DEC 21 2011

P.O. Box 28047
306 N. Wilmington St.
Raleigh, NC 27611-8047
<http://slph.ncpublichealth.com>
Phone: 919-733-7834
Fax: 919-733-8695

Report To:

ORANGE CO ENVIRONMENTAL HEALTH

PO BOX 8181

131 W MARGARET LANE, SUITE

HILLSBOROUGH, NC 27278

EIN: 566000327EH

Name of System:

RICKA SAMULSKI

801 CREEKSTONE DR

CHAPEL HILL, NC

Courier # 17-50-13

StarLiMS ID: ES120211-0005001

Date Collected: 12/01/11

Time Collected: 1:00 PM

Date Received: 12/02/11

Collected By: B Hawksworth

Sample Type: Treated

Sampling Point: R/O

Well Permit #:

Sample Source: Well

Temp. at Receipt:

GPS #:

Sample Description:

Comment:

Inorganic Chemical + Metals I (Profile)

Analyte	Result	Allowable Limit	Unit	Qualifier(s)
Arsenic	< 0.005	0.010	mg/L	
Barium	< 0.1	2.00	mg/L	
Cadmium	< 0.001	0.005	mg/L	
Calcium	< 1.0		mg/L	
Chloride	< 5.00	500	mg/L	
Chromium	< 0.01	0.10	mg/L	
Copper	< 0.05	1.3	mg/L	
Fluoride	< 0.20	4.00	mg/L	
Iron	< 0.10	0.30	mg/L	
Lead	< 0.005	0.015	mg/L	
Magnesium	< 1.0		mg/L	
Manganese	< 0.03	0.05	mg/L	
Mercury	< 0.0005	0.002	mg/L	
pH	5.4		N/A	
Selenium	< 0.005	0.05	mg/L	
Silver	< 0.05	0.10	mg/L	
Sodium	3.80		mg/L	
Sulfate	< 5.00	250	mg/L	
Total Alkalinity	7		mg/L	
Total Hardness	< 7		mg/L	
Zinc	< 0.05	5.00	mg/L	

Report Date: 12/19/2011

Reported By:

Mike Ray

If you have any questions
about these results, you may call
Orange County Environmental
Health at 245-2360.

APPLICATION FOR WATER SAMPLES PRIVATE WATER SUPPLIES

PHONE: 919-245-2360
FAX 919-644-3006

WWW.CO.ORANGE.NC.US

Orange County Health Department
Environmental Health Division
P.O. Box 8181, 306-C Revere Road
Hillsborough, NC 27278



Sample from
inside

DATE RECEIVED: 8-6-08

Receipt # R08-002671

APD# WS 08-00243

TMBL

7.110.27

APPLICATION

APPLICANT: Ricka Samulski PROPERTY OWNER: Ricka Samulski
Mailing Address 801 Creekstone Dr. Mailing Address 801 Creekstone Dr.
Chapel Hill, NC 27516 Chapel Hill, NC 27516
PHONE NUMBER 919 929-6463 PHONE NUMBER 919 929-6463
PROPERTY ADDRESS 801 Creekstone Dr. DIRECTIONS / LOCATION 86 to Calvander
Chapel Hill, NC 27516 Intersection - Dawayland Rd (BP Gas station)
turn right on Dawayland left on Laurel Springs
Dr.

WELL INFORMATION (IF KNOWN):

TYPE OF WELL: ☒ DRILLED (6" DIAMETER) ☐ BORED WELL ☐ HAND DUG WELL

IS THIS APPLICATION FOR A: ☐ NEW SAMPLE ☐ RE-SAMPLE (WITHIN THE LAST TWO YEARS)

WHEN WAS THE WELL LAST CHLORINATED? Don't know

DESCRIBE ANY CURRENT PROBLEMS WITH YOUR WATER. Discoloration

WATER TREATMENT: ☐ CHLORINATOR ☐ ULTRA VIOLET (UV) DISINFECTION ☐ PH NEUTRALIZER
☒ WATER SOFTENER ☐ SEDIMENT FILTER ☐ IRON REMOVAL ☐ OTHER type of salt

TYPE OF SAMPLE REQUESTED:

PAYMENT MUST BE INCLUDED WITH THIS APPLICATION TO COMPLETE THE SERVICES.

- | | | | |
|--|---------|---|----------|
| <input type="checkbox"/> BACTERIOLOGIC SAMPLE | \$25.00 | <input type="checkbox"/> NITRATE/NITRITE SAMPLE | \$25.00 |
| <input type="checkbox"/> INORGANIC CHEMICAL SAMPLE
(ALKALINITY, ARSENIC, CALCIUM, CHLORIDE, COPPER, FLOURIDE, IRON, HARDNESS, MAGNESIUM, MANGANESE, LEAD, pH, ZINC) | | | \$35.00 |
| <input checked="" type="checkbox"/> FULL SAMPLE SUITE (BACTERIA INDICATORS, ARSENIC, BARIUM, CADMIUM, CHROMIUM, COPPER, FLOURIDE, LEAD, IRON, MAGNESIUM, MANGANESE, MERCURY, NITRATES, NITRITES, Ph, SELENIUM, SILVER, SODIUM, ZINC) | | | \$100.00 |
| <input type="checkbox"/> VOC (PETROLEUM) SAMPLE | \$75.00 | <input type="checkbox"/> PESTICIDE SAMPLE | \$75.00 |

OTHER INFORMATION:

WATER SAMPLES MUST BE REQUESTED BY THE OWNER OR TENANT OF THE PROPERTY WITH A SIGNATURE ON THIS FORM
AUTHORIZING THE OCHD TO ENTER THE PROPERTY.

THE WELL HEAD AND SAMPLING SPIGOTS MUST BE EXPOSED AND MADE ACCESSIBLE TO THE OCHD.

THE RESULTS OF THE REQUESTED WATER SAMPLES ARE NOT INTENDED FOR USE IN PROPERTY TRANSACTIONS, LOAN
APPROVALS, OFFERS TO PURCHASE, OR REAL ESTATE CONTRACTS.

THE WELL SHOULD NOT BE CHLORINATED PRIOR TO SAMPLING UNLESS INSTRUCTED BY THE OCHD.

I HEREBY AUTHORIZE THE OCHD TO ENTER THE PROPERTY AND PERFORM THE SERVICE REQUESTED.

OWNER/ TENANT: Ricka Samulski

DATE: August 6, 2008

RETURN WITH PAYMENT TO:

ORANGE COUNTY HEALTH DEPARTMENT, ENVIRONMENTAL HEALTH DIVISION
P.O. BOX 8181, 306-C REVERE RD., HILLSBOROUGH, NC 27278

Chlorine Check	yfr	Date	Notes
<input checked="" type="checkbox"/>		8-18-08	BLH
Samples collected			
Samples collected			
Well Head Protected?			Covered with insulation
			mailed 9-16-08

North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28407 - 306 N. Wilmington St. - Raleigh, N. C. 27611-8047

COLIFORM ANALYSIS - PRIVATE WATER SUPPLY

Name of Owner or Tenant: Samulski, Ricka 7.110.27 **County:** Orange
Address: 801 Creekstone Drive Chapel Hill **ZIP:** 27516
Source: Well **Type of Sampling Point:** Kitchen Tap
Collected By: BLH **Date:** 8/18/2008 **Time:** 11:20 AM
Signed By: Hawksworth, BL **Analysis Type:** Private

Report To: Orange Co. Environ. Health
Post Office Box 8181
Hillsborough, NC 27278

(919) 732-8181

BACTERIOLOGIC ANALYSIS

CONTAMINANTS

RESULT

Total Coliform (ColilertRoutine)

Absent

Sample No: AB11788 **Date Received:** 8/19/2008 **Time Received:** 8:10:00 AM

Date Reported: 8/20/2008 **Today's Date:** 8/20/2008

Comments:



If you have any questions
about these results, you may call
Orange County Environmental
Health at 245-2360.

Orange Co. Environ. Health
ATTN: Hawksworth, BL
Post Office Box 8181
Hillsborough, NC 27278

Courier 17-50-13

These results are not intended for
use in property transactions, loan
approvals, offers to purchase, nor
real estate contracts.

Explanations

Coliform Analysis:

If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes.

Presence of *E. coli* (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

Inorganic Analysis:

Recommended limits for drinking water. Sample should not exceed levels listed below.

Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.01 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28047 - 306 N. Wilmington St. - Raleigh, N. C. 27611-8047

INORGANIC CHEMICAL ANALYSIS - NITRATE ONLY

Name of System: Samulski, Ricka 7.110..27**Source of Water:** Ground**Address:** 801 Creekstone Dr
Chapel Hill, NC**Zip:** 27516**Source of Sample:****County:** ORANGE**Type of Sample:** Treated**Report To:** Orange Co. Envr. Health
Post Office Box 8181
Hillsborough, NC 27278
Courier: 17-50-13**ATTN:**
(919) 732-8181**Type of Treatment:** Wtr softener**Type of Analysis:** Nitrate**Category:** Other**Collected By:** BL HAWKSWORTH**Date:** 8/18/2008**Time:** 11:30:00 AM**Location of sampling point:** Kitchen tap**Remarks:**

Parameters	Results	Units	Date Analyzed:
Nitrite as N	<0.10	mg/l	8/19/2008
Nitrate as N	<1.0	mg/l	8/19/2008

If you have any questions
about these results, you may call
Orange County Environmental
Health at 245-2360.

These results are not intended for
use in property transactions, loan
approvals, offers to purchase, nor
real estate contracts.

EXPLANATION OF RESULTS:

Foster/Therapeutic Homes: Nitrate-N level acceptable if less than or equal to 10 mg/l
Private Well Guidelines: Nitrite-N level should be < 1.0 mg/l and Nitrate-N < 10.0 mg/l

Sample Temperature on Receipt: 0.5 °C**Date Received:** 8/19/2008**Report Date:** 9/5/2008**Reported By:** *M. King***Today's Date:** 9/5/2008**Reference:** 11209**Login Batch** 08080045**Sample Number:** AB76807

Explanations

Coliform Analysis:

If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes. Presence of *E. coli* (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

Inorganic Analysis:

Recommended limits for drinking water. Sample should not exceed levels listed below.

Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.01 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

RECEIVED SEP 10 2008

**North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28047 -- 306 N. Wilmington St. -- Raleigh, N. C. 27611-8047**

INORGANIC CHEMICAL ANALYSIS - PRIVATE WATER SYSTEM

Name of System: Samulski, Ricka 7.110..27

Source of Water: Well

Address: 801 Creekstone Dr
Chapel Hill, NC

Zip: 27516

Source of Sample:

Type of Sample: Treated

Type of Treatment: Softener/R/O

County: ORANGE

Report To: Orange Co. Envr. Health
Post Office Box 8181
Hillsborough, NC 27278
Courier: 17-50-13

ATTN:
(919) 732-8181

Type of Analysis: Private

Collected By: BL HAWKSWORTH

Date: 8/18/2008

Time: 11:15:00 AM

Location of sampling point: R/O

Remarks:

Parameters	Results	Units	Date Analyzed:
Silver	<0.05	mg/l	8/19/2008
Alkalinity as CaCO3	8	mg/l	8/19/2008
Arsenic	<0.001	mg/l	8/19/2008
Barium	<0.1	mg/l	8/19/2008
Calcium	<0.5	mg/l	8/19/2008
Cadmium	<0.001	mg/l	8/19/2008
Chloride IC	<5.0	mg/l	8/19/2008
Chromium	<0.01	mg/l	8/19/2008
Copper	<0.05	mg/l	8/19/2008
Fluoride	<0.20	mg/l	8/19/2008
Iron	<0.10	mg/l	8/19/2008
Hardness as CaCO3 (Ca,Mg)	<2	mg/l	8/19/2008
Mercury	<0.0005	mg/l	8/19/2008
Magnesium	<0.10	mg/l	8/19/2008
Manganese	<0.03	mg/l	8/19/2008
Lead	<0.005	mg/l	8/19/2008
pH	6.3	Std. units	8/19/2008
Selenium	<0.005	mg/l	8/19/2008
Zinc	<0.05	mg/l	8/19/2008

If you have any questions
about these results, you may call
Orange County Environmental
Health at 245-2360.

These results are not intended for
use in property transactions, loan
approvals, offers to purchase, nor
real estate contracts.

Date Received: 8/19/2008

Report Date: 9/5/2008

Reported By: *M. King*

Today's Date: 9/5/2008

Ref: 11161

Login Batch: 08080043

Sample Number: AB76716

Explanations

Coliform Analysis:

If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes. Presence of E. coli (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

Inorganic Analysis:

Recommended limits for drinking water. Sample should not exceed levels listed below.

Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.01 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

RECEIVED SEP 10 2008

**North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28047 – 306 N. Wilmington St. – Raleigh, N. C. 27611-8047**

INORGANIC CHEMICAL ANALYSIS - PRIVATE WATER SYSTEM

Name of System: Samulski, Ricka 7.110..27

Source of Water: Well

Address: 801 Creekstone Dr
Chapel Hill, NC

Zip: 27516

Source of Sample:

Type of Sample: Raw

County: ORANGE

Type of Treatment:

Report To: Orange Co. Envr. Health
Post Office Box 8181
Hillsborough, NC 27278
Courier: 17-50-13

ATTN:

(919) 732-8181

Type of Analysis Private

Collected By: BL HAWKSWORTH

Date: 8/18/2008

Time: 11:45:00 AM

Location of sampling point: Outside hose bib

Remarks:

Parameters	Results	Units	Date Analyzed:
Silver	<0.05	mg/l	8/19/2008
Alkalinity as CaCO ₃	86	mg/l	8/19/2008
Arsenic	0.001	mg/l	8/19/2008
Barium	<0.1	mg/l	8/19/2008
Calcium	<0.5	mg/l	8/19/2008
Cadmium	<0.001	mg/l	8/19/2008
Chloride IC	<5.0	mg/l	8/19/2008
Chromium	<0.01	mg/l	8/19/2008
Copper	<0.05	mg/l	8/19/2008
Fluoride	<0.20	mg/l	8/19/2008
Iron	<0.10	mg/l	8/19/2008
Hardness as CaCO ₃ (Ca,Mg)	<2	mg/l	8/19/2008
Mercury	<0.0005	mg/l	8/19/2008
Magnesium	<0.10	mg/l	8/19/2008
Manganese	<0.03	mg/l	8/19/2008
Lead	<0.005	mg/l	8/19/2008
pH	7.6	Std. units	8/19/2008
Selenium	<0.005	mg/l	8/19/2008
Zinc	<0.05	mg/l	8/19/2008

If you have any questions
about these results, you may call
Orange County Environmental
Health at 245-2360.

These results are not intended for
use in property transactions, loan
approvals, offers to purchase, nor
real estate contracts.

Date Received: 8/19/2008

Report Date: 9/5/2008

Reported By: *M. King*

Today's Date: 9/5/2008

Ref: 11168

Login Batch: 08080043

Sample Number: AB76723

Explanations

Coliform Analysis:

If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes. Presence of E. coli (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

Inorganic Analysis:

Recommended limits for drinking water. Sample should not exceed levels listed below.

Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.01 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

RECEIVED SEP 10 2008

North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28047 – 306 N. Wilmington St. – Raleigh, N. C. 27611-8047

INORGANIC CHEMICAL ANALYSIS - PRIVATE WATER SYSTEM

Name of System: Samulski, Ricka 7.110..27

Source of Water: Well

Address: 801 Creekstone Dr
Chapel Hill, NC

Zip: 27516

Source of Sample:

Type of Sample: Treated

County: ORANGE

Type of Treatment: Wtr softener

Report To: Orange Co. Envr. Health
Post Office Box 8181
Hillsborough, NC 27278

ATTN:
(919) 732-8181

Type of Analysis: Private

Courier: 17-50-13

Collected By: BL HAWKSWORTH

Date: 8/18/2008

Time: 11:10:00 AM

Location of sampling point: Kitchen tap

Remarks:

Parameters	Results	Units	Date Analyzed:
Silver	<0.05	mg/l	8/19/2008
Alkalinity as CaCO ₃	87	mg/l	8/19/2008
Arsenic	<0.001	mg/l	8/19/2008
Barium	<0.1	mg/l	8/19/2008
Calcium	<0.5	mg/l	8/19/2008
Cadmium	<0.001	mg/l	8/19/2008
Chloride IC	<5.0	mg/l	8/19/2008
Chromium	<0.01	mg/l	8/19/2008
Copper	<0.05	mg/l	8/19/2008
Fluoride	<0.20	mg/l	8/19/2008
Iron	<0.10	mg/l	8/19/2008
Hardness as CaCO ₃ (Ca,Mg)	<2	mg/l	8/19/2008
Mercury	<0.0005	mg/l	8/19/2008
Magnesium	<0.10	mg/l	8/19/2008
Manganese	<0.03	mg/l	8/19/2008
Lead	<0.005	mg/l	8/19/2008
pH	7.5	Std. units	8/19/2008
Selenium	<0.005	mg/l	8/19/2008
Zinc	<0.05	mg/l	8/19/2008

If you have any questions
about these results, you may call
Orange County Environmental
Health at 245-2360.

These results are not intended for
use in property transactions, loan
approvals, offers to purchase, nor
real estate contracts.

Date Received: 8/19/2008

Report Date: 9/5/2008

Reported By: *M. King*

Today's Date: 9/5/2008

Ref: 11159

Login Batch: 08080043

Sample Number: AB76714

Explanations

Coliform Analysis:

If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes. Presence of E. coli (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

Inorganic Analysis:

Recommended limits for drinking water. Sample should not exceed levels listed below.

Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.01 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

ORANGE COUNTY HEALTH DEPARTMENT
INDIVIDUAL WELL INORGANIC CHEMICAL ANALYSIS



The results of the inorganic water sample taken at:

801 Creekside Drive TMBL: 7-110-.27
are attached. The results showed the following parameters with checked boxes were not within acceptable or recommended limits:

- ☐ **NONE** - No problems were identified in this sample. If you feel there are still problems with your water, please call and we can discuss your concerns further.

THE IRON / MANGANESE LEVELS WERE HIGH IN THE:

- ☐ TREATED SAMPLE
☐ UNTREATED SAMPLE
☐ BOTH

These elements will cause red or brown staining of fixtures, clothes and cooking utensils. They can also impart undesirable tastes to the water. They are generally considered to be a nuisance and not a health threat. A specialized water softener or other treatment system can be installed to reduce the effects of these elements - the type of system depends on the levels of the mineral(s).

THE HARDNESS WAS EXCESSIVE IN THE:

- ☐ TREATED SAMPLE
☐ UNTREATED SAMPLE
☐ BOTH

This condition causes whitish or gray residues/deposits on cooking utensils and causes soap and shampoo to not lather very well. It can also cause premature burnout of electric hot-water heater elements. Very hard water is considered to be above 180 mg/l. A water softener or other treatment system can be installed to reduce the effects of this condition.

THE pH LEVEL WAS 6.5 UNITS OR LOWER IN THE:

- ☒ TREATED SAMPLE after the reverse osmosis unit only.
☐ UNTREATED SAMPLE
☐ BOTH

A low pH indicates the water is acidic and this condition may cause blue/green staining of the fixtures. It can also impart a bitter taste to the water. In severe cases, it can cause undesired levels of copper and lead in the tap water and lead to erosion of copper pipes. This condition can be remedied with a neutralizing system.

- ☐ ARSENIC ADVISORY ATTACHED

- ☐ OTHER CONTAMINANTS -

- ☒ OTHER COMMENTS - There is essentially no difference in the sample from the outside hose bib and the sample from the kitchen tap. It is possible the hose bibb water is post-treatment.

If there are children who live at this address, please let their dentist or pediatrician know the fluoride level as this element directly affects the development of their teeth.

Please call the Environmental Health Services Division at 919-245-2360 if you have questions concerning these results.

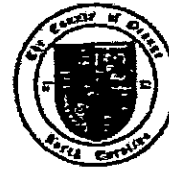
APPLICATION FOR WATER SAMPLES PRIVATE WATER SUPPLIES

PHONE: 919-245-2360

FAX 919-644-3006

WWW.CO.ORANGE.NC.US

Orange County Health Department
Environmental Health Division
P.O. Box 8181, 306-C Revere Road
Hillsborough, NC 27278



DATE RECEIVED: 9/25 Receipt # 06-003403 APD# WS 06.00382 TMBL 7-110-27

APPLICATION

APPLICANT: Ricka Samulski PROPERTY OWNER: Ricka Samulski
ADDRESS 801 Creekstone Dr ADDRESS 801 Creekstone Dr
Chapel Hill NC 27516 Chapel Hill NC
PHONE NUMBER 919 929-6463 PHONE NUMBER 919 929-6463
SUBDIVISION / LOT# _____ DIRECTIONS / LOCATION Take Old 86 So. Turn right
on Dairyland Rd (see BP Gas / Calavander Mkt). Turn left onto Laurel Springs
Take immediate right on Creekstone Dr. (801) driveway just past mailbox

WELL INFORMATION (IF KNOWN):

TYPE OF WELL: ☐ DRILLED (6" DIAMETER) ☐ BORED WELL ☐ HAND DUG WELL
IS THIS APPLICATION FOR A: ☐ NEW SAMPLE ☐ RE-SAMPLE (WITHIN THE LAST TWO YEARS)
WHEN WAS THE WELL LAST CHLORINATED? _____
DESCRIBE ANY CURRENT PROBLEMS WITH YOUR WATER. _____
WATER TREATMENT: ☐ CHLORINATOR ☐ ULTRA VIOLET (UV) DISINFECTION ☐ PH NEUTRALIZER
☒ WATER SOFTENER ☐ SEDIMENT FILTER ☐ IRON REMOVAL ☐ OTHER

TYPE OF SAMPLE REQUESTED:

PAYMENT MUST BE INCLUDED WITH THIS APPLICATION TO COMPLETE THE SERVICES.

☒ BACTERIOLOGIC SAMPLE \$25.00 ☐ NITRATE/NITRITE SAMPLE \$25.00
☒ INORGANIC CHEMICAL SAMPLE (INCLUDES IRON, HARDNESS, pH, FLUORIDE and ARSENIC) \$35.00
☐ VOC (PETROLEUM) SAMPLE \$75.00 ☐ PESTICIDE SAMPLE \$75.00

OTHER INFORMATION:

WATER SAMPLES MUST BE REQUESTED BY THE OWNER OR TENANT OF THE PROPERTY WITH A SIGNATURE ON THIS FORM
AUTHORIZING THE OCHD TO ENTER THE PROPERTY.

THE WELL HEAD AND SAMPLING SPIGOTS MUST BE EXPOSED AND MADE ACCESSIBLE TO THE OCHD.

THE RESULTS OF THE REQUESTED WATER SAMPLES ARE NOT INTENDED FOR USE IN PROPERTY TRANSACTIONS, LOAN
APPROVALS, OFFERS TO PURCHASE, OR REAL ESTATE CONTRACTS.

THE WELL SHOULD NOT BE CHLORINATED PRIOR TO SAMPLING UNLESS INSTRUCTED BY THE OCHD.

I HEREBY AUTHORIZE THE OCHD TO ENTER THE PROPERTY AND PERFORM THE SERVICE REQUESTED.

OWNER / TENANT: Ricka Samulski

DATE: Sept 25, 2006

RETURN WITH PAYMENT TO: ORANGE COUNTY HEALTH DEPARTMENT, ENVIRONMENTAL HEALTH DIVISION

P.O. BOX 8181, 306-C REVERE RD., HILLSBOROUGH, NC 27278

Sampled by: BLT
Date: 9-26-06
Protected? Y N

Mailed
10-18-06

[illegible]

North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28407 - 306 N. Wilmington St. - Raleigh, N. C. 27611-8047

RECEIVED OCT 3 2006

COLIFORM ANALYSIS - PRIVATE WATER SUPPLY

Name of Owner or Tenant: Samulski, Ricka County: Orange
Address: 801 Creekstone Dr. Chapel Hill, NC ZIP:
Source: Well Type of Sampling Point: Kitchen tap
Collected By: BLH Date: 9/26/2006 Time: 1:37 PM
Signed By: Hawksworth, BL Analysis Type: Private

Report To: Orange Co. Environ. Health
Post Office Box 8181
Hillsborough, NC 27278

(919) 732-8181

BACTERIOLOGIC ANALYSIS

CONTAMINANTS

RESULT

Total Coliform (ColilertRoutine)

Absent

Sample No: AA97194

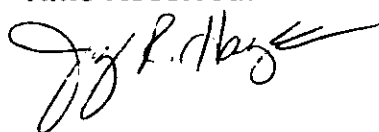
Date Received: 9/27/2006

Time Received: 8:15:00 AM

Date Reported: 9/28/2006

Today's Date: 9/28/2006

Comments:



Orange Co. Environ. Health
ATTN: Hawksworth, BL
Post Office Box 8181
Hillsborough, NC 27278

Courier 17-50-13

These results are not intended for
use in property transactions, loan
approvals, offers to purchase, nor
real estate contracts.

Explanations

Coliform Analysis:

If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes. Presence of E. coli (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

Inorganic Analysis:

Recommended limits for drinking water. Sample should not exceed levels listed below.

Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.01 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28047 -- 306 N. Wilmington St. -- Raleigh, N. C. 27611-8047

INORGANIC CHEMICAL ANALYSIS - PRIVATE WATER SYSTEM

Name of System: Samulski, Ricka 7.110..27**Source of Water:** Well**Address:** 801 Creekstone Dr
Chapel Hill, NC**Zip:** 27516**Source of Sample:****Type of Sample:** Raw**County:** ORANGE**Type of Treatment:****Report To:** Orange Co. Envr. Health
Post Office Box 8181
Hillsborough, NC 27278
Courier: 17-50-13**ATTN:**
(919) 732-8181**Type of Analysis:** Private**Collected By:** B. HAWKSWORTH**Date:** 9/26/2006**Time:** 1:30:00 PM**Location of sampling point:** outside hose bib**Remarks:**

Parameters	Results	Units	Date Analyzed:
Alkalinity as CaCO ₃	88	mg/l	9/27/2006
Arsenic	<0.001	mg/l	9/27/2006
Calcium	<0.5	mg/l	9/27/2006
Chloride IC	<5.0	mg/l	9/27/2006
Copper	<0.05	mg/l	9/27/2006
Fluoride	<0.20	mg/l	9/27/2006
Iron	<0.05	mg/l	9/27/2006
Hardness as CaCO ₃ (Ca,Mg)	<2	mg/l	9/27/2006
Magnesium	<0.10	mg/l	9/27/2006
Manganese	<0.03	mg/l	9/27/2006
Lead	<0.005	mg/l	9/27/2006
pH	7.8	Std. unit	9/27/2006
Zinc	<0.05	mg/l	9/27/2006

These results are not intended for
use in property transactions, loan
approvals, offers to purchase, nor
real estate contracts.

If you have any questions
about these results, you may
call Orange County Environmental
Health at 732-8181 ext. 2360

Date Received: 9/27/2006**Report Date:** 10/11/2006**Reported By:****Today's Date:** 10/12/2006**Ref:** 12686**Login Batch:** 06090059**Sample Number:** AB47690

Explanations

Coliform Analysis:

If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes. Presence of E. coli (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

Inorganic Analysis:

Recommended limits for drinking water. Sample should not exceed levels listed below.

Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.01 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28047 - 306 N. Wilmington St. - Raleigh, N. C. 27611-8047

INORGANIC CHEMICAL ANALYSIS - PRIVATE WATER SYSTEM

Name of System: Samulski, Ricka**Source of Water:** Well**Address:** 801 Creekstone Dr
Chapel Hill, NC**Zip:** 27516**Source of Sample:****Type of Sample:** Treated**County:** ORANGE**Type of Treatment:** Softener**Report To:** Orange Co. Envr. Health
Post Office Box 8181
Hillsborough, NC 27278
Courier: 17-50-13**ATTN:**
(919) 732-8181**Type of Analysis:** Private**Collected By:** B. HAWKSWORTH**Date:** 9/26/2006**Time:** 1:35:00 PM**Location of sampling point:** Kitchen Tap**Remarks:**

Parameters	Results	Units	Date Analyzed:
Alkalinity as CaCO ₃	88	mg/l	9/27/2006
Arsenic	<0.001	mg/l	9/27/2006
Calcium	<0.5	mg/l	9/27/2006
Chloride IC	<5.0	mg/l	9/27/2006
Copper	<0.05	mg/l	9/27/2006
Fluoride	<0.20	mg/l	9/27/2006
Iron	<0.05	mg/l	9/27/2006
Hardness as CaCO ₃ (Ca,Mg)	<2	mg/l	9/27/2006
Magnesium	<0.10	mg/l	9/27/2006
Manganese	<0.03	mg/l	9/27/2006
Lead	<0.005	mg/l	9/27/2006
pH	8.2	Std. unit	9/27/2006
Zinc	<0.05	mg/l	9/27/2006

These results are not intended for
use in property transactions, loan
approvals, offers to purchase, nor
real estate contracts.

If you have any questions
about these results, you may
call Orange County Environmental
at 732-8181 ext. 2360

Date Received: 9/27/2006**Report Date:** 10/11/2006**Reported By:****Today's Date:** 10/12/2006**Ref:** 12687**Login Batch:** 06090059**Sample Number:** AB47691

Explanations

Coliform Analysis:

If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes. Presence of E. coli (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

Inorganic Analysis:

Recommended limits for drinking water. Sample should not exceed levels listed below.

Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.01 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

**North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28047 -- 306 N. Wilmington St. -- Raleigh, N. C. 27611-8047**

INORGANIC CHEMICAL ANALYSIS - PRIVATE WATER SYSTEM

Name of System: Samulski, Ricka 7.110.27

Address: 801 Creekstone Dr
Chapel Hill, NC

Zip: 27516

County: ORANGE

Report To: Orange Co. Envr. Health
Post Office Box 8181
Hillsborough, NC 27278
Courier: 17-50-13

ATTN:
(919) 732-8181

Source of Water: Well

Source of Sample:

Type of Sample: Treated

Type of Treatment: Soft., R/O Unit

Type of Analysis: Private

Collected By: B. HAWKSWORTH

Date: 9/26/2006

Time: 1:41:00 PM

Location of sampling point: R/O Unit

Remarks:

Parameters	Results	Units	Date Analyzed:
Alkalinity as CaCO ₃	8	mg/l	9/27/2006
Arsenic	<0.001	mg/l	9/27/2006
Calcium	<0.5	mg/l	9/27/2006
Chloride IC	<5.0	mg/l	9/27/2006
Copper	<0.05	mg/l	9/27/2006
Fluoride	<0.20	mg/l	9/27/2006
Iron	<0.05	mg/l	9/27/2006
Hardness as CaCO ₃ (Ca,Mg)	<2	mg/l	9/27/2006
Magnesium	<0.10	mg/l	9/27/2006
Manganese	<0.03	mg/l	9/27/2006
Lead	<0.005	mg/l	9/27/2006
pH	6.6	Std. unit	9/27/2006
Zinc	<0.05	mg/l	9/27/2006

These results are not intended for use in property transactions, loans, approvals, offers to purchase, or real estate contracts.

If you have any questions about these results, you may call Orange County Environmental Health at 732-8181 ext. 2360

Date Received: 9/27/2006

Report Date: 10/11/2006

Reported By: *Deborah Moore*

Today's Date: 10/12/2006

Ref: 12690

Login Batch: 06090059

Sample Number: AB47694

Explanations

Coliform Analysis:

If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes. Presence of E. coli (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

Inorganic Analysis:

Recommended limits for drinking water. Sample should not exceed levels listed below.

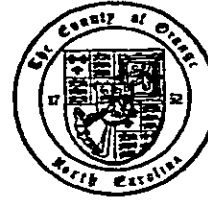
Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.01 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

APPLICATION FOR WATER SAMPLES PRIVATE WATER SUPPLIES

PHONE: 919-245-2360

FAX 919-644-3006

Orange County Health Department
Environmental Health Division
P.O. Box 8181, 306-C Revere Road
Hillsborough, NC 27278



R03-002045
WS03-00295

DATE RECEIVED 6-12-03 PIN #

TMBL 7.110..27

APPLICATION

APPLICANT: Ricka Samulski PROPERTY OWNER: Thaddeus + Ricka Samulski
ADDRESS 801 Creekstone DR. ADDRESS 801 Creekstone DR.
Chapel Hill, NC 27516 Chapel Hill, NC 27516
PHONE NUMBER 929-6463 PHONE NUMBER 929-6463

SUBDIVISION / LOT# DIRECTIONS / LOCATION OLD 86 So. Turn right onto
Dairyland Rd. (BP Gas) Take left onto Laurel Springs DR.
Take immediate right onto Creekstone DR. Follow driveway to house white mailbox on right

WELL INFORMATION (IF KNOWN):

DATE DRILLED _____ DEPTH _____ GALLONS PER MINUTE _____
CASING DEPTH _____ DRILLER _____
HAS THIS WELL BEEN SAMPLED BY OCHD BEFORE? ☐ N ☐ Y GIVE DATE AND RESULTS _____
WHEN WAS THE WELL LAST CHLORINATED? _____
DESCRIBE ANY CURRENT PROBLEMS WITH YOUR WATER. _____
IS THERE A TREATMENT SYSTEM? ☐ N ☐ Y WHAT TYPE? _____

TYPE OF SAMPLE REQUESTED:

PAYMENT MUST BE INCLUDED WITH THIS APPLICATION TO COMPLETE THE SERVICES.

<input checked="" type="checkbox"/> BACTERIOLOGIC SAMPLE	\$15.00	<input checked="" type="checkbox"/> NITRATE/NITRITE SAMPLE	\$25.00
<input checked="" type="checkbox"/> INORGANIC CHEMICAL SAMPLE (INCLUDES IRON, HARDNESS, pH, FLUORIDE and OTHER MINERALS)			\$25.00
<input type="checkbox"/> VOC (PETROLEUM) SAMPLE	\$50.00	<input checked="" type="checkbox"/> PESTICIDE SAMPLE	\$50.00

OTHER INFORMATION:

WATER SAMPLES MUST BE REQUESTED BY THE OWNER OR TENANT OF THE PROPERTY.

THE SIGNATURE OF THE OWNER OR TENANT IS REQUIRED ON THIS FORM AUTHORIZING THE OCHD TO ENTER THE PROPERTY.

THE WELL HEAD AND SAMPLING SPIGOTS MUST BE EXPOSED AND MADE ACCESSIBLE TO THE OCHD.

THE RESULTS OF THE REQUESTED WATER SAMPLES ARE NOT INTENDED FOR USE IN PROPERTY TRANSACTIONS, LOAN APPROVALS, OFFERS TO PURCHASE, NOR REAL ESTATE CONTRACTS.

THE WELL SHOULD NOT BE CHLORINATED PRIOR TO SAMPLING UNLESS INSTRUCTED BY THE OCHD.
WHEN WAS THE WELL LAST CHLORINATED? never

I HEREBY AUTHORIZE THE OCHD TO ENTER THE PROPERTY AND PERFORM THE SERVICE REQUESTED.

OWNER/TENANT: Ricka Samulski

DATE: June 12, 2003

RETURN WITH PAYMENT TO: ORANGE COUNTY HEALTH DEPARTMENT, ENVIRONMENTAL HEALTH DIVISION
P.O. BOX 8181, 306-C REVERE RD., HILLSBOROUGH, NC 27278

Sampled by: Ben
Date: 6-25-03
Protected? Y N

mailed 7-23-03
11 8-5-03

Pesticide
7-21-03 Ben

North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28407 - 306 N. Wilmington St. - Raleigh, N. C. 27611-8047

COLIFORM ANALYSIS - PRIVATE WATER SUPPLY

Name of Owner or Tenant: Samulski, Ricka County: Orange
Address: 801 Creekstone Dr Chapel Hill ZIP: 27516
Source: Well Type of Sampling Point: Kitchen tap
Collected By: BLH Date: 6/25/2003 Time: 1:30 PM
Signed By: Hawsworn, BL Analysis Type: Private
Report To: Orange Co. Environ. Health
Post Office Box 8181
Hillsborough, NC 27278 (919) 732-8181

BACTERIOLOGIC ANALYSIS

CONTAMINANTS	RESULT
Total Coliform (ColilertRoutine)	Absent

Sample No: AA70973 Date Received: 6/26/2003 Time Received: 9:15:00 AM
Date Reported: 6/27/2003 Today's Date: 6/27/2003
Comments:

Orange Co. Environ. Health
ATTN: Hawsworn, BL
Post Office Box 8181
Hillsborough, NC 27278

Courier 17-50-13

These results are not intended for use in property transactions, loan approvals, offers to purchase, nor real estate contracts.

Explanations

Coliform Analysis:

If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes. Presence of *E. coli* (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

Inorganic Analysis:

Recommended limits for drinking water. Sample should not exceed levels listed below.

Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.01 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

RECEIVED JUL 16 2003

**North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28047 -- 306 N. Wilmington St. -- Raleigh, N. C. 27611-8047**

INORGANIC CHEMICAL ANALYSIS - NITRATE ONLY

Name of System: Samulski, Ricka

Source of Water: Ground

Address: 801 Creekstone Dr.
Chapel Hill, NC

Zip: 27516

Source of Sample:

County: ORANGE

Type of Sample: Raw

Report To: Orange Co. Envr. Health
Post Office Box 8181
Hillsborough, NC 27278
Courier: 17-50-13

ATTN:
(919) 732-8181

Type of Treatment: None

Type of Analysis: Nitrate

Category: Other

Collected By: B HAWKSWORTH

Date: 6/25/03

Time: 1:30:00 PM

Location of sampling point: Kitchen Tap

Remarks:

Parameters	Results	Units	Date Analyzed:
Nitrite as N	<0.10	mg/l	6/26/03
Nitrate as N	<1.0	mg/l	6/26/03

If you have any questions
about these results, you may
call Orange County Environmental
Health at 732-8181 ext. 2360

EXPLANATION OF RESULTS:

Foster/Therapeutic Homes: Nitrate-N level acceptable if less than or equal to 10 mg/l
Private Well Guidelines: Nitrite-N level should be ≤ 1.0 mg/l and Nitrate-N ≤ 10.0 mg/l

Sample Temperature on Receipt: 6.5 °C

Date Received: 6/26/03

Report Date: 7/10/03

Reported By: *D. W. W. W.*

Today's Date: 7/10/03

Reference: 8748

Login Batch: 0306006

Sample Number: AA96214

Explanations

Coliform Analysis:

If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes. Presence of *E. coli* (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

Inorganic Analysis:

Recommended limits for drinking water. Sample should not exceed levels listed below.

Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.01 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

INORGANIC CHEMICAL ANALYSIS - PRIVATE WATER SYSTEM

Name of System: Samulski, Ricka

Source of Water: Ground

Address: 801 Creekstone Dr.
Chapel Hill, NC

Zip: 27516

Source of Sample:

Type of Sample: Raw

County: ORANGE

Type of Treatment: None

Report To: Orange Co. Envr. Health
Post Office Box 8181
Hillsborough, NC 27278
Courier: 17-50-13

ATTN:
(919) 732-8181

Type of Analysis: Private

Collected By: B HAWKSWORTH

Date: 6/25/03

Time: 1:30:00 PM

Location of sampling point: Kitchen Tap

Remarks:

Parameters	Results	Units	Date Analyzed:
Alkalinity as CaCO ₃	80	mg/l	6/26/03
Arsenic	0.001	mg/l	6/26/03
Calcium	36.0	mg/l	6/26/03
Chloride	<5.0	mg/l	6/26/03
Copper	<0.05	mg/l	6/26/03
Fluoride	<0.20	mg/l	6/26/03
Iron	<0.05	mg/l	6/26/03
Hardness as CaCO ₃ (Ca,Mg)	99	mg/l	6/26/03
Magnesium	2.1	mg/l	6/26/03
Manganese	0.29	mg/l	6/26/03
Lead	<0.005	mg/l	6/26/03
pH	7.5	Std. unit	6/26/03
Zinc	<0.05	mg/l	6/26/03

If you have any questions
about these results, you may
call Orange County Environmental
Health at 732-8181 ext. 2360

Date Received: 6/26/03

Report Date: 7/10/03

Reported By: *D. Moncol*

Today's Date: 7/10/03

Ref: 8736

Login Batch: 03060061

Sample Number: AA96202

Explanations

Coliform Analysis:

If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes. Presence of *E. coli* (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

Inorganic Analysis:

Recommended limits for drinking water. Sample should not exceed levels listed below.

Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.01 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

RECEIVED AUG 4 2003

North Carolina State Laboratory of Public Health
N.C. Department of Health and Human Services
P.O. Box 28047 - 306 N. Wilmington St. - Raleigh, NC 27611-8047

Pesticide Analysis Report

Name: Ricka Samulski
Address: 801 Creekstone Dr.
Chapel Hill, N C

Zip: 27516

Telephone:

County: Orange

Report To: B L Hawksworth

Address: Orange Co. Envr. Health
Post Office Box 8181
Hillsborough, NC 27278

Collected By: B L HAWKSWORTH

Telephone: (919) 732-8181

Date Collected: 7/21/2003

Analysis Desired: PESTICIDE

Courier: 17-50-13

Analysis Method: NC Method 508.
Liquid-Liquid Extraction, Gas
Chromatography, Electron Capture
Detector.
1998

Analyte	Minimum Detection Limit		Results	
Alachlor	<0.0001	mg/l	None Detected	mg/l
Bifenthrin	<0.0010	mg/l	None Detected	mg/l
Chlordane	<0.0002	mg/l	None Detected	mg/l
Chlorpyrifos	<0.0001	mg/l	None Detected	mg/l
Cypermethrin	<0.0010	mg/l	None Detected	mg/l
Diazinon	<0.0001	mg/l	None Detected	mg/l
Dieldrin	<0.0001	mg/l	None Detected	mg/l
Endrin	<0.0001	mg/l	None Detected	mg/l
Fenvalerate	<0.0010	mg/l	None Detected	mg/l
Heptachlor	<0.0001	mg/l	None Detected	mg/l
Heptachlor Epoxide	<0.0001	mg/l	None Detected	mg/l
Lindane	<0.0002	mg/l	None Detected	mg/l
Methoxychlor	<0.0010	mg/l	None Detected	mg/l
Permethrin	<0.0010	mg/l	None Detected	mg/l
Toxaphene	<0.0020	mg/l	None Detected	mg/l

Comments:

If you have any questions
about these results, you may
call Orange County Environmental
Health at 732-8181 ext. 2360

