

**240536 PA Dept of Ag RTK Shepherd's Touch Farm
Retail Food Applications and Inspection Reports**

****No Meat Establishment License***



pennsylvania
DEPARTMENT OF AGRICULTURE

May 21, 2024

Ms. Jenny Stephens
Bucks County Beacon
868 West Street Road #313
Warminster PA 18974

Re: Right-to-Know Law Request No. 240536

Dear Ms. Stephens:

On May 15, 2024, the Agency Open Records Officer of the Pennsylvania Department of Agriculture (PDA) received your request for information pursuant to the Pennsylvania Right-To-Know Law, 65 P.S. §§ 67.101, et seq. (RTKL). Your request is as follows:

Please consider this a formal request under Pennsylvania's Right-to-Know Law, 65 P.S. §67.101 *et seq.*, (hereinafter "RTK") for the following records, which includes records maintained in electronic format.

Please provide a copy of all license applications, including those to renew an existing license, along with any required attachments that accompanied the license applications, submitted to the Pennsylvania Department of Agriculture to operate as a meat establishment, farm and retail food facility for the time period January 1, 2018 through March 31, 2024 by:

Shepherd's Touch Farm LLC
Ephraim Stoltzfus
233 Gunhart Road
Mohnton PA 19540

Additionally, please provide any inspection reports, citations for failing to comply with Title 3 of the Pennsylvania Statutes, and any consent decree(s) for the period January 01, 2018 through March 31, 2024.

As I am requesting electronic copies, I would like to request a waiver of all fees in that the disclosure of the requested information is in the public interest. The Pennsylvania Right to Know Law requires a response time within five business days. If access to the records I am requesting will take longer than this amount of time, please contact me with information as to when I might expect access to the requested records.

Should you deny any or all of this request, please cite each specific exemption you feel justifies the refusal to release the information.

To the extent that records are in the possession, custody or control of PDA, your request is granted in part and denied in part. Attached you will find a Farmers' Market Retail Food Facility license application, license and inspection report for your review. No other records were located in response to this request. PDA has withheld specific information that is exempt from disclosure by law, as follows:

- A record containing all or part of a person's Social Security number; driver's license number; personal financial information; home, cellular or personal telephone numbers; personal e mail addresses; employee number or other confidential personal identification number is exempt pursuant to Section 67.708(b)(6)(i)(A) of the Pennsylvania *Right-To-Know Law* 65 P.S. §§ 67.101, *et seq.*

No records were located regarding violations or a meat establishment farm. Therefore, PDA does not have these records in its possession custody or control. Pursuant to the Office of Open Records Final Decision in *Jenkins vs. Pennsylvania Department of State*, Docket # AP 2009-065, it should be noted that: "It is not a denial of access when an agency does not possess records and [there is no] legal obligation to obtain them (see, e.g. section 67.506 (d)(1))."

PDA is permitted to charge up to \$.25 cents per page for requested documents. In accordance with the policy that a fee will not be assessed when records are produced and provided electronically, or for requests of 20 or less pages, no fee is due.

If you believe this response is a denial of access to records, you may file an appeal in writing to the Executive Director, Office of Open Records (OOR), 333 Market Street, 16th Floor, Harrisburg, PA 17101-2234. If you choose to file an appeal you must do so within 15 business days of the mailing date of this response.

In order to appeal, you must send to the OOR and simultaneously to me, in the same manner as the appeal is sent to the Office of Open Records (e-mail, fax, mail or hand delivery):

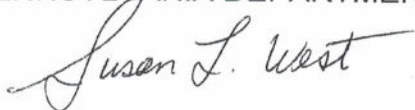
- 1) This response;
- 2) Your request;
- 3) The appeal form that is available on the OOR website at:
<https://www.openrecords.pa.gov/Appeals/AppealForm.cfm>

You must also include on the appeal form the reasons why you think the Agency was wrong in its response to your request and what relief or agency action you are seeking. All of the above must be submitted for your appeal to be valid.

Please let me know if you have any questions related to this response.

Very truly yours,

PENNSYLVANIA DEPARTMENT OF AGRICULTURE

A handwritten signature in cursive script that reads "Susan L. West".

Susan West, Agency Open Records Officer
2301 North Cameron Street
Harrisburg, PA 17110
Telephone: (717) 787-5653
suewest@pa.gov

Attachment

Retail Food Facility Inspection Report

Facility: SHEPHERD'S TOUCH FARM **Facility ID:** 172784
Owner: EPHRAIM STOLTZFUS
Address: 233 Gunhart RD
City/State: Mohnton PA
Zip: 19540 **County:** Berks **Region:** Territory 7S
Phone: (717) 471-7773

Insp. ID: 1047441
Insp. Date: 3/8/2024
Insp. Reason: Opening
No. of Risk Factors: 0
No. of Repeat Risk Factors: 0
Overall Compliance: IN

FOODBORNE ILLNESS RISK FACTORS AND PUBLIC HEALTH INTERVENTIONS

Risk Factors are important practices and procedures identified as the most prevalent contributing factors of foodborne illness or injury.
Public Health Intervention are control measures to prevent foodborne illness or injury.

IN = In Compliance, OUT = Out of Compliance, N/O = Not Observed, N/A = Not Applicable, C = Corrected On Site, R = Repeat Violation

Supervision		Protection From Contamination	
1. Person in charge present, demonstrates knowledge, & performs duties	In	14. Food separated & protected	In
Employee Health		15. Food-contact surfaces: cleaned & sanitized	N/A
2. Management, food employee & conditional food employee knowledge, responsibilities & reporting	In	16. Proper disposition of returned, previously served, reconditioned, & unsafe food	In
3. Proper use of restriction & exclusion	In	Time/Temperature Control for Safety	
4. Procedure for responding to vomiting & diarrheal events	In	17. Proper cooking time & temperatures	N/A
Good Hygienic Practices		18. Proper reheating procedures for hot holding	N/A
5. Proper eating, tasting, drinking, or tobacco use	In	19. Proper cooling time & temperatures	N/A
6. No discharge from eyes, nose, & mouth	In	20. Proper hot holding temperatures	N/A
Preventing Contamination by Hands		21. Proper cold holding temperatures	In
7. Hands clean & properly washed	N/O	22. Proper date marking & disposition	N/A
8. No bare hand contact with RTE food or a pre-approved alternate method properly followed	N/A	23. Time as a public health control: procedures & records	N/A
9. Adequate handwashing sinks properly supplied & accessible	In	Consumer Advisory	
Approved Source		24. Consumer advisory provided for raw / undercooked foods	N/A
10. Food obtained from approved source	In	Highly Susceptible Population	
11. Food received at proper temperature	N/O	25. Pasteurized foods used; prohibited foods not offered	N/A
12. Food in good condition, safe, & unadulterated	In	Food/Color Additives & Toxic Substances	
13. Required records available: shellstock tags, parasite destruction	N/A	26. Food additives: approved & properly used	N/A
		27. Toxic substances properly identified, stored & used; held for retail sale, properly stored	In
		Conformance with Approved Procedures	
		28. Compliance with variance, specialized process, reduced oxygen packaging criteria or HACCP plan	N/A

GOOD RETAIL PRACTICES

Good Retail Practices are preventative measures to control the addition of pathogens, chemicals, and physical objects into foods.

Safe Food & Water		Proper Use of Utensils	
29. Pasteurized eggs used where required	In	42. In-use utensils: properly stored	In
30. Water & ice from approved source	In	43. Utensils, equipment & linens: properly stored, dried & handled	In
31. Variance obtained for specialized processing methods	In	44. Single-use/single-service articles: properly stored & used	In
Food Temperature Control		45. Gloves used properly	In
32. Proper cooling methods used; adequate equipment for temperature control	In	Utensils, Equipment & Vending	
33. Plant food properly cooked for hot holding	In	46. Food & non-food contact surfaces cleanable, properly designed, constructed, & used	In
34. Approved thawing methods used	In	47. Warewashing facilities: installed, maintained & used; test strips	In
35. Thermometers provided & accurate	In	48. Non-food contact surfaces clean	In
Food Identification		Physical Facilities	
36. Food properly labeled; original container	In	49. Hot & cold water available; adequate pressure	In
Prevention of Food Contamination		50. Plumbing installed; proper backflow devices	In
37. Insects, rodents & animals not present	In	51. Sewage & waste water properly disposed	In
38. Contamination prevented during food preparation, storage & display	In	52. Toilet facilities: properly constructed, supplied, cleaned	In
39. Personal cleanliness	In	53. Garbage/refuse properly disposed; facilities maintained	In
40. Wiping cloths: properly used & stored	In	54. Physical facilities installed, maintained, & clean	Out
41. Washing fruit & vegetables	In	55. Adequate ventilation & lighting; designated areas used	In

FOOD EMPLOYEE CERTIFICATION

Certified Food Employee		Certificate	
56. Certified Food Employee employed; acts as PIC; accessible	Ex	57. Certified food manager certificate: valid & properly displayed	Ex

Visit Date	Person In Charge	Person In Charge Signature	Sig. Date	Sanitarian	Sanitarian Signature	Sig. Date	Time In	Time Out
3/8/2024	Ephraim Stoltzfus (Posted)		3/8/2024	Thomas Merkel		3/8/2024	9:00 AM	10:00 AM

Retail Food Facility Inspection Report**Facility:** SHEPHERD'S TOUCH FARM **Facility ID:** 172784**Owner:** EPHRAIM STOLTZFUS**Address:** 233 Gunhart RD**City/State:** Mohnnton PA**Zip:** 19540 **County:** Berks **Region:** Territory 7S**Phone:** (717) 471-7773**Insp. ID:** 1047441**Insp. Date:** 3/8/2024**Insp. Reason:** Opening**No. of Risk Factors:** 0**No. of Repeat Risk Factors:** 0**Overall Compliance:** IN**OBSERVATIONS AND CORRECTIVE ACTIONS**

Violations cited in this report must be corrected within the timeframes below

Item Number	Violation of Code	Comment	Correct By Date	Repeat Violation
54.	6 - 501.12	The floor area of the retail food facility is extremely dirty and in need of cleaning.	3/9/2024	

PUBLISHED COMMENTS

This is the initial inspection of this retail space. The space is a separate room at the end of the firm's custom slaughter barn. Firm is to continue to maintain a clean access area to the store entrance.

The firm is being licensed to only sell prepackaged shelf stable and refrigerated food items.

well water test: 1/29/2024.

Received Bird in Hand Band check # 13359 in the amount of \$103 made payable to the Commonwealth of PA for licensing fees.

Owner expressed interest in the near future to expand the retail space into a separate shed structure with a food handling room. Owner was instructed to contact the department when they start moving forward with those plans.

This report was reviewed with the person in charge and a copy was provided.

COMMONWEALTH OF PENNSYLVANIA
DEPARTMENT OF AGRICULTURE
BUREAU OF FOOD SAFETY AND LABORATORY SERVICES

6 MONTH
RETAIL FOOD FACILITY LICENSE

License No:
218308

Business Name:
SHEPHERD'S TOUCH FARM

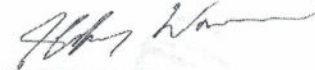
Business Address:
233 GUNHART RD
MOHNTON, PA 19540

Expiration Date:
3/8/2025

Owner's Name:
EPHRAIM STOLTZFUS

Signature (applicant)

Director



LICENSE IS NON-TRANSFERABLE

UNOFFICIAL COPY

Presorted First
Class
U.S. Postage
PAID
PA Department
of Agriculture

SHEPHERD'S TOUCH FARM
233 GUNHART RD
MOHNTON, PA 19540

RETAIL FOOD FACILITY LICENSE APPLICATION
FARMERS MARKETS

Facility # 172784

7 Pa. Code, Chapter 46, Food Code, the Rules and Regulations of the PA Department of Agriculture, are issued under the Retail Food Facility Safety Act (3 Pa. C.S.A. §§5701 - 5714) and require that properly prepared plans and specifications for construction, remodeling or alteration of a retail food facility must be submitted to and approved by the Department before food can be prepared, served and sold. PDA follows the most current version of the FDA Model Food Code as its regulations. The Retail Food Facility Safety Act also requires that "New" Proprietors, or Owners, of a Retail Food Facility apply for licensing as all licenses are non-transferable between proprietors.

SECTION 1:

FACILITY OPENING:

Anticipated date of opening/operation for the facility: 3-11-24 (date)

PURPOSE OF THE PLAN REVIEW

LICENSE TYPE: Retail Food Facility - Farmers Market Vendor

PART A: Facility is:

- ☒ Within a permanent structure/building
☐ Parking lot or open air market

PART B: Reason for review:

- ☒ New license for a new food vendor
☐ Other, describe _____

SECTION 2:

NAME OF VENDOR (Vendor Business Name):

Shepherd's Touch Farm

NAME OF FARMERS MARKET (Markets you intend to sell from):

NON-MOBILE: I will be located and selling at the following Farmers Market:

I will be located and selling at the following Farmer's market

MOBILE (selling at multiple markets): DO NOT USE THIS APPLICATION. Complete the Application Packet for Mobile Food Facilities.

LOCATION OF MARKET (non-mobile vendors) or BUSINESS LOCATION:

233 gunhart Rd
Street number and name

Mohnton
City

PA
State

19540
Zip code

Berks County
County

Cumru Township
Township/Borough

Phone number

(717) 438 5500
Facility fax number

Shepherd's touch farm@gmail.com
Email address

cell number or alternate phone number

RETAIL FOOD FACILITY LICENSE APPLICATION
FARMERS MARKETS

SECTION 5:

MARKET STAND LAY OUT & EQUIPMENT LIST

All other vendors must **SUBMIT** copies of:

- Vendor stand floor plan/layout
- Location of all food service equipment (even if minimal)
- List of equipment including manufacture's names and model numbers
- Location of handwashing and warewashing sinks (if applicable)
- Restroom locations
- Surface or materials for floors, walls and ceilings (overhead protection) even if temporary
- Site plan showing the location of the vendor stand within the market

Plans may be hand drawn, but must be to approximate scale, neat and legible. Plans will **NOT** be returned. See "Application Instructions" for your guidance on completing this section of the application.

SECTION 6:

ZONING AND OTHER CODES

BUILDING CODES AND ZONING:

☒ ☐ Market stand is compliant with local zoning/business requirements. *Small Farm Stand*

☒ ☐ Market building/structure is compliant with **all** building Code requirements (electrical, plumbing, ventilation, structural, etc.) where applicable. *Small Farm Stand*

SALES TAX: Select one:

☐ A license to collect sales tax has been obtained or applied for. For information on applying for a sales tax license, contact the Pennsylvania Department of Revenue at (717) 787-8201. A copy of the sales tax license or proof of application is attached to this application

☒ According to the PA Department of Revenue rules and regulations, I have determined that my business is exempt from collection of sales tax.

RETAIL FOOD FACILITY LICENSE APPLICATION
FARMERS MARKETS

MAILING ADDRESS (if different than above):

233 Lunkert Rd Mohnton PA 19540
Street number and name City State Zip code

RESPONSIBLE OFFICIAL AT THE FARMERS MARKET (if not the owner):

Ephraim Soltzews Owner
Name Title

SECTION 3:

FARM MARKET / FACILITY SERVICE INFORMATION

TYPE OF SERVICE: Check ALL that apply:

☒ **Pre-packaged foods:** Items come to the market in packages/containers/wrappings only; no food handling/packaging takes place at the market

- | | | |
|---|--|--|
| <input checked="" type="checkbox"/> Deli meat or cheese | <input checked="" type="checkbox"/> Candy | <input checked="" type="checkbox"/> Maple products |
| <input checked="" type="checkbox"/> Raw meats | <input checked="" type="checkbox"/> Drink mixes | <input checked="" type="checkbox"/> Honey & related products |
| <input checked="" type="checkbox"/> Deli salads | <input checked="" type="checkbox"/> Dried herbs/spices | <input checked="" type="checkbox"/> Acidified canned goods |
| <input checked="" type="checkbox"/> Eggs | | |
| <input type="checkbox"/> Baked goods, list: _____ | | |
| <input type="checkbox"/> Other, describe: _____ | | |

☐ **NON Pre-packaged foods:** Product did not come to the market in a packaged form; packaging and handling takes place at the market

- ☐ Baked goods ☐ Deli meat or cheese ☐ Raw meats ☐ Candy ☐ Cut Melons or other fruits
☐ Other, describe: _____

EMPLOYEE INFORMATION:

Do you have a Certified Food Manager on Staff?

- ☐ YES - Attach copy of certificate
☒ NO
☐ Exempt (non-profit) or other exempt facility
☐ Exempt, commercially pre-packaged foods only
☐ Exempt, all non-TCS foods

Do you have an employee health policy? ☐ YES ☒ NO

Do you have a written employee policy for cleanup of vomiting or diarrheal events in the facility? ☐ YES ☒ NO

RETAIL FOOD FACILITY LICENSE APPLICATION
FARMERS MARKETS

SECTION 7:

The Applicant understands and agrees that this document is an application for licensure of a retail food facility. The applicant understands and agrees that only a "proprietor" of a retail food facility may obtain a retail food facility license; and that a "The Applicant understands and agrees that this document is an application for licensure of a retail food facility. The applicant understands and agrees that only a "proprietor" of a retail food facility may obtain a retail food facility license; and that a "proprietor" may be a person, partnership, association or corporation operating a retail food facility within the Commonwealth of Pennsylvania. The applicant verifies by signature below, that they are the "proprietor" of the retail food facility that is the subject of this application. The applicant verifies that all statements and information in this application is true and correct to the best of the applicant's knowledge, information and belief; and makes these statements subject to the penalties of 18 Pa.C.S.A. §4904, relating to unsworn falsification to authorities.

☒ **INDIVIDUAL PERSON:**

Ephraim Z. Steffens
Signature

Ephraim Z Steffens
