



Republic of the Philippines  
**LEYTE METROPOLITAN WATER DISTRICT**

A DOH ACCREDITED WATER TESTING LABORATORY

Accreditation No.: 13-001-08-LW-2

Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-0065	WTP Reservoir 1 Calbayog Water Dist. Calbayog City	January 9, 2017 9:45 AM	January 11, 2017 8:00 AM	1:15 PM	<1.1	<1.1	3	PASSED
17-0066	WTP Reservoir 2 Calbayog Water Dist. Calbayog City	10:10 AM	8:00 AM	1:20 PM	<1.1	<1.1	1	PASSED

- Remarks:
- The results given in this report were obtained at the time of the analysis and refer only to the particular sample submitted.
  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =

MPN/100 ml. Fecal Coliform =

Hebertrophic Plate Count =

Refilling Station

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

*Katherine L. Gonzales*  
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

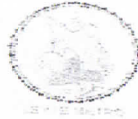
\*Certificate No. WMLA-16-0496

Certified Correct:

*Rosalinda A. Dumagosa*  
**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:

*Cynthia L. Terrado*  
**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control



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Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.:

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		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-0067	House Faucet Oquendo Dist. Calbayog City	January 9, 2017 10:30 AM	January 11, 2017 8:00 AM	January 11, 2017 1:25 PM	<1.1	<1.1	2	PASSED
17-0068	House Faucet Tinambacan Norte Calbayog City	11:10 AM	8:00 AM	1:30 PM	<1.1	<1.1	0	PASSED
17-0069	House Faucet Brgy. Amampacang Calbayog City	11:30 AM	8:00 AM	1:35 PM	<1.1	<1.1	1	PASSED

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CFU = Colony Forming Unit

MPN/100 ml. Total Coliform	=	Refilling Station	Public Water Supplies	Hemodialysis Centers
MPN/100 ml. Fecal Coliform	=	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count	=	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
		Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:  
  
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

\*Certificate No. WMLA-16-0496

Certified Correct:

**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:

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Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		January 9, 2017	January 11, 2017					
17-0070	Pagbalican Pumping Station Calbayog City	8:25 AM	8:00 AM	1:40 PM	<1.1	<1.1	87	PASSED
17-0071	NHS Pumping Station Calbayog City	2:30 PM	8:00 AM	1:45 PM	<1.1	<1.1	4	PASSED
17-0072	Fulgencio Pumping Station Calbayog City	8:35 AM	8:00 AM	1:50 PM	<1.1	<1.1	6	PASSED

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CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =

MPN/100 ml. Fecal Coliform =

Heterotrophic Plate Count =

Refilling Station

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

*Katherine L. Bonifacio*  
**KATHERINE L. BONIFACIO, RMT**  
 Medical Technologist

Certified Correct:

*Rosalinda A. Dumagsa*  
**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:

*Cynthia L. Terrado*  
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Submitted by: **Janice R. Maribojoc, RMT**

Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-0073	House Faucet Brgy. Central Calbayog City	January 9, 2017 12:00 NN	January 11, 2017 8:00 AM	1:55 PM	<1.1	<1.1	0	PASSED
17-0074	House Faucet Brgy. Monbon (Sta. Margarita) Calbayog City	1:50 PM	8:00 AM	2:00 PM	<1.1	<1.1	165	PASSED

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CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =

MPN/100 ml. Fecal Coliform =

Heterotrophic Plate Count =

Refilling Station

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**

Medical Technologist

Certified Correct:

**ROSALINDA A. DJMAGSA**

Quality Control/Assurance Officer

Noted:

**CYNTHIA L. TERRADO**

OIC, Div. Mgr., Quality Control



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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		January 9, 2017	January 11, 2017					
17-0075	House Faucet Brgy. Cautod (Sta. Margarita) Calbayog City	1:35 PM	8:00 AM	2:05 PM	<1.1	<1.1	3	PASSED
17-0076	House Faucet Brgy. Matobato Calbayog City	3:00 PM	8:00 AM	2:10 PM	<1.1	<1.1	1	PASSED

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MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:

*Katherine L. Gonzales*  
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

\*Certificate No. WMLA-16-0496

Certified Correct:

*Rosalinda A. Dumagosa*  
**ROSALINDA A. DUMAGSA**

Quality Control/Assurance Officer

Noted:

*Cynthia L. Terrado*  
**CYNTHIA L. TERRADO**

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Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		January 9, 2017	January 11, 2017					
17-0077	House Faucet Brgy. Begaho Calbayog City	10:45 AM	8:00 AM	2:15 PM	<1.1	<1.1	1	PASSED
17-0078	House Faucet Brgy. Rawis (Narasa Subd.) Calbayog City	2:10 PM	8:00 AM	2:20 PM	<1.1	<1.1	1	PASSED
17-0079	House Faucet Brgy. Payahan Calbayog City	3:30 PM	8:00 AM	2:25 PM	<1.1	<1.1	1	PASSED

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MPN/100 ml. Total Coliform =	Refilling Station	Public Water Supplies	Hemodialysis Centers
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 280 CFU/mL

Analyst:   
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

Certified Correct:   
**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:   
**CYNTHIA L. TERRADO**  
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Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.: **977090150**

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-0416	WTP Reservoir 1 Calbayog City	February 8, 2017 9:10 AM	February 9, 2017 3:57 PM	February 9, 2017 4:30 PM	<1.1	<1.1	10	PASSED
17-0417	WTP Reservoir 2 Calbayog City	9:35 AM	3:57 PM	4:35 PM	<1.1	<1.1	395	PASSED

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MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**  
*Medical Technologist*

\*Certificate No. WMLA-16-0496

Certified Correct:

**ROSALINDA A. DUMAGSA**  
*Quality Control/Assurance Officer*

Noted:

**CYNTHIA L. TERRADO**  
*OIC, Div. Mgr., Quality Control*



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Accreditation No.: 13-001-06-LW-2

Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.: **977090150**

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		February 8, 2017	February 9, 2017					
17-0418	House Faucet Brgy. Mawacat, Calbayog City	10:00 AM	3:57 PM	4:40 PM	<1.1	<1.1	1	PASSED
17-0419	House Faucet Brgy. Lonoy, Calbayog City	10:15 AM	3:57 PM	4:45 PM	<1.1	<1.1	1	PASSED

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MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:   
**KATHERINE L. DONALES, RMT**  
 Medical Technologist

Certified Correct:   
**ROSALINDA A. DUMAGOSA**  
 Quality Control/Assurance Officer

Noted:   
**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control





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 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.: **977090150**

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		February 8, 2017	February 9, 2017					
17-0420	House Faucet Brgy. Tomaliques, Calbayog City	10:35 AM	3:57 PM	4:50 PM	<1.1	<1.1	2	PASSED
17-0421	House Faucet Brgy. Saljag, Calbayog City	10:50 AM	3:57 PM	4:55 PM	<1.1	<1.1	0	PASSED

Remarks:

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MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:   
**KATHERINE L. SORREZ, RMT**  
 Medical Technologist

Certified Correct:   
**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:   
**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control



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 Contact No.: **977090150**

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		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		February 8, 2017	February 9, 2017					
17-0422	House Faucet Brgy. Balud, Calbayog City	11:10 AM	3:57 PM	5:00 PM	<1.1	<1.1	0	PASSED
17-0423	NHS Pumping Station Calbayog City	2:35 PM	3:57 PM	5:05 PM	<1.1	<1.1	1	PASSED

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MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:   
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

Certified Correct:   
**ROSALINDA A. DUMAGOSA**  
 Quality Control/Assurance Officer

Noted:   
**CYNTHIA L. TERRADO**  
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		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		February 8, 2017	February 9, 2017					
17-0424	Fulgencio Pumping Station Calbayog City	8:10 AM	3:57 PM	5:10 PM	<1.1	<1.1	1	PASSED
17-0425	Pagbalican Pumping Station Calbayog City	8:30 AM	3:57 PM	5:15 PM	<1.1	<1.1	8	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

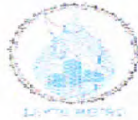
CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:   
**KATHERIN L. GONZALES, RMT**  
 Medical Technologist

Certified Correct:   
**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:   
**CYNTHIA L. TERRADO**  
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		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		February 8, 2017	February 9, 2017					
17-0426	House Faucet Brgy. West Awang, Calbayog City	3:00 PM	3:57 PM	5:20 PM	<1.1	<1.1	0	PASSED
17-0427	House Faucet Brgy. Burabud (Sta. Margarita) Calbayog City	2:05 PM	3:57 PM	5:25 PM	<1.1	<1.1	2	PASSED

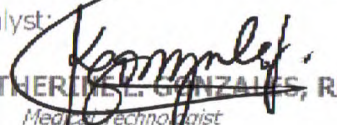
- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

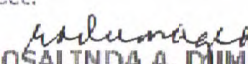
Philippine National Standards for Drinking Water (PNSDW)

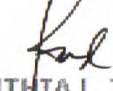
MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:   
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

Certified Correct:   
**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:   
**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control



Republic of the Philippines  
**LEYTE METROPOLITAN WATER DISTRICT**

A DOH ACCREDITED WATER TESTING LABORATORY

Accreditation No.: 13-001-08-LW-2

Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
Contact No.: **977090150**

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		February 8, 2017	February 9, 2017					
17-0428	House Faucet Brgy. Monbon (Sta. Margarita) Calbayog City	1:45 PM	3:57 PM	5:30 PM	<1.1	<1.1	1	PASSED
17-0430	House Faucet Brgy. Payahan, Calbayog City	3:35 PM	3:57 PM	5:40 PM	<1.1	<1.1	1	PASSED

- Remarks:
- The results given in this report were obtained at the time of the analysis and refer only to the particular sample submitted.
  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

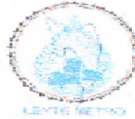
CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:   
**KATHERINE L. GONZALES, RMT**  
Medical Technologist

Certified Correct:   
**ROSALINDA A. DUMAGSA**  
Quality Control/Assurance Officer

Noted:   
**CYNTHIA L. TERRADO**  
OIC, Div. Mgr., Quality Control



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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-0819	WTP Reservoir 1 Calbayog City	March 6, 2017 9:35 AM	March 8, 2017 3:35 PM	March 9, 2017 4:00 PM	<1.1	<1.1	2	PASSED
17-0820	WTP Reservoir 2 Calbayog City	9:55 AM	3:35 PM	4:05 PM	<1.1	<1.1	3	PASSED
17-0821	House Faucet Brgy. Anislag, Calbayog City	10:10 AM	3:35 PM	4:10 PM	<1.1	<1.1	0	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =  
 MPN/100 ml. Fecal Coliform =  
 Heterotrophic Plate Count =

Refilling Station  
 Less than 1.1 or 0  
 Less than 1.1 or 0  
 Less than 500 CFU/mL

Public Water Supplies  
 Less than 1.1 or 0  
 Less than 1.1 or 0  
 Less than 500 CFU/mL

Hemodialysis Centers  
 Less than 1.1 or 0  
 Less than 1.1 or 0  
 Less than 200 CFU/mL

Analyst:

*Katherine Z. Gonzales*  
**KATHERINE Z. GONZALES, RMT**  
 Medical Technologist

\*Certificate No. WMLA-16-0496

Certified Correct:

*Rosalinda A. Dumagaga*  
**ROSALINDA A. DUMAGAGA**  
 Quality Control/Assurance Officer

Noted:

*Cynthia L. Terrado*  
**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control



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Accreditation No.: 13-001-05-LW-2

Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-0822	House Faucet Tinambacan Sur, Calbayog City	March 6, 2017 10:30 AM	March 8, 2017 3:35 PM	March 9, 2017 4:15 PM	<1.1	<1.1	0	PASSED
17-0823	House Faucet Brgy. Amampacang, Calbayog City	10:55 AM	3:35 PM	4:20 PM	<1.1	<1.1	0	PASSED
17-0824	House Faucet Brgy. Dagum, Calbayog City	11:20 AM	3:35 PM	4:25 PM	<1.1	<1.1	2	PASSED

- Remarks:
- The results given in this report were obtained at the time of the analysis and refer only to the particular sample submitted.
  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =

MPN/100 ml. Fecal Coliform =

Heterotrophic Plate Count =

Refilling Station

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

*Katherine G. Guzman*  
**KATHERINE G. GUZMAN, RMT**  
Medical Technologist

\*Certificate No. WMLA-16-0496

Certified Correct:

*Rosalinda A. Dumagsa*  
**ROSALINDA A. DUMAGSA**  
Quality Control/Assurance Officer

Noted:

*Cynthia L. Terrado*  
**CYNTHIA L. TERRADO**  
OIC, Div. Mgr., Quality Control



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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-0825	House Faucet Brgy. Hamurawon, Calbayog City	March 6, 2017 11:40 AM	March 8, 2017 3:35 PM	March 9, 2017 4:30 PM	<1.1	<1.1	3	PASSED
17-0826	House Faucet NHS Pumping Station, Calbayog City	2:20 PM	3:35 PM	4:35 PM	<1.1	<1.1	3	PASSED
17-0827	House Faucet Fulgencio Pumping Station, Calbayog City	8:35 AM	3:35 PM	4:40 PM	<1.1	<1.1	3	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =

MPN/100 ml. Fecal Coliform =

Heterotrophic Plate Count =

Refilling Station

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

*Katherine L. Gonzales*  
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

\*Certificate No. WMLA-16-0496

Certified Correct:

*Rosalinda A. Dumagosa*  
**ROSALINDA A. DUMAGOSA**  
 Quality Control/Assurance Officer

Noted:

*Cynthia L. Terrado*  
**CYNTHIA L. TERRADO**  
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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-0828	House Faucet Pagbalican Pumping Station, Calbayog City	March 6, 2017 8:15 AM	March 8, 2017 3:35 PM	March 9, 2017 4:45 PM	<1.1	<1.1	2	PASSED
17-0829	House Faucet Brgy. Rawis, Calbayog City	2:35 PM	3:35 PM	4:50 PM	<1.1	<1.1	1	PASSED
17-0830	House Faucet Brgy. Burabod (Sta. Margarita) Calbayog City	1:55 PM	3:35 PM	4:55 PM	<1.1	<1.1	4	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =

MPN/100 ml. Fecal Coliform =

Heterotrophic Plate Count =

Refilling Station

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALEZ, RMT**  
 Medical Technologist

\*Certificate No. WMLA-16-0496

Certified Correct:

**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:

**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control



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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-0831	House Faucet Brgy. Cautod (Sta. Margarita) Calbayog City	March 6, 2017 1:30 PM	March 8, 2017 3:35 PM	March 9, 2017 5:00 PM	<1.1	<1.1	0	PASSED
17-0832	House Faucet Brgy. East Awang, Calbayog City	12:00 NN	3:35 PM	5:05 PM	<1.1	<1.1	2	PASSED
17-0833	House Faucet Brgy. Payahan, Calbayog City	3:30 PM	3:35 PM	5:10 PM	<1.1	<1.1	0	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =

MPN/100 ml. Fecal Coliform =

Heterotrophic Plate Count =

Refilling Station

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

*Katherine L. Gonzales*  
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

\*Certificate No. WMLA-16-0496

Certified Correct:

*Rosalinda A. Dumagosa*  
**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:

*Cynthia L. Terrado*  
**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control



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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **Calbayog City**

Submitted by: **Janice R. Maribojoc**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		April 5, 2017	April 6, 2017					
17-1193	WTP Reservoir 1 Calbayog City	10:00 AM	4:00 PM	4:15 PM	<1.1	<1.1	50	PASSED
17-1194	WTP Reservoir 2 Calbayog City	10:25 AM	4:00 PM	4:20 PM	<1.1	<1.1	20	PASSED
17-1195	Faucet Brgy. Cagsalaosao, Calbayog City	11:15 AM	4:00 PM	4:25 PM	<1.1	<1.1	1	PASSED

- Remarks:
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  - Test Method Used: Multiple Tube Fermentation Technique & Four Plate Method.

Philippine National Standards for Drinking Water (PNSDW)  
 MPN = Most Probable Number  
 CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:   
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

Certified Correct:   
**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:   
**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control



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 Telefax No. (053) 332-7465/332-7424

**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **Calbayog City**

Submitted by: **Janice R. Maribojoc**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		April 5, 2017	April 6, 2017					
17-1196	Faucet Brgy. Bante, Calbayog City	10:50 AM	4:00 PM	4:30 PM	<1.1	<1.1	0	PASSED
17-1197	Faucet Brgy. Trinidad, Calbayog City	11:30 AM	4:00 PM	4:35 PM	<1.1	<1.1	0	PASSED
17-1198	Faucet Brgy. Capocan, Calbayog City	2:05 PM	4:00 PM	4:40 PM	<1.1	<1.1	0	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =

MPN/100 ml. Fecal Coliform =

Heterotrophic Plate Count =

Refilling Station

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

*Katherinel Gonzales*  
**KATHERINEL GONZALES, RMT**  
 Medical Technologist

\*Certificate No. WMLA-16-0496

Certified Correct:

*Rosalinda A. Dumagsa*  
**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:

*Cynthia L. Terrado*  
**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control



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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **Calbayog City**

Submitted by: **Janice R. Maribojoc**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		April 5, 2017	April 6, 2017					
17-1199	Faucet Brgy. Basud, Calbayog City	11:40 AM	4:00 PM	4:45 PM	<1.1	<1.1	1	PASSED
17-1200	Faucet NHS Pumping Station, Calbayog City	2:00 PM	4:00 PM	4:50 PM	<1.1	<1.1	2	PASSED
17-1201	Faucet Fulgencio Pumping Station, Calbayog City	9:00 PM	4:00 PM	4:55 PM	<1.1	<1.1	12	PASSED

- Remarks:
- The results given in this report were obtained at the time of the analysis and refer only to the particular sample submitted.
  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =

MPN/100 ml. Fecal Coliform =

Heterotrophic Plate Count =

Refilling Station

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

*Katherine L. Gonzales*  
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

\*Certificate No. WMLA-16-0496

Certified Correct:

*Rosalinda A. Dumagsa*  
**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:

*Cynthia L. Terrado*  
**CYNTHIA L. TERRADO**  
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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **Calbayog City**

Submitted by: **Janice R. Maribojoc**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		April 5, 2017	April 6, 2017					
17-1202	Faucet Pagbalican Pumping Station, Calbayog City	8:00 PM	4:00 PM	5:00 PM	<1.1	<1.1	0	PASSED
17-1203	Faucet Brgy. Ipao, Calbayog City	12:00 NN	4:00 PM	5:05 PM	<1.1	<1.1	1	PASSED
17-1204	Faucet Brgy. Cautod (Sta. Margarita) Calbayog City	1:30 PM	4:00 PM	5:10 PM	<1.1	<1.1	1	PASSED

- Remarks:
- The results given in this report were obtained at the time of the analysis and refer only to the particular sample submitted.
  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

\*Certificate No. WMLA-16-0496

Certified Correct:

**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:

**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control



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Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **Calbayog City**

Submitted by: **Janice R. Maribojoc**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		April 5, 2017		April 6, 2017				
17-1205	Faucet Brgy. Monbon (Sta. Margarita) Calbayog City	1:15 PM	4:00 PM	5:15 PM	<1.1	<1.1	0	PASSED
17-1207	Faucet Brgy. Payahan, Calbayog City	3:35 PM	4:00 PM	5:25 PM	<1.1	<1.1	0	PASSED

- Remarks:
- The results given in this report were obtained at the time of the analysis and refer only to the particular sample submitted.
  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =

MPN/100 ml. Fecal Coliform =

Heterotrophic Plate Count =

Refilling Station

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

*Katherine L. Gonzales*  
**KATHERINE L. GONZALES, RMT**  
Medical Technologist

\*Certificate No. WMLA-16-0496

Certified Correct:

*Rosalinda A. Dumagsa*  
**ROSALINDA A. DUMAGSA**  
Quality Control/Assurance Officer

Noted:

*Cynthia L. Terrado*  
**CYNTHIA L. TERRADO**  
OIC, Div. Mgr., Quality Control



Republic of the Philippines  
**LEYTE METROPOLITAN WATER DISTRICT**

A DOH ACCREDITED WATER TESTING LABORATORY

Accreditation No.: 13-001-08-LW-2

Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		May 2, 2017		May 3, 2017				
17-1476	WTP Reservoir 1 Calbayog City	9:45 AM	3:45 PM	4:00 PM	<1.1	<1.1	15	PASSED
17-1477	WTP Reservoir 2 Calbayog City	10:00 AM	3:45 PM	4:05 PM	<1.1	<1.1	10	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:   
**KATHERINE L. GONZALES, RMT**  
Medical Technologist

Certified Correct:   
**ROSALINDA A. DUMAGSA**  
Quality Control/Assurance Officer

Noted:   
**CYNTHIA L. TERRADO**  
OIC, Div. Mgr., Quality Control





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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Client: **CALBAYOG WATER DISTRICT**  
Address: **Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		May 2, 2017		May 3, 2017				
17-1473	House Faucet Brgy. Panlayahan, Calbayog City	10:15 AM	3:45 PM	4:10 PM	<1.1	<1.1	10	PASSED
17-1479	House Faucet Brgy. Cagbilwang, Calbayog City	10:30 AM	3:45 PM	4:15 PM	<1.1	<1.1	8	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =

MPN/100 ml. Fecal Coliform =

Heterotrophic Plate Count =

Refilling Station

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

**CATHERINE L. GONZALES, RMT**  
Medical Technologist

Certificate No. WMLA-16-0496

Certified Correct:

**ROSALINDA A. DIMAGSA**  
Quality Control/Assurance Officer

Noted:

**CYNTHIA L. TERRADO**  
OIC, Div. Mgr., Quality Control



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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-1480	House Faucet Tinambacan Sur, Calbayog City	May 2, 2017						PASSED
		10:55 AM	3:45 PM	4:20 PM	<1.1	<1.1	5	
17-1481	House Faucet Brgy. Ipao, Calbayog City	11:10 AM	3:45 PM	4:25 PM	<1.1	<1.1	25	PASSED

- Remarks:
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  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)  
 MPN = Most Probable Number  
 CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station	Public Water Supplies	Hemodialysis Centers
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:   
**CATHERINE L. GONZALES, RMT**  
 Medical Technologist

Certified Correct:   
**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:   
**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control



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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-1482	House Faucet Brgy. Rawis, Calbayog City	May 2, 2017	May 3, 2017					
		2:05 PM	3:45 PM	4:30 PM	<1.1	<1.1	3	PASSED
17-1483	House Faucet NHS Pumping Station, Calbayog City	2:15 PM	3:45 PM	4:35 PM	<1.1	<1.1	3	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)  
 MPN = Most Probable Number  
 CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station	Public Water Supplies	Hemodialysis Centers
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:   
**CATHERINE L. GONZALES, RMT**  
*Medical Technologist*

Certified Correct:   
**ROSALINDA A. DUMAGSA**  
*Quality Control/Assurance Officer*

Noted:   
**CYNTHIA L. TERRADO**  
*OIC, Div. Mgr., Quality Control*



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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-1484	House Faucet Brgy. Dagum, Calbayog City	May 2, 2017 3:30 PM	May 3, 2017 3:45 PM	4:40 PM	<1.1	<1.1	5	PASSED
17-1485	House Faucet Pagbalican Pumping Station, Calbayog City	8:30 AM	3:45 PM	4:45 PM	<1.1	<1.1	1	PASSED

- Remarks:
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  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:   
**KATHERINE L. GONZALES, RMT**  
Medical Technologist

Certified Correct:

**ROSALINDA A. DUMAGSA**  
Quality Control/Assurance Officer

Noted:

**CYNTHIA L. TERRADO**  
OIC, Div. Mgr., Quality Control



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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		May 2, 2017		May 3, 2017				
17-1486	House Faucet Brgy. Bagacay, Calbayog City	1:50 PM	3:45 PM	4:50 PM	<1.1	<1.1	3	PASSED
17-1487	House Faucet Brgy. Cautod (Sta. Margarita) Calbayog City	1:20 PM	3:45 PM	4:55 PM	<1.1	<1.1	10	PASSED

- Remarks:
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  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

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MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station	Public Water Supplies	Hemodialysis Centers
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:   
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

Certified Correct:   
**ROSALINDA A. DUMAGOSA**  
 Quality Control/Assurance Officer

Noted:   
**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control



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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-1488	House Faucet Brgy. Obrero, Calbayog City	May 2, 2017 11:40 AM	May 3, 2017 3:45 PM	5:00 PM	<1.1	<1.1	5	PASSED
17-1489	House Faucet Brgy. Carmen, Calbayog City	11:30 AM	3:45 PM	5:05 PM	<1.1	<1.1	3	PASSED
17-1490	House Faucet Brgy. Payahan, Calbayog City	4:00 PM	3:45 PM	5:10 PM	<1.1	<1.1	3	PASSED

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  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

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MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =

MPN/100 ml. Fecal Coliform =

Heterotrophic Plate Count =

Refilling Station

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**

Medical Technologist

Certificate No. WMLA-16-0496

Certified Correct:

**ROSALINDA A. DUMAGSA**

Quality Control/Assurance Officer

Noted:

**CYNTHIA L. TERRADO**

OIC, Div. Mgr., Quality Control



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Telefax No. (053) 332-7465/332-7424

**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-1805	WTP Reservoir 1 Calbayog City	June 5, 2017 9:25 AM	June 7, 2017 4:00 PM	June 8, 2017 4:25 PM	<1.1	<1.1	2	PASSED
17-1806	WTP Reservoir 2 Calbayog City	9:30 AM	4:00 PM	4:30 PM	<1.1	<1.1	3	PASSED
17-1807	House Faucet Brgy. West Awang, Calbayog City	2:30 AM	4:00 PM	4:35 PM	<1.1	<1.1	0	PASSED

Remarks:

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Philippine National Standards for Drinking Water (PNSDW)

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MPN/100 ml. Total Coliform =	Refilling Station	Public Water Supplies	Hemodialysis Centers
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:   
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

Certified Correct:   
**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:   
**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control



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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-1808	House Faucet Brgy. Trinidad, Calbayog City	June 6, 2017 10:30 AM	June 7, 2017 4:00 PM	June 8, 2017 4:40 PM	<1.1	<1.1	1	PASSED
17-1809	House Faucet Brgy. Central, Calbayog City	2:45 PM	4:00 PM	4:45 PM	<1.1	<1.1	2	PASSED
17-1810	House Faucet Brgy. Cahumpan, Calbayog City	10:00 AM	4:00 PM	4:50 PM	<1.1	<1.1	0	PASSED

Remarks:

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 MPN = Most Probable Number  
 CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:  
  
**CATHERINE I. GONZALES, RMT**  
 Medical Technologist

Certified Correct:  
  
**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:  
  
**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control





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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-1811	House Faucet Brgy. Aguit-itan, Calbayog City	June 6, 2017 2:00 PM	June 7, 2017 4:00 PM	June 8, 2017 4:55 PM	<1.1	<1.1	2	PASSED
17-1812	Faucet NHS Pumping Station, Calbayog City	3:00 PM	4:00 PM	5:00 PM	<1.1	<1.1	2	PASSED
17-1813	House Faucet Narcisa Hills Subd., Calbayog City	3:10 PM	4:00 PM	5:05 PM	<1.1	<1.1	1	PASSED

Remarks:

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MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Certified Correct:

*Rosalinda A. Dumagsa*  
**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:

*Cynthia L. Terrado*  
**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control

Analyst:  
*Katherine L. Gonzales*  
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

Certificate No. WMLA-16-0496



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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-1814	Faucet Pagbalican Pumping Station, Calbayog City	June 6, 2017 9:10 AM	June 7, 2017 4:00 PM	June 8, 2017 5:10 PM	<1.1	<1.1	2	PASSED
17-1815	House Faucet Brgy. Pagbalican, Calbayog City	9:25 AM	4:00 PM	5:15 PM	<1.1	<1.1	3	PASSED
17-1816	House Faucet Brgy. Burabod (Sta. Margarita) Calbayog City	11:15 AM	4:00 PM	5:20 PM	<1.1	<1.1	0	PASSED

Remarks:

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CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

Certified Correct:

**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:

**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control



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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-1817	House Faucet Brgy. Monbon (Sta. Margarita) Calbayog City	June 6, 2017 11:00 AM	June 7, 2017 4:00 PM	June 8, 2017 5:25 PM	<1.1	<1.1	1	PASSED
17-1818	House Faucet Brgy. Carayman, Calbayog City	11:45 AM	4:00 PM	5:30 PM	<1.1	<1.1	2	PASSED
17-1819	House Faucet Brgy. Payahan, Calbayog City	3:15 PM	4:00 PM	5:35 PM	<1.1	<1.1	3	PASSED

Remarks:

- This result shall not be reproduced unless in full.
- Test Method Used: *Multitube Fermentation Technique & Pour Plate Method.*

Philippine National Standards for Drinking Water (PNSDW)  
 MPN = Most Probable Number  
 CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:   
**CATHERINE L. GONZALES, RMT**  
*Medical Technologist*

Certified Correct:  
  
**ROSALINDA A. DUMAGSA**  
*Quality Control/Assurance Officer*

Noted:  
  
**CYNTHIA L. TERRADO**  
*OIC, Div. Mgr., Quality Control*



Republic of the Philippines  
**LEYTE METROPOLITAN WATER DISTRICT**

A DOH ACCREDITED WATER TESTING LABORATORY

Accreditation No.: 13-001-08-LW-2

Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7455/332-7424

**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		July 6, 2017	July 7, 2017					
17-2053	WTP Reservoir 1 Calbayog City	9:00 AM	3:50 PM	4:00 PM	<1.1	<1.1	6	PASSED
17-2054	WTP Reservoir 2 Calbayog City	9:10 AM	3:50 PM	4:05 PM	<1.1	<1.1	8	PASSED

- Remarks:
- The results given in this report were obtained at the time of the analysis and refer only to the particular sample submitted.
  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:   
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

Certified Correct:   
**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:   
**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control



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Telefax No. (053) 332-7465/332-7424

**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		July 6, 2017	July 7, 2017					
17-2055	House Faucet Brgy. Limarayon, Calbayog City	9:45 AM	3:50 PM	4:10 PM	<1.1	<1.1	0	PASSED
17-2056	House Faucet Brgy. Cabatuan, Calbayog City	9:15 AM	3:50 PM	4:15 PM	<1.1	<1.1	1	PASSED

- Remarks:
- The results given in this report were obtained at the time of the analysis and refer only to the particular sample submitted.
  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =

MPN/100 ml. Fecal Coliform =

Heterotrophic Plate Count =

Refilling Station

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

*Katherine L. Gonzales*  
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

Certified Correct:

*Rosalinda A. Dumagosa*  
**ROSALINDA A. DUMAGOSA**  
 Quality Control/Assurance Officer

Noted:

*Cynthia L. Terrado*  
**CYNTHIA L. TERRADO**  
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Telefax No. (053) 332-7465/332-7424

**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		July 6, 2017	July 7, 2017					
17-2057	House Faucet Tinambacan Norte, Calbayog City	10:05 AM	3:50 PM	4:20 PM	<1.1	<1.1	1	PASSED
17-2058	House Faucet Oquendo District, Calbayog City	9:30 AM	3:50 PM	4:25 PM	<1.1	<1.1	221	PASSED

- Remarks:
- The results given in this report were obtained at the time of the analysis and refer only to the particular sample submitted.
  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:

*Katherine L. Gonzales*  
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

Certified Correct:

*Rosalinda A. Dumagsa*  
**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:

*Cynthia L. Terrado*  
**CYNTHIA L. TERRADO**  
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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		July 6, 2017	July 7, 2017					
17-2059	House Faucet Brgy. West Awang, Calbayog City	3:05 PM	3:50 PM	4:30 PM	<1.1	<1.1	0	PASSED
17-2060	House Faucet NHS Pumping Station, Calbayog City	2:50 PM	3:50 PM	4:35 PM	<1.1	<1.1	0	PASSED

- Remarks:
- The results given in this report were obtained at the time of the analysis and refer only to the particular sample submitted.
  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

\*Certificate No. WMLA-16-0496

Certified Correct:

**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:

**CYNTHIA L. TERRADO**  
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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		July 6, 2017	July 7, 2017					
17-2061	House Faucet Brgy. Gadgaran, Calbayog City	11:20 AM	3:50 PM	4:40 PM	<1.1	<1.1	0	PASSED
17-2062	House Faucet Pagbalican Pumping Station, Calbayog City	7:10 AM	3:50 PM	4:45 PM	<1.1	<1.1	1	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:   
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

Certified Correct:   
**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:   
**CYNTHIA L. TERRADO**  
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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		July 6, 2017	July 7, 2017					
17-2063	House Faucet Brgy. East Awang, Calbayog City	11:55 AM	3:50 PM	4:50 PM	<1.1	<1.1	1	PASSED
17-2064	House Faucet Brgy. Cautod (Sta. Margarita) Calbayog City	2:30 PM	3:50 PM	4:55 PM	<1.1	<1.1	18	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:  
  
**KATHERINE T. GONZALES, RMT**  
 Medical Technologist

Certified Correct:

**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:

**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control



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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		July 6, 2017	July 7, 2017					
17-2065	House Faucet Brgy. Monbon (Sta. Margarita) Calbayog City	2:20 PM	3:50 PM	5:00 PM	<1.1	<1.1	21	PASSED
17-2066	House Faucet Brgy. Balud, Calbayog City	11:45 AM	3:50 PM	5:05 PM	<1.1	<1.1	16	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:

*Katherine L. Gonzales*  
**KATHERINE L. GONZALES, RMT**  
Medical Technologist

Certified Correct:

*Rosalinda A. Dumagsa*  
**ROSALINDA A. DUMAGSA**  
Quality Control/Assurance Officer

Noted:

*Cynthia L. Terrado*  
**CYNTHIA L. TERRADO**  
OIC, Div. Mgr., Quality Control



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Telefax No. (053) 332-7465/332-7424

**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **Calbayog, N. Samar**

Submitted by: **Janice Maribojoc**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		August 2, 2017						
17-2295	WTP, Reservoir 1 CWD, Calbayog, City	9:00 AM	3:40 PM	4:00 PM	<1.1	<1.1	0	PASSED
17-2296	WTP, Reservoir 2 CWD, Calbayog, City	9:25 AM	3:40 PM	4:05 PM	<1.1	<1.1	0	PASSED
17-2297	House Faucet, Brgy. Monbon (Sta. Margarita) CWD, Calbayog, City	10:20 AM	3:40 PM	4:10 PM	<1.1	<1.1	0	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coli form =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coli form =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**

*Medical Technologist*

Certified Correct:

**ROSALINDA A. DUMAGSA**

*Quality Control/Assurance Officer*

Noted:

**CYNTHIA L. TERRADO**

*OIC, Div. Ingr., Quality Control*



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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **Calbayog, N. Samar**

Submitted by: **Janice Maribojoc**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		August 1, 2017	August 2, 2017					
17-2298	House Faucet, Brgy. Bagacay CWD, Calbayog, City	11:05 AM	3:40 PM	4:15 PM	<1.1	<1.1	0	PASSED
17-2299	House Faucet, Brgy. Burabod, (Sta. Margarita) CWD, Calbayog, City	10:45 AM	3:40 PM	4:20 PM	<1.1	<1.1	0	PASSED
17-2300	House Faucet, Pido Extension CWD, Calbayog, City	11:35 AM	3:40 PM	4:25 PM	<1.1	<1.1	0	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =  
MPN/100 ml. Fecal Coliform =  
Heterotrophic Plate Count =

Refilling Station  
Less than 1.1 or 0  
Less than 1.1 or 0  
Less than 500 CFU/mL

Public Water Supplies  
Less than 1.1 or 0  
Less than 1.1 or 0  
Less than 500 CFU/mL

Hemodialysis Centers  
Less than 1.1 or 0  
Less than 1.1 or 0  
Less than 200 CFU/mL

Analyst:  
  
**KATHERINE L. GONZALES, RMT**  
Medical Technologist

Certified Correct:  
  
**ROSALINDA A. DU MAGASA**  
Quality Control/Assurance Officer

Noted:  
  
**CYNTHIA L. TERRADO**  
OIC, Div. Mgr., Quality Control



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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **Calbayog, N. Samar**

Submitted by: **Janice Maribojoc**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		August 1, 2017	August 2, 2017					
17-2301	House Faucet, Tinambacan Sur CWD, Calbayog, City	1:35 PM	3:40 PM	4:30 PM	<1.1	<1.1	0	PASSED
17-2302	House Faucet, Brgy. Balud CWD, Calbayog, City	12:00 NN	3:40 PM	4:35 PM	<1.1	<1.1	0	PASSED
17-2303	House Faucet, Brgy. Dagum CWD, Calbayog, City	3:00 PM	3:40 PM	4:40 PM	<1.1	<1.1	0	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml, Total Coliform =

MPN/100 ml, Fecal Coliform =

Heterotrophic Plate Count =

running station

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

public water supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

recreational waters

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:   
**KATHERINE L. GONZALES, RMT**  
Microbiologist

Certified Correct:

**ROSALINDA A. DUMAGSA**  
Quality Control/Assurance Officer

Noted:

**CYNTHIA L. TERRADO**  
OIC, Div. Mgr., Quality Control



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**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **Calbayog, N. Samar**

Submitted by: **Janice Maribojoc**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		August 1, 2017	August 2, 2017					
17-2304	Faucet, NHS Pumping Station, CWD, Calbayog, City	11:25 PM	3:40 PM	4:45 PM	<1.1	<1.1	0	PASSED
17-2305	House Faucet, Fulgencio Subdiv., CWD, Calbayog, City	3:15 PM	3:40 PM	4:50 PM	<1.1	<1.1	0	PASSED
17-2306	Faucet, Pagbalican Pumping Station CWD, Calbayog, City	8:30 AM	3:40 PM	4:55 PM	<1.1	<1.1	0	PASSED

- Remarks:
1. The results given in this report were obtained at the time of the analysis and refer only to the particular sample submitted.
  2. This result shall not be reproduced unless in full.
  3. Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform	=	Less than 1.1 or 0	Public Water Supplies	Less than 1.1 or 0	Microbiology Centers	Less than 1.1 or 0
MPN/100 ml. Fecal Coliform	=	Less than 1.1 or 0		Less than 1.1 or 0		Less than 1.1 or 0
Heterotrophic Plate Count	=	Less than 500 CFU/mL		Less than 500 CFU/mL		Less than 200 CFU/mL

Analyst:

*Katherine L. Gonzales*  
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

\*Certificate No. WMLA-16-0496

Certified Correct:

*Rosalinda A. Dumagsa*  
**ROSALINDA A. DUMAGSA**  
 Quality Control/Assurance Officer

Noted:

*Cynthia L. Terrado*  
**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control



Republic of the Philippines  
**LEYTE METROPOLITAN WATER DISTRICT**

A DOH ACCREDITED WATER TESTING LABORATORY

Accreditation No.: 13-001-08-LW-2

Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **Calbayog, N. Samar**

Submitted by: **Janice Maribojoc**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		August 1, 2017	August 2, 2017					
17-2307	House Faucet, Brgy. Capoocan CWD, Calbayog, City	1:15 PM	3:40 PM	5:00 PM	<1.1	<1.1	0	PASSED
17-2308	House Faucet, Brgy. Lonoy CWD, Calbayog, City	2:15 PM	3:40 PM	5:05 PM	<1.1	<1.1	0	PASSED
17-2309	House Faucet, Brgy. Obrero CWD, Calbayog, City	1:00 PM	3:40 PM	5:10 PM	<1.1	<1.1	0	PASSED

- Remarks:
1. The results given in this report were obtained at the time of the analysis and refer only to the particular sample submitted.
  2. This result shall not be reproduced unless in full.
  3. Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =

MPN/100 ml. Fecal Coliform =

Heterotrophic Plate Count =

Refilling Station

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

**KATHERINE L. LOYZALES, RMT**

Medical Technologist

Certified Correct:

**ROSALINDA A. DUMAGSA**

Quality Control/Assurance Officer

Noted:

**CYNTHIA L. TERRADO**

OIC, Div. Mgr., Quality Control



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Telefax No. (053) 332-7465/332-7424

**BACTERIOLOGICAL TEST RESULT FOR WATER**

Name of Client: **CALBAYOG WATER DISTRICT**

Address: **Calbayog, N. Samar**

Submitted by: **Janice Maribojoc**

Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		August 1, 2017	August 2, 2017					
17-2310	House Faucet, Brgy. Payahan CWD, Calbayog, City	3:30 PM	3:40 PM	5:15 PM	<1.1	<1.1	0	PASSED

- Remarks:
- The results given in this report were obtained at the time of the analysis and refer only to the particular sample submitted.
  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station	Public Water Supplies	Hemodialysis Centers
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**

Medical Technologist

Certified Correct:

**ROSALINDA A. DUMAGSA**

Quality Control/Assurance Officer

Noted:

**CYNTHIA L. TERRADO**

OIC, Div. Mgr., Quality Control





# LEYTE METROPOLITAN WATER DISTRICT

A DOH ACCREDITED WATER TESTING LABORATORY

Accreditation No.: 13-001-08-LW-2

Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7455/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **Calbayog City, Samar**

Submitted by:  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		September 5, 2017	September 6, 2017					
17-2623	WTP Reservoir 1 Calbayog City, Samar		3:30 PM	4:30 PM	<1.1	<1.1	5	PASSED
17-2624	WTP Reservoir 2 Calbayog City, Samar	9:20 AM	3:30 PM	4:35 PM	<1.1	<1.1	4	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =

MPN/100 ml. Fecal Coliform =

Heterotrophic Plate Count =

Refilling Station

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**  
Medical Technologist

\*Certificate No. WMLA-16-0496

Certified Correct:

**ROSALINDA A. DUMAGOSA**  
Quality Control/Assurance Officer

Noted:

**CYNTHIA L. TERRADO**  
OIC, Div. Mgr., Quality Control



## LEYTE METROPOLITAN WATER DISTRICT

A DOH ACCREDITED WATER TESTING LABORATORY

Accreditation No.: 13-001-08-LW-2

Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

### BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **Calbayog City, Samar**

Submitted by:  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		September 5, 2017	September 6, 2017					
17-2625	Faucet Brgy. Palanas Cara, Calbayog City, Samar	9:50 AM	3:30 PM	4:40 PM	<1.1	<1.1	0	PASSED
17-2626	Faucet Tinambacan Norte, Calbayog City, Samar	10:00 AM	3:30 PM	4:45 PM	<1.1	<1.1	0	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =  
 MPN/100 ml. Fecal Coliform =  
 Heterotrophic Plate Count =

Refilling Station  
 Less than 1.1 or 0  
 Less than 1.1 or 0  
 Less than 500 CFU/mL

Public Water Supplies  
 Less than 1.1 or 0  
 Less than 1.1 or 0  
 Less than 500 CFU/mL

Hemodialysis Centers  
 Less than 1.1 or 0  
 Less than 1.1 or 0  
 Less than 200 CFU/mL

Analyst:

*Katherine L. Gonzales*  
**KATHERINE L. GONZALES, RMT**  
*Medical Technologist*

Certified Correct:

*Rosalinda A. Dumagosa*  
**ROSALINDA A. DUMAGSA**  
*Quality Control/Assurance Officer*

Noted:

*Cynthia L. Terrado*  
**CYNTHIA L. TERRADO**  
*OIC, Div. Mgr., Quality Control*



# LEYTE METROPOLITAN WATER DISTRICT

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Telefax No. (053) 332-7465/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **Calbayog City, Samar**

Submitted by:  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		September 5, 2017	September 6, 2017					
17-2627	Faucet Brgy. Central, Calbayog City, Samar	2:00 PM	3:30 PM	4:50 PM	<1.1	<1.1	0	PASSED
17-2628	Faucet Brgy. West Awang, Calbayog City, Samar	10:50 AM	3:30 PM	4:55 PM	<1.1	<1.1	1	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:   
**KATHERINE L. GONZALES, RMT**  
Medical Technologist

Certified Correct:   
**ROSALINDA A. DUMAGSA**  
Quality Control/Assurance Officer

Noted:   
**CYNTHIA L. TERRADO**  
OIC, Div. Mgr., Quality Control



# LEYTE METROPOLITAN WATER DISTRICT

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Telefax No. (053) 332-7455/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **Calbayog City, Samar**

Submitted by:  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		September 5, 2017	September 6, 2017					
17-2629	Faucet Brgy. East Awang, Calbayog City, Samar	1:35 PM	3:30 PM	5:00 PM	<1.1	<1.1	0	PASSED
17-2630	Faucet NHS Pumping Station, Calbayog City, Samar	11:35 AM	3:30 PM	5:05 PM	<1.1	<1.1	0	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Four Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =

MPN/100 ml. Fecal Coliform =

Heterotrophic Plate Count =

Refilling Station

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

*Katherine L. Gonzales*  
**KATHERINE L. GONZALES, RMT**  
Medical Technologist

\*Certificate No. WMLA-16-0496

Certified Correct:

*Rosalinda A. Dumagaga*  
**ROSALINDA A. DUMAGAGA**  
Quality Control/Assurance Officer

Noted:

*Cynthia L. Terrado*  
**CYNTHIA L. TERRADO**  
OIC, Div. Mgr., Quality Control



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## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **Calbayog City, Samar**

Submitted by:  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		September 5, 2017	September 6, 2017					
17-2631	Faucet Fulgencio Pumping Station, Calbayog City, Samar	8:00 AM	3:30 PM	5:10 PM	<1.1	<1.1	0	PASSED
17-2632	Faucet Pagbalican Pumping Station, Calbayog City, Samar	8:30 AM	3:30 PM	5:15 PM	<1.1	<1.1	2	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:

*Katherine L. Gonzales*  
**KATHERINE L. GONZALES, RMT**  
Medical Technologist

\*Certificate No. WMLA-16-0496

Certified Correct:

*Rosalinda A. Dumagala*  
**ROSALINDA A. DUMAGALA**  
Quality Control/Assurance Officer

Noted:

*Cynthia L. Terrado*  
**CYNTHIA L. TERRADO**  
OIC, Div. Mgr., Quality Control



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Telefax No. (053) 332-7465/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**

Address: **Calbayog City, Samar**

Submitted by:

Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-2633	Faucet Brgy. Nijaga, Calbayog City, Samar	September 5, 2017 1:20 PM	September 6, 2017 3:30 PM	September 6, 2017 5:20 PM	<1.1	<1.1	0	PASSED
17-2634	Faucet Brgy. Cautod (Sta. Margarita) Calbayog City, Samar	11:15 AM	3:30 PM	5:25 PM	<1.1	<1.1	0	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =

MPN/100 ml. Fecal Coliform =

Heterotrophic Plate Count =

Refilling Station

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**

Medical Technologist

Certificate No. WMLA-16-0496

Certified Correct:

**ROSALINDA A. DUMAGSA**

Quality Control/Assurance Officer

Noted:

**CYNTHIA L. TERRADO**

OIC, Div. Mgr., Quality Control



# LEYTE METROPOLITAN WATER DISTRICT

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Telefax No. (053) 332-7465/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **Calbayog City, Samar**

Submitted by:  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-2635	Faucet Brgy. Matobato, Calbayog City, Samar	September 5, 2017 10:35 AM	September 6, 2017 3:30 PM	September 6, 2017 5:30 PM	<1.1	<1.1	0	PASSED
17-2636	Faucet Brgy. Balud, Calbayog City, Samar	1:40 PM	3:30 PM	5:35 PM	<1.1	<1.1	0	PASSED
17-2637	Faucet Brgy. Payahan, Calbayog City, Samar	3:00 PM	3:30 PM	5:40 PM	<1.1	<1.1	1	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)  
 MPN = Most Probable Number  
 CFU = Colony Forming Unit

MPN/100 ml. Total Coliform =	Refilling Station Less than 1.1 or 0	Public Water Supplies Less than 1.1 or 0	Hemodialysis Centers Less than 1.1 or 0
MPN/100 ml. Fecal Coliform =	Less than 1.1 or 0	Less than 1.1 or 0	Less than 1.1 or 0
Heterotrophic Plate Count =	Less than 500 CFU/mL	Less than 500 CFU/mL	Less than 200 CFU/mL

Analyst:   
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

Certified Correct:   
**ROSALINDA A. DUMAGOSA**  
 Quality Control/Assurance Officer

Noted:   
**CYNTHIA L. TERRADO**  
 OIC, Div. Mgr., Quality Control



# LEYTE METROPOLITAN WATER DISTRICT

A DOH ACCREDITED WATER TESTING LABORATORY

Accreditation No.: 13-001-06-LW-2

Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		October 11, 2017	October 12, 2017					
17-2935	WTP Reservoir 1 Calbayog City	9:00 AM	4:00 PM	6:10 PM	<1.1	<1.1	0	PASSED
17-2936	WTP Reservoir 2 Calbayog City	9:20 AM	4:00 PM	6:15 PM	<1.1	<1.1	0	PASSED

**Remarks:**

1. The results given in this report were obtained at the time of the analysis and refer only to the particular sample submitted.
2. This result shall not be reproduced unless in full.
3. Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform	=	Refilling Station	Less than 1.1 or 0
MPN/100 ml. Fecal Coliform	=		Less than 1.1 or 0
Heterotrophic Plate Count	=		Less than 500 CFU/mL

Public Water Supplies	Less than 1.1 or 0
	Less than 1.1 or 0
	Less than 500 CFU/mL

Hemodialysis Centers	Less than 1.1 or 0
	Less than 1.1 or 0
	Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**  
Medical Technologist

\*Certificate No. WMLA-16-0496

Noted:

**CYNTHIA L. TERRADO**  
Quality Control Assurance Chief





# LEYTE METROPOLITAN WATER DISTRICT

A DOH ACCREDITED WATER TESTING LABORATORY

Accreditation No.: 13-001-06-LW-2

Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-2937	House Faucet Brgy. Cabugawan, Calbayog City	October 11, 2017 10:30 AM	October 12, 2017 4:00 PM	October 12, 2017 6:20 PM	<1.1	<1.1	0	PASSED
17-2938	House Faucet Brgy. Dinagan, Calbayog City	11:05 AM	4:00 PM	6:25 PM	<1.1	<1.1	0	PASSED

**Remarks:**

1. The results given in this report were obtained at the time of the analysis and refer only to the particular sample submitted.
2. This result shall not be reproduced unless in full.
3. Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform	=	Refilling Station	Less than 1.1 or 0
MPN/100 ml. Fecal Coliform	=		Less than 1.1 or 0
Heterotrophic Plate Count	=		Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

**KATHERINE T. GORZALES, RMT**  
Medical Technologist

\*Certificate No. WMLA-16-0496

Noted:

**CYNTHIA L. TERRADO**  
Quality Control Assurance Chief



# LEYTE METROPOLITAN WATER DISTRICT

A DOH ACCREDITED WATER TESTING LABORATORY

Accreditation No.: 13-001-08-LW-2

Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		October 11, 2017	October 12, 2017					
17-2939	House Faucet Brgy. Lonoy, Calbayog City	11:30 AM	4:00 PM	6:30 PM	<1.1	<1.1	0	PASSED
17-2940	House Faucet Brgy. Amampacang, Calbayog City	10:40 AM	4:00 PM	6:35 PM	<1.1	<1.1	0	PASSED

**Remarks:**

1. The results given in this report were obtained at the time of the analysis and refer only to the particular sample submitted.
2. This result shall not be reproduced unless in full.
3. Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform	=	Refilling Station
MPN/100 ml. Fecal Coliform	=	Less than 1.1 or 0
Heterotrophic Plate Count	=	Less than 1.1 or 0
	=	Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**

Medical Technologist

\*Certificate No. WMLA-16-0496

Noted:

**CYNTHIA L. TERRADO**

Quality Control Assurance Chief



# LEYTE METROPOLITAN WATER DISTRICT

A DOH ACCREDITED WATER TESTING LABORATORY

Accreditation No.: 13-001-08-LW-2

Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		October 11, 2017	October 12, 2017					
17-2941	House Faucet Brgy. Bante, Calbayog City	11:20 AM	4:00 PM	6:40 PM	<1.1	<1.1	0	PASSED
17-2942	House Faucet NHS Pumping Station, Calbayog City	2:00 PM	4:00 PM	6:45 PM	<1.1	<1.1	0	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform	=	Refilling Station	Less than 1.1 or 0
MPN/100 ml. Fecal Coliform	=		Less than 1.1 or 0
Heterotrophic Plate Count	=		Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

**KATHERINE L. BONZALES, RMT**  
Medical Technologist

\*Certificate No. WMLA-16-0496

Noted:

**CYNTHIA L. TERRADO**  
Quality Control Assurance Chief



# LEYTE METROPOLITAN WATER DISTRICT

A DOH ACCREDITED WATER TESTING LABORATORY

Accreditation No.: 13-001-08-LW-2

Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-2943	House Faucet Brgy. Dagum, Calbayog City	October 11, 2017 2:30 PM	October 12, 2017 4:00 PM	October 12, 2017 6:50 PM	<1.1	<1.1	0	PASSED
17-2944	House Faucet Pagbalican Pumping Station, Calbayog City	8:00 AM	4:00 PM	6:55 PM	<1.1	<1.1	0	PASSED

**Remarks:**

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- This result shall not be reproduced unless in full.
- Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform	=	Refilling Station	Less than 1.1 or 0
MPN/100 ml. Fecal Coliform	=	Public Water Supplies	Less than 1.1 or 0
Heterotrophic Plate Count	=	Hemodialysis Centers	Less than 1.1 or 0
			Less than 1.1 or 0
			Less than 500 CFU/mL
			Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**  
Medical Technologist

\*Certificate No. WMLA-16-0496

Noted:

**CYNTHIA L. TERRADO**  
Quality Control Assurance Chief



# LEYTE METROPOLITAN WATER DISTRICT

A DOH ACCREDITED WATER TESTING LABORATORY

Accreditation No.: 13-001-08-LW-2

Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-2945	House Faucet Oquendo District, Calbayog City	October 11, 2017	October 12, 2017					PASSED
		10:45 AM	4:00 PM	7:00 PM	<1.1	<1.1	0	
17-2946	House Faucet Brgy. Monbon (Sta. Margarita) Calbayog City	1:30 PM	4:00 PM	7:05 PM	<1.1	<1.1	0	PASSED

**Remarks:**

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- This result shall not be reproduced unless in full.
- Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform	=	Refilling Station	
		Less than 1.1 or 0	
MPN/100 ml. Fecal Coliform	=	Less than 1.1 or 0	
Heterotrophic Plate Count	=	Less than 500 CFU/mL	

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**  
Medical Technologist

Certificate No. WMLA-16-0436

Noted:

**CYNTHIA L. TERRADO**  
Quality Control Assurance Chief



# LEYTE METROPOLITAN WATER DISTRICT

A DOH ACCREDITED WATER TESTING LABORATORY

Accreditation No.: 13-001-08-LW-2

Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		October 11, 2017	October 12, 2017					
17-2947	House Faucet Brgy. Carayman, Calbayog City	1:40 PM	4:00 PM	7:10 PM	<1.1	<1.1	0	PASSED
17-2948	House Faucet Brgy. Pagbalican, Calbayog City	8:10 AM	4:00 PM	7:15 PM	<1.1	<1.1	0	PASSED
17-2949	House Faucet Brgy. Payahan, Calbayog City	3:30 PM	4:00 PM	7:20 PM	<1.1	<1.1	0	PASSED

- Remarks:
1. The results given in this report were obtained at the time of the analysis and refer only to the particular sample submitted.
  2. This result shall not be reproduced unless in full.
  3. Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform	=	Refilling Station	Less than 1.1 or 0
MPN/100 ml. Fecal Coliform	=		Less than 1.1 or 0
Heterotrophic Plate Count	=		Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**  
Medical Technologist

\*Certificate No. WMLA-16-0496

Noted:

**CYNTHIA L. TERRADO**  
Quality Control Assurance Chief



# LEYTE METROPOLITAN WATER DISTRICT

A DOH ACCREDITED WATER TESTING LABORATORY

Accreditation No.: 13-001-08-LW-2

Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **J.D. Avelino St. Calbayog City, Samar**

Submitted by: **Janice R. Maribojoc, RMT**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-3291	WTP Reservoir 1 Calbayog City, Samar	November 9, 2017 9:30 AM	November 15, 2017 4:00 PM	November 16, 2017 9:30 AM	<1.1	<1.1	2	PASSED
17-3292	WTP Reservoir 2 Calbayog City, Samar	10:00 AM	4:00 PM	9:35 AM	<1.1	<1.1	6	PASSED

**Remarks:**

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2. This result shall not be reproduced unless in full.
3. Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform	=	Refilling Station	Less than 1.1 or 0
MPN/100 ml. Fecal Coliform	=	Public Water Supplies	Less than 1.1 or 0
Heterotrophic Plate Count	=	Hemodialysis Centers	Less than 1.1 or 0
			Less than 500 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**

Medical Technologist

\*Certificate No. WMLA-16-0496

Noted:

**CYNTHIA L. TERRADO**  
Quality Control Assurance Chief



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Telefax No. (053) 332-7465/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **J.D. Avelino St. Calbayog City, Samar**

Submitted by: **Janice R. Maribojoc, RMT**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		November 9, 2017	November 15, 2017	November 16, 2017				
17-3293	House Faucet Oquendo Dist. Calbayog City, Samar	11:00 AM	4:00 PM	9:40 AM	<1.1	<1.1	0	PASSED
17-3294	House Faucet Tinambacan Sur Calbayog City, Samar	11:20 AM	4:00 PM	9:45 AM	<1.1	<1.1	0	PASSED

**Remarks:**

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- Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform	=	Refilling Station	Less than 1.1 or 0
MPN/100 ml. Fecal Coliform	=	Public Water Supplies	Less than 1.1 or 0
Heterotrophic Plate Count	=	Hemodialysis Centers	Less than 1.1 or 0
			Less than 500 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**

*Medical Technologist*

\*Certificate No. WMLA-16-0496

Noted:

**CYNTHIA L. TERRADO**

*Quality Control Assurance Chief*





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Telefax No. (053) 332-7465/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **J.D. Avelino St. Calbayog City, Samar**

Submitted by: **Janice R. Maribojoc, RMT**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-3295	House Faucet Brgy. Basud Calbayog City, Samar	November 9, 2017 11:40 AM	November 15, 2017 4:00 PM	November 16, 2017 9:50 AM	<1.1	<1.1	0	PASSED
17-3296	House Faucet Brgy. Ipaog Calbayog City, Samar	12:00 NN	4:00 PM	9:55 AM	<1.1	<1.1	0	PASSED

**Remarks:**

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- Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml Total Coliform	=	Refilling Station	Less than 1.1 or 0
MPN/100 ml Fecal Coliform	=		Less than 1.1 or 0
Heterotrophic Plate Count	=		Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**  
Medical Technologist

\*Certificate No. WMLA-16-0495

Noted:

**CYNTHIA L. TERRADO**  
Quality Control Assurance Chief



## LEYTE METROPOLITAN WATER DISTRICT

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Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

### BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City, Samar**

Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		November 9, 2017	November 15, 2017	November 16, 2017				
17-3297	House Faucet Brgy. Balud Calbayog City, Samar	4:00 PM	4:00 PM	10:00 AM	<1.1	<1.1	0	PASSED
17-3298	Faucet NHS Pumping Station Calbayog City, Samar	3:00 PM	4:00 PM	10:05 AM	<1.1	<1.1	1	PASSED

**Remarks:**

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- Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform	=	Less than 1.1 or 0	Public Water Supplies	Less than 1.1 or 0	Hemodialysis Centers	Less than 1.1 or 0
MPN/100 ml. Fecal Coliform	=	Less than 1.1 or 0		Less than 1.1 or 0		Less than 1.1 or 0
Heterotrophic Plate Count	=	Less than 500 CFU/mL	Refilling Station	Less than 500 CFU/mL		Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**

Medical Technologist

\*Certificate No. WMLA-16-0495

Noted:

**CYNTHIA L. TERRADO**  
 Quality Control Assurance Chief



# LEYTE METROPOLITAN WATER DISTRICT

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Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **J.D. Avelino St. Calbayog City, Samar**

Submitted by: **Janice R. Maribojoc, RMT**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-3299	Faucet Fulgencio Pumping Station Calbayog City, Samar	November 9, 2017 7:40 AM	November 15, 2017 4:00 PM	November 16, 2017 10:10 AM	<1.1	<1.1	2	PASSED
17-3300	Faucet Pagbalican Pumping Station Calbayog City, Samar	1:30 PM	4:00 PM	10:15 AM	<1.1	<1.1	0	PASSED

**Remarks:**

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- Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform	=	Less than 1.1 or 0
MPN/100 ml. Fecal Coliform	=	Less than 1.1 or 0
Heterotrophic Plate Count	=	Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

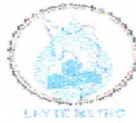
**KATHERINE L. FONSECALES, RMT**

Medical Technologist

Certificate No. WMLA-16-0498

Noted:

**CYNTHIA L. TERRADO**  
Quality Control Assurance Chief



# LEYTE METROPOLITAN WATER DISTRICT

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Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **J.D. Avelino St. Calbayog City, Samar**

Submitted by: **Janice R. Maribojoc, RMT**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-3301	House Faucet Brgy. West Awang Calbayog City, Samar	November 9, 2017 3:35 PM	November 15, 2017 4:00 PM	November 16, 2017 10:20 AM	<1.1	<1.1	1	PASSED
17-3302	House Faucet Brgy. Dagum Calbayog City, Samar	1:40 PM	4:00 PM	10:25 PM	<1.1	<1.1	16	PASSED

**Remarks:**

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MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform	=	Refilling Station	Less than 1.1 or 0
MPN/100 ml. Fecal Coliform	=	Public Water Supplies	Less than 1.1 or 0
Heterotrophic Plate Count	=	Hemodialysis Centers	Less than 1.1 or 0
			Less than 500 CFU/mL

Analyst:

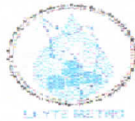
**KATHERINE L. GONZALES, RMT**

Medical Technologist

\*Certificate No. WMLA-16-0496

Noted:

**CYNTHIA L. TERRADO**  
Quality Control Assurance Chief



### LEYTE METROPOLITAN WATER DISTRICT

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Telefax No. (053) 332-7465/332-7424

### BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **J.D. Avelino St. Calbayog City, Samar**

Submitted by: **Janice R. Maribojoc, RMT**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
17-3303	House Faucet Brgy. Morbon (Sta. Margarita) Calbayog City, Samar	November 9, 2017 2:05 PM	November 15, 2017 4:00 PM	November 15, 2017 10:30 AM	<1.1	<1.1	0	PASSED
17-3304	House Faucet Brgy. Burabod, Calbayog City, Samar	2:20 PM	4:00 PM	10:35 PM	<1.1	<1.1	0	PASSED

**Remarks:**

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MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform	=	Refilling Station	Less than 1.1 or 0
MPN/100 ml. Fecal Coliform	=		Less than 1.1 or 0
Heterotrophic Plate Count	=		Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

**KATHERINE V. GONZALES, RMT**

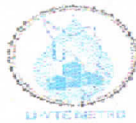
Medical Technologist

Certificate No. WMLA-16-0496

Noted:

**CYNTHIA L. TERRADO**

Quality Control Assurance Chief



## LEYTE METROPOLITAN WATER DISTRICT

A DOH ACCREDITED WATER TESTING LABORATORY

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Telefax No. (053) 332-7465/332-7424

### BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City, Samar**

Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		November 9, 2017	November 15, 2017	November 16, 2017				
17-3305	House Faucet Brgy. Payahan Calbayog City, Samar	5:10 PM	4:00 PM	10:40 AM	<1.1	<1.1	0	PASSED

- Remarks:
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  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

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CFU = Colony Forming Unit

MPN/100 ml. Total Coliform	=	Refilling Station	Less than 1.1 or 0
MPN/100 ml. Fecal Coliform	=		Less than 1.1 or 0
Heterotrophic Plate Count	=		Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**

Medical Technologist

\*Certificate No. WMLA-16-0496

Noted:

**CYNTHIA L. TERRADO**  
 Quality Control Assurance Chief



# LEYTE METROPOLITAN WATER DISTRICT

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Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		December 4, 2017	December 5, 2017					
17-3527	House Faucet Tinambacan Norte, Calbayog City	10:30 AM	3:55 PM	5:20 PM	<1.1	<1.1	0	PASSED
17-3528	House Faucet Brgy. Cagsalaosao, Calbayog City	11:00 AM	3:55 PM	5:25 PM	<1.1	<1.1	0	PASSED

- Remarks:
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  2. This result shall not be reproduced unless in full.
  3. Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

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MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform = Refilling Station  
 Less than 1.1 or 0

MPN/100 ml. Fecal Coliform = Less than 1.1 or 0

Heterotrophic Plate Count = Less than 500 CFU/mL

Public Water Supplies  
 Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers  
 Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**  
Medical Technologist

\*Certificate No. WMLA-16-0496

Noted:

**CYNTHIA L. TERRADO**  
Quality Control Assurance Chief



# LEYTE METROPOLITAN WATER DISTRICT

A DOH ACCREDITED WATER TESTING LABORATORY

Accreditation No.: 13-001-08-LW-2

Rapid Filtration Plant, Brgy. Hibunawon, Jaro, Leyte

Telefax No. (053) 332-7465/332-7424

## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
Address: **J.D. Avejino St. Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		December 4, 2017	December 5, 2017					
17-3529	House Faucet Brgy. Rawis, Calbayog City	4:15 PM	3:55 PM	5:30 PM	<1.1	<1.1	0	PASSED
17-3530	House Faucet Brgy. Carayman, Calbayog City	3:45 PM	3:55 PM	5:35 PM	<1.1	<1.1	0	PASSED
17-3531	House Faucet Brgy. Payahan, Calbayog City	5:15 PM	3:55 PM	5:40 PM	<1.1	<1.1	0	PASSED

- Remarks:
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  - This result shall not be reproduced unless in full.
  - Test Method Used: Multiple Tube Fermentation Technique & Pour Plate Method.

Philippine National Standards for Drinking Water (PNSDW)

MPN = Most Probable Number

CFU = Colony Forming Unit

MPN/100 ml. Total Coliform	=	Refilling Station	Less than 1.1 or 0
MPN/100 ml. Fecal Coliform	=	Public Water Supplies	Less than 1.1 or 0
Heterotrophic Plate Count	=	Hemodialysis Centers	Less than 1.1 or 0
			Less than 500 CFU/mL

MPN/100 ml. Total Coliform	=	Refilling Station	Less than 1.1 or 0
MPN/100 ml. Fecal Coliform	=	Public Water Supplies	Less than 1.1 or 0
Heterotrophic Plate Count	=	Hemodialysis Centers	Less than 1.1 or 0
			Less than 500 CFU/mL

MPN/100 ml. Total Coliform	=	Refilling Station	Less than 1.1 or 0
MPN/100 ml. Fecal Coliform	=	Public Water Supplies	Less than 1.1 or 0
Heterotrophic Plate Count	=	Hemodialysis Centers	Less than 1.1 or 0
			Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**  
Medical Technologist

\*Certificate No. WMLA-16-0496

Noted:

**CYNTHIA L. TERRADO**  
Quality Control Assurance Chief





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## BACTERIOLOGICAL TEST RESULT FOR WATER

Name of Client: **CALBAYOG WATER DISTRICT**  
 Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
 Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		December 4, 2017	December 5, 2017					
17-3517	WTP Reservoir 1 Calbayog City	9:10 AM	3:55 PM	4:30 PM	<1.1	<1.1	6	PASSED
17-3518	WTP Reservoir 2 Calbayog City	9:35 AM	3:55 PM	4:35 PM	<1.1	<1.1	7	PASSED

**Remarks:**

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 Less than 1.1 or 0  
 MPN/100 ml. Fecal Coliform = Less than 1.1 or 0  
 Heterotrophic Plate Count = Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

*Katherine L. Gonzales*  
**KATHERINE L. GONZALES, RMT**  
 Medical Technologist

\*Certificate No. WMLA-16-0496

Noted:

*Cynthia L. Terrado*  
**CYNTHIA L. TERRADO**  
 Quality Control Assurance Chief



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## BACTERIOLOGICAL TEST RESULT FOR WATER

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Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		December 4, 2017	December 5, 2017					
17-3525	House Faucet Brgy. Guin-on, Calbayog City	1:50 PM	3:55 PM	5:10 PM	<1.1	<1.1	0	PASSED
17-3526	House Faucet Brgy. Bliss, Calbayog City	11:15 AM	3:55 PM	5:15 PM	<1.1	<1.1	1	PASSED

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 Less than 1.1 or 0

MPN/100 ml. Fecal Coliform = Less than 1.1 or 0

Heterotrophic Plate Count = Less than 500 CFU/mL

Public Water Supplies  
 Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers  
 Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**  
Medical Technologist

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Quality Control Assurance Chief



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Address: **J.D. Avelino St. Calbayog City**

Submitted by: **Janice R. Maribojoc, RMT**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		December 4, 2017		December 5, 2017				
17-3523	Fulgencio Pumping Station Calbayog City	7:55 AM	3:55 PM	5:00 PM	<1.1	<1.1	5	PASSED
17-3524	House Faucet Brgy. East Awang, Calbayog City	4:25 AM	3:55 PM	5:05 PM	<1.1	<1.1	0	PASSED

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CFU = Colony Forming Unit

MPN/100 ml. Total Coliform	=	Refilling Station	Less than 1.1 or 0
MPN/100 ml. Fecal Coliform	=		Less than 1.1 or 0
Heterotrophic Plate Count	=		Less than 500 CFU/mL

Public Water Supplies	Less than 1.1 or 0
	Less than 1.1 or 0
	Less than 500 CFU/mL

Hemodialysis Centers	Less than 1.1 or 0
	Less than 1.1 or 0
	Less than 200 CFU/mL

Analyst:

**KATHERINE L. GONZALES, RMT**  
Medical Technologist

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Submitted by: **Janice R. Maribojoc, RMT**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		December 4, 2017		December 5, 2017				
17-3521	NHS Pumping Station Calbayog City	4:10 PM	3:55 PM	4:50 PM	<1.1	<1.1	0	PASSED
17-3522	Pagbalican Pumping Station Calbayog City	7:30 AM	3:55 PM	4:55 PM	<1.1	<1.1	0	PASSED

- Remarks:
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MPN/100 ml. Total Coliform	=	Refilling Station	Less than 1.1 or 0
MPN/100 ml. Fecal Coliform	=		Less than 1.1 or 0
Heterotrophic Plate Count	=		Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

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Submitted by: **Janice R. Maribojoc, RMT**  
Contact No.:

Lab. No.	Sample Source and Address	Date and Time of:			Result of Analysis			Remarks
		Collection	Receipt	Examination	Total (MPN)	Fecal (MPN)	HPC (CFU/ML)	
		December 4, 2017	December 5, 2017					
17-3519	House Faucet Brgy. Aguit-itan, Calbayog City	1:10 PM	3:55 PM	4:40 PM	<1.1	<1.1	1	PASSED
17-3520	House Faucet Brgy. Bagacay, Calbayog City	4:00 PM	3:55 PM	4:45 PM	<1.1	<1.1	0	PASSED

- Remarks:
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MPN/100 ml. Fecal Coliform	=		Less than 1.1 or 0
Heterotrophic Plate Count	=		Less than 500 CFU/mL

Public Water Supplies

Less than 1.1 or 0

Less than 1.1 or 0

Less than 500 CFU/mL

Hemodialysis Centers

Less than 1.1 or 0

Less than 1.1 or 0

Less than 200 CFU/mL

Analyst:

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