Date Received: 7/22/2003

Laboratory No. AA27787

Date Completed: 7/28/2003

Reference #: 032933

Date Reported: JUL 28 2003

Login Batch: 03070104

Reported By:

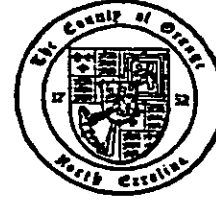
John L. Neal, Supervisor
Environmental Organic Chemistry

APPLICATION FOR WATER SAMPLES PRIVATE WATER SUPPLIES

PHONE: 919-245-2360

FAX 919-644-3006

Orange County Health Department
Environmental Health Division
P.O. Box 8181, 306-C Revere Road
Hillsborough, NC 27278



DATE RECEIVED

PIN #

TMBL

7.110.27

APPLICATION

APPLICANT: Ricka Samulski
ADDRESS: 801 Creekstone Dr.
Chapel Hill NC 27516
PHONE NUMBER: 929 6463

PROPERTY OWNER: Ricka Samulski
ADDRESS: 801 Creekstone Dr.
Chapel Hill NC 27516
PHONE NUMBER: 929 6463

SUBDIVISION / LOT# Durham Estates Lot # DIRECTIONS / LOCATION 86 So. left on Dairyland & left on Laurel Springs
right on Creekstone Dr; 3rd mailbox (white) on right follow drive way

WELL INFORMATION (IF KNOWN):

DATE DRILLED _____ DEPTH _____ GALLONS PER MINUTE _____

CASING DEPTH _____ DRILLER _____

HAS THIS WELL BEEN SAMPLED BY OCHD BEFORE? ☐ NO ☐ YES GIVE DATE AND RESULTS _____

WHEN WAS THE WELL LAST CHLORINATED? _____

DESCRIBE ANY CURRENT PROBLEMS WITH YOUR WATER. _____

IS THERE A TREATMENT SYSTEM? ☒ YES ☐ NO WHAT TYPE? _____

TYPE OF SAMPLE REQUESTED:

PAYMENT MUST BE INCLUDED WITH THIS APPLICATION TO COMPLETE THE SERVICES.

- ☒ BACTERIOLOGIC SAMPLE \$15.00 ☐ NITRATE/NITRITE SAMPLE \$25.00
☒ INORGANIC CHEMICAL SAMPLE (INCLUDES IRON, HARDNESS, pH, FLUORIDE and OTHER MINERALS) \$25.00
☐ VOC (PETROLEUM) SAMPLE \$50.00 ☐ PESTICIDE SAMPLE \$50.00

OTHER INFORMATION:

WATER SAMPLES MUST BE REQUESTED BY THE OWNER OR TENANT OF THE PROPERTY.

THE SIGNATURE OF THE OWNER OR TENANT IS REQUIRED ON THIS FORM AUTHORIZING THE OCHD TO ENTER THE PROPERTY.

THE WELL HEAD AND SAMPLING SPIGOTS MUST BE EXPOSED AND MADE ACCESSIBLE TO THE OCHD.

THE RESULTS OF THE REQUESTED WATER SAMPLES ARE NOT INTENDED FOR USE IN PROPERTY TRANSACTIONS, LOAN APPROVALS, OFFERS TO PURCHASE, NOR REAL ESTATE CONTRACTS.

THE WELL SHOULD NOT BE CHLORINATED PRIOR TO SAMPLING UNLESS INSTRUCTED BY THE OCHD.

WHEN WAS THE WELL LAST CHLORINATED? Never

I HEREBY AUTHORIZE THE OCHD TO ENTER THE PROPERTY AND PERFORM THE SERVICE REQUESTED.

OWNER/TENANT: Ricka Samulski

DATE: July 30, 2002

RETURN WITH PAYMENT TO: ORANGE COUNTY HEALTH DEPARTMENT, ENVIRONMENTAL HEALTH DIVISION

P.O. BOX 8181, 306-C REVERE RD., HILLSBOROUGH, NC 27278

Sampled by: Ben
Date: 7-31-02
Protected? Y N

mailed 8-26-02

Resample 8-8-02 Ben

RECEIVED AUG - 7 2002

North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28407 - 306 N. Wilmington St. - Raleigh, N. C. 27611-8047

COLIFORM ANALYSIS - PRIVATE WATER SUPPLY

Name of Owner or Tenant: Samulski, Ricka **County:** Orange
Address: 801 Creekstone Dr. Chapel Hill, NC **ZIP:** 27516
Source: Well **Type of Sampling Point:** Outside tap
Collected By: BH **Date:** 7/31/2002 **Time:** 3:25 PM
Signed By: Hawksworth, B. L. **Analysis Type:** Private

Report To: Orange Co. Environ. Health
Post Office Box 8181
Hillsborough, NC 27278 (919) 732-8181

BACTERIOLOGIC ANALYSIS

<u>CONTAMINANTS</u>	<u>RESULT</u>
Total Coliform (ColilertRoutine)	Too Old

Sample No: AA63272 **Date Received:** 8/2/2002 **Time Received:** 9:30:00 AM
Date Reported: 8/5/2002 **Today's Date:** 8/5/2002
Comments:

Orange Co. Environ. Health
ATTN: Hawksworth, B. L.
Post Office Box 8181
Hillsborough, NC 27278

Courier 17-50-13

These results are not intended for use in property transactions, loan approvals, offers to purchase, nor real estate contracts.

Explanations

Coliform Analysis:

If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes. Presence of *E. coli* (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

Inorganic Analysis:

Recommended limits for drinking water. Sample should not exceed levels listed below:

Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.05 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

RECEIVED AUG 19 2002

North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28407 - 306 N. Wilmington St. - Raleigh, N. C. 27611-8047

COLIFORM ANALYSIS - PRIVATE WATER SUPPLY

Name of Owner or Tenant: Samulski, Ricka County: Orange
Address: 801 Creekskone Dr. Chapel Hill, NC ZIP: 27516
Source: Well Type of Sampling Point: Outside tap
Collected By: BH Date: 8/8/02 Time: 2:20 PM
Signed By: Hawksworth, B. L. Analysis Type: Private

Report To: Orange Co. Environ. Health

Post Office Box 8181

Hillsborough, NC 27278

(919) 732-8181

BACTERIOLOGIC ANALYSIS

CONTAMINANTS

RESULT

Total Coliform (ColilertRoutine)

Absent

Sample No: AA63400

Date Received: 8/9/02

Time Received: 9:30:00 AM

Date Reported: 8/12/02

Today's Date: 8/12/02

Comments:

Orange Co. Environ. Health

ATTN: Hawksworth, B. L.

Post Office Box 8181

Hillsborough, NC 27278

Courier 17-50-13

These results are not intended for use in property transactions, loan approvals, offers to purchase, nor real estate contracts.

Explanations

Coliform Analysis:

If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes. Presence of *E. coli* (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

Inorganic Analysis:

Recommended limits for drinking water. Sample should not exceed levels listed below:

Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.05 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28047 -- 306 N. Wilmington St. -- Raleigh, N. C. 27611-8047

INORGANIC CHEMICAL ANALYSIS - PRIVATE WATER SYSTEM

Name of System: Samulski, Ricka**Source of Water:** Ground**Address:** 801 Creekstone Dr.
Chapel Hill, NC**Zip:** 27516**Source of Sample:****Type of Sample:** Raw**County:** ORANGE**Type of Treatment:** None**Report To:** Orange Co. Envr. Health
Post Office Box 8181
Hillsborough, NC 27278
Courier: 17-50-13**ATTN:**
(919) 732-8181**Type of Analysis:** Private**Collected By:** HAWKSWORTH**Date:** 7/31/02**Time:** 3:25:00 PM**Location of sampling point:** Outside Tap**Remarks:**

Parameters	Results	Units	Date Analyzed:
Alkalinity as CaCO ₃	80	mg/l	8/1/02
Arsenic	0.002	mg/l	8/1/02
Calcium	36.2	mg/l	8/1/02
Chloride	<5	mg/l	8/1/02
Copper	<0.05	mg/l	8/1/02
Fluoride	<0.20	mg/l	8/1/02
Iron	<0.05	mg/l	8/1/02
Hardness as CaCO ₃ (Ca,Mg)	99	mg/l	8/1/02
Magnesium	2.1	mg/l	8/1/02
Manganese	0.49	mg/l	8/1/02
Lead	<0.005	mg/l	8/1/02
pH	7.5	Std. unit	8/1/02
Zinc	<0.05	mg/l	8/1/02

If you have any questions
about these results, you may
call Orange County Environmental
Health at 732-8181 ext. 2360

Date Received: 8/1/02**Report Date:** 8/9/02**Reported By:** **Today's Date:** 8/12/02**Ref:** 10471**Login Batch:** 08011530**Sample Number:** AA80375

Explanations

Coliform Analysis:

If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes. Presence of *E. coli* (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

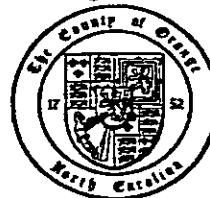
Inorganic Analysis:

Recommended limits for drinking water. Sample should not exceed levels listed below:

Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.05 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

APPLICATION FOR WATER SAMPLES PRIVATE WATER SUPPLIES

Orange County Health Department
Environmental Health Division
P.O. Box 8181, 306-C Revere Road
Hillsborough, NC 27278



PHONE: 732-8181
967-9251
688-7331
227-2031
FAX 644-3006

EXTENSION 2360

PIN #

TMBL

7-110-27

APPLICATION

APPLICANT: Rick Samulski PROPERTY OWNER: Rick & Thaddeus Samulski
ADDRESS 801 Creekstone Dr ADDRESS 801 Creekstone Dr
Chapel Hill NC 27514 Chapel Hill NC 27514
PHONE NUMBER 929 6463 SUBDIVISION / LOT# Durham Estates
DIRECTIONS / LOCATION 86 So. ^{old} Wright on Danyland Rd, left on Laurel Springs Dr.
Right on Creekstone, 3rd mailbox on right, follow driveway to house

WELL INFORMATION:

DATE DRILLED _____ DEPTH _____ GALLONS PER MINUTE _____
CASING DEPTH _____ DRILLER _____
HAS THIS WELL BEEN SAMPLED BY OCHD BEFORE? N ☐ Y ☐ GIVE DATE AND RESULTS _____
DESCRIBE ANY CURRENT PROBLEMS WITH YOUR WATER. _____
IS THERE A TREATMENT SYSTEM? N ☐ Y ☐ WHAT TYPE? _____
IS THERE A SPIGOT NOT CONNECTED TO THE TREATMENT SYSTEM? IF SO, WHERE? _____

TYPE OF SAMPLE REQUESTED:

PAYMENT MUST BE INCLUDED WITH THIS APPLICATION TO COMPLETE THE SERVICES.

<input checked="" type="checkbox"/> BACTERIOLOGIC SAMPLE	\$10.00
<input checked="" type="checkbox"/> INORGANIC CHEMICAL SAMPLE (INCLUDES FLUORIDE)	\$15.00
<input type="checkbox"/> OTHER \$ _____	<input type="checkbox"/> RESAMPLE \$10.00

OTHER INFORMATION:

WATER SAMPLES MUST BE REQUESTED BY THE OWNER OR TENANT OF THE PROPERTY.

THE SIGNATURE OF THE OWNER OR TENANT IS REQUIRED ON THIS FORM AUTHORIZING THE OCHD TO ENTER THE PROPERTY.

THE WELL HEAD AND SAMPLING SPIGOTS MUST BE EXPOSED AND MADE ACCESSIBLE TO THE OCHD.

THE RESULTS OF THE REQUESTED WATER SAMPLES ARE NOT INTENDED FOR USE IN PROPERTY TRANSACTIONS, LOAN APPROVALS, OFFERS TO PURCHASE, NOR REAL ESTATE CONTRACTS.

THE WELL SHOULD NOT BE CHLORINATED PRIOR TO SAMPLING UNLESS INSTRUCTED BY THE OCHD.
WHEN WAS THE WELL LAST CHLORINATED? Never

I HEREBY AUTHORIZE THE OCHD TO ENTER THE PROPERTY AND PERFORM THE SERVICE REQUESTED.

OWNER/TENANT: Rick Samulski

DATE: _____

RETURN WITH PAYMENT TO: ORANGE COUNTY HEALTH DEPARTMENT, ENVIRONMENTAL HEALTH DIVISION
P.O. BOX 8181, 306-C REVERE RD., HILLSBOROUGH, NC 27278

Sampled by: lh
Date: 6/5/00
Protected? ☒ Y ☐ N

spigot on front side (right)

North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28407 - 306 N. Wilmington St. - Raleigh, N. C. 27611-8047

COLIFORM ANALYSIS - PRIVATE WATER SUPPLY

Name of Owner or Tenant: Samulski, Ricka County: Orange
Address: 801 Creekstone Dr. Chapel Hill, NC ZIP: 27516
Source: Well Type of Sampling Point: Outside spigot
Collected By: LH Date: 6/5/00 Time: 11:15 AM
Signed By: Hung, Louella Analysis Type: Private

Report To: Orange Co. Environ. Health
Post Office Box 8181
Hillsborough, NC 27278 (919) 732-8181

BACTERIOLOGIC ANALYSIS

<u>CONTAMINANTS</u>	<u>RESULT</u>
Total Coliform (ColilertRoutine)	Absent

Sample No: AA40913 Date Received: 6/6/00 Time Received: 8:30:00 AM
Date Reported: 6/7/00 Today's Date: 6/7/00
Comments: TMBL 7.1101..27

Orange Co. Environ. Health
ATTN: Hung, Louella
Post Office Box 8181
Hillsborough, NC 27278

Courier 17-50-13

These results are not intended for
use in property transactions, loan
approvals, offers to purchase, nor
real estate contracts.

Explanations

Coliform Analysis:

If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes. Presence of *E. coli* (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

Inorganic Analysis:

Recommended limits for drinking water. Sample should not exceed levels listed below:

Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.05 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

RECEIVED JUN 13 2000

North Carolina State Laboratory of Public Health
Department of Health and Human Services
P. O. Box 28047 -- 306 N. Wilmington St. -- Raleigh, N. C. 27611-8047

INORGANIC CHEMICAL ANALYSIS - PRIVATE WATER SYSTEM

Name of System: Samulski, Ricka

Address: 801 Creekstone Dr.
Chapel Hill, NC

Zip: 27516

Source of Water: ground

Source of Sample:

Type of Sample: raw

Type of Treatment: none

County: ORANGE

Report To: Orange Co. Env. Health
Post Office Box 8181
Hillsborough, NC 27278
Courier: 17-50-13

ATTN:
(919) 732-8181

Type of Analysis PRIVATE

Collected By: L. HUNG

Date: 06/05/2000

Time: 11:15:00 AM

Location of sampling point: front spigot

Remarks: TMBL 7.110..27

Parameters	Results	Units	Date Analyzed:
Alkalinity as CaCO ₃	76	mg/l	06/06/2000
Arsenic	0.002	mg/l	06/06/2000
Calcium	31.8	mg/l	06/06/2000
Chloride	<5	mg/l	06/06/2000
Copper	<0.05	mg/l	06/06/2000
Fluoride	<0.10	mg/l	06/06/2000
Iron	<0.05	mg/l	06/06/2000
Hardness as CaCO ₃ (Ca,Mg)	88	mg/l	06/06/2000
Magnesium	2.0	mg/l	06/06/2000
Manganese	0.36	mg/l	06/06/2000
Lead	<0.005	mg/l	06/06/2000
pH	7.4	Std. unit	06/06/2000
Zinc	<0.05	mg/l	06/06/2000

If you have any questions
about these results, you may
call Orange County Environmental
Health at 732-8181 ext. 2360

Date Received: 06/06/2000

Report Date: 06/09/2000

Reported By: _____

Today's Date: 06/09/2000

Ref: 11075

Sample Number: AA39764

Explanations

Coliform Analysis:

If coliform bacteria are Absent, the water is considered safe for drinking purposes. If coliform bacteria are Present, the water is considered unsafe for drinking purposes. Presence of *E. coli* (bacteria) generally indicates that the water has been contaminated with fecal material. It must be remembered that a water analysis refers only to the sample received and should not be regarded as a complete report on the water supply.

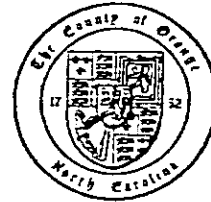
Inorganic Analysis:

Recommended limits for drinking water. Sample should not exceed levels listed below:

Alkalinity	No established limits	Iron	0.30 mg/l
Arsenic	0.05 mg/l	Lead	0.015 mg/l
Calcium	No established limits	Magnesium	No established limits
Chloride	250 mg/l	Manganese	0.05 mg/l
Copper	1.3 mg/l	Nitrate	10 mg/l (as N)
Fluoride	4 mg/l	Nitrite	1.0 mg/l (as N)
Hardness	No established limits	pH	Not less than 6.5 units
		Zinc	5.0 mg/l

APPLICATION FOR WATER SAMPLES PRIVATE WATER SUPPLIES

Orange County Health Department
Environmental Health Division
P.O. Box 8181, 306-C Revere Road
Hillsborough, NC 27278



PHONE: 732-8181
967-9251
688-7331
227-2031
FAX 644-3006

EXTENSION 2360

Call first - Dogs!

PROPERTY OWNER Ricka Samulski APPLICANT Ricka Samulski
MAILING ADDRESS 801 Creekstone Dr TAX MAP REFERENCE # 7.110.27
Chapel Hill NC 27516
DAYTIME PHONE 929-6463 DIRECTIONS / LOCATION 86 (old) to
Dairyland Rd. turn right; less than 1/2 mi take a left onto
Laurel Springs Dr.; take immediate right onto Creekstone;
3rd driveway on right side of Creekstone.

WELL INFORMATION:

DATE DRILLED 6/93 DEPTH _____ GALLONS PER MINUTE _____
CASING DEPTH _____ DRILLER _____

HAS THIS WELL BEEN SAMPLED BY OCHD BEFORE? ☒ YES ☐ NO GIVE DATE AND RESULTS _____
DESCRIBE ANY CURRENT PROBLEMS WITH YOUR WATER. Black stuff in toilet tank
IS THERE A TREATMENT SYSTEM? ☒ YES ☐ NO WHAT TYPE? _____
IS THERE A SPIGOT NOT CONNECTED TO THE TREATMENT SYSTEM? _____ IF SO, WHERE? _____

TYPE OF SAMPLE REQUESTED:

PAYMENT MUST BE INCLUDED WITH THIS APPLICATION TO COMPLETE THE SERVICES.

- ☒ BACTERIOLOGIC SAMPLE
☒ INORGANIC CHEMICAL SAMPLE (INCLUDES FLUORIDE)
☐ OTHER \$ _____

☐ RESAMPLE

\$10.00
\$10.00
\$10.00

pd 20.00

OTHER INFORMATION:

WATER SAMPLES MUST BE REQUESTED BY THE OWNER OR TENANT OF THE PROPERTY.
THE SIGNATURE OF THE OWNER OR TENANT IS REQUIRED ON THIS FORM AUTHORIZING THE OCHD TO ENTER THE PROPERTY.
THE WELL HEAD AND SAMPLING SPIGOTS MUST BE EXPOSED AND MADE ACCESSIBLE TO THE OCHD.
THE RESULTS OF THE REQUESTED WATER SAMPLES ARE NOT INTENDED FOR USE IN PROPERTY TRANSACTIONS, LOAN APPROVALS, OFFERS TO PURCHASE, NOR REAL ESTATE CONTRACTS.
THE WELL SHOULD NOT BE CHLORINATED PRIOR TO SAMPLING UNLESS INSTRUCTED BY THE OCHD.
WHEN WAS THE WELL LAST CHLORINATED? _____

I HEREBY AUTHORIZE THE OCHD TO ENTER THE PROPERTY AND PERFORM THE SERVICE REQUESTED.

OWNER: Ricka Samulski

DATE: Ricka Samulski

RETURN WITH PAYMENT TO: ORANGE COUNTY HEALTH DEPARTMENT, ENVIRONMENTAL HEALTH DIVISION
P.O. BOX 8181, 306-C REVERE RD., HILLSBOROUGH, NC 27278

Sampled by: [initials]
Date: 8/5/97

mailed 8-25-97

State Laboratory of Public Health — Division of Laboratory Services
N.C. Department of Environment, Health, and Natural Resources
P.O. Box 28047 — 306 N. Wilmington St. — Raleigh, N.C. 27611-8047

DRINKING WATER DESCRIPTION BLANK — FILLED IN BY SENDER
COLIFORM ANALYSIS — PRIVATE SUPPLY

Name of Owner or Tenant

Ricka Samulski

T.M. 7/10/97

801 Creekstone Dr

County Orange

Type of Sampling Point

Outside tap

Chapel Hill 27516

Collected By

Jan Jackson

DATE 8/15/97

TIME 11:15

☒ AM
☐ PM

Source:

☒ Well

☐ Spring

☐ Other: _____

Signed

By:

Name Jan Jackson

#12-50-13

Indicate: M.D. or Sanitarian

Address:

Orange County Health Dept

City Hillsborough

Zip _____

DEHNR 1294 (Revised 10/91)
Laboratory (Review 11/93)

ALL INFORMATION REQUESTED MUST BE GIVEN.

711789 16 AM 8:56

BACTERIOLOGIC ANALYSIS

CONTAMINANT	RESULT	
	PRESENT	ABSENT

TOTAL COLIFORM

☐

☒

FECAL/E. COLI

☐

☐

INVALID RESULTS

☐ CONFLUENT GROWTH

☐ TOO NUMEROUS TO COUNT

☐ EXCESSIVE TURBIDITY

☐ OVER 48 HOURS OLD

☐ NO COLLECTION DATE

☐ OTHER

RECEIVED AUG 20 1997

These results are not intended for
use in property transactions, loan
approvals, offers to purchase, nor
real estate contracts.

REPORTED

AUG 18 1997

Do not write on this side of form.

STATE LABORATORY OF PUBLIC HEALTH
DIVISION OF LABORATORY SERVICES
N.C. DEPARTMENT OF ENVIRONMENT, HEALTH AND NATURAL RESOURCES
306 N. WILMINGTON ST. — P.O. Box 28047, RALEIGH, 27611-8047

If you have any questions
about these results, you may
call Orange County Environmental
Health at 732-8181 ext. 2360

INORGANIC CHEMICAL ANALYSES-PRIVATE WATER SYSTEM

RECEIVED AUG 25 1997

Complete All Items Above Heavy Line
(See Instructions on Reverse Side)

T.M. 7.110.27

AUG 27 1997

Name of System Ricka Samulski

Address 801 Creekstone Dr
Chapel Hill ZIP 27516

County Orange

Report To: Jan Jackson

Address: Orange County Health Dept
ZIP _____

Collected By: Jan Jackson

Date Collected: 8/15/97 Time: 11:13 AM

Location of Sampling Point: Outside tap

Source of Water:
☒ Ground ☐ Both
☐ Surface ☒ Purchased

Source of Sample:
☒ House Tap
☐ Well Tap

Type of Sample:
☒ Raw ☐ Treated

Type of Treatment:
☒ None ☐ Lime
☐ Chlorinated ☐ Soda Ash
☐ Fluoridated ☐ Polyphosphate
☒ Filtered ☐ Water Softener
☐ Alum ☐ Other

Type of Analysis Desired:
☒ Regular Parameters ☐ Both
☐ Optional Parameters

Remarks: #17-50-13

Regular Parameters			Optional Parameters (List as needed — See SCOPE)		
	Results			Results	
pH	<u>7.1</u>	units			
Arsenic	<u><0.01</u>	mg/l			
Lead	<u><0.005</u>	mg/l			
Iron	<u>0.14</u>	mg/l			
Manganese	<u>0.50</u>	mg/l			
Copper	<u>0.07</u>	mg/l			
Zinc	<u><0.05</u>	mg/l			
Calcium	<u>32.7</u>	mg/l			
Magnesium	<u>1.8</u>	mg/l			
Hardness-CaCO ₃ (Ca, Mg)	<u>89</u>	mg/l			
Alkalinity-CaCO ₃	<u>82</u>	mg/l			
Chloride	<u><5</u>	mg/l			
Fluoride	<u><0.10</u>	mg/l			

Date Received _____ Date Reported 8/21/97 Reported By _____

Date Analyzed _____ Laboratory Number _____

ALL-76 AUG 1997

INSTRUCTIONS

Using typewriter or ball point pen, fill in all requested information on the top portion of form front. Please print legibly if typewriter is not available.

SAMPLE COLLECTION

- 1) Remove the one 1-quart plastic container and inflate by mouth, if uninflated.
- 2) Let the water (to be sampled) run for 5 minutes to assure that the water is from the distribution system.
- 3) Rinse the plastic container two or three times, and discard the water.
- 4) After rinsing, fill the container to within approximately one inch of top of the sampling container. Then cap the container securely.

SAMPLE SHIPMENT:

- 1) After collection of the sample, place the one 1-quart sample into the cardboard box along with the report form, then seal.
- 2) Mail immediately to the State Laboratory using the supplied label.

RECOMMENDED LIMITS FOR DRINKING WATER ARE LISTED BELOW:

ph	Not less than 6.5 units	Calcium	No established limits
Alkalinity	No established limits	Magnesium	No established limits
Hardness	No established limits	Fluoride	4 mg/l
Iron	0.30 mg/l	Arsenic	0.05 mg/l
Manganese	0.05 mg/l	Lead	0.015 mg/l
Chloride	250 mg/l	Zinc	5.00 mg/l
		Copper	1.3 mg/l

FOR LABORATORY USE ONLY