112 © 12715 LEWIS BUSINESS FORMS, INC., JAX, FLA. 4 3 2 1

2. PRINT INFORMATION CLEARLY

BEAR DOWN—YOU ARE MAKING 5 COPIES

4. FORWARD ALL COPIES OF FORM TO LABORATORY WITH WATER SAMPLES.

State of Florida • Department of Health and Rehabilitative Services • Division of Health

BUREAU OF LABORATORIES
N. J. SCHNEIDER, PHD, MPH, CHIEF

DATE COLLECTED	COUNTY	COLLECTOR	DATE REC'D	DATE TESTED
6/29/71	Hills.	Carr		6/23/71

TYPE OF SUPPLY	CITY-TOWN	S/D	TRLR. PK.	INST.	SCHOOL	BOTTLED	MOTEL	REST	DAIRY	POOL	HOME	OTHER
												Lake

NAME OF S/D OR LOCALITY BEING SAMPLED

NAME OR LOCATION OF WATER PLANT

TYPE OF SAMPLE	ROUTINE	RE-CHECK	MAIN CLEARANCE	WELL SURVEY	OTHER
					Swimming Area

LAB	JAX	MIAMI	TAMPA	TALLA.	PENSA.	ORL.	W. P. B.	APAL.	COUNTY
			✓						

NAME AND MAILING ADDRESS OF PERSON/FIRM TO RECEIVE REPORT

Hillsborough City
H. D.

REMARKS

Pollution Survey
Swimming
Area

LAB. NO.	COLL. NO.	SAMPLING POINT	APPEARANCE	CI RES'D	PH	LB. 48	BG 48	MPN 100 MLS	MF 100 MLS	NON-COLIFORM
2458	1	Lake Saddleback, South End						110		
59	2	" " , North End						13		

WATER BACTERIOLOGY

REPORTS MAY BE DISCARDED AFTER SIX MONTHS

INTERPRETATIONS-RECOMMENDATIONS

Both (4)

Satisfactory for swimming

HAC

BY: NAME H. A. Cheatwood TITLE Engineering Technician BUREAU OF SANITARY ENGINEERING

L 529 (REV. 70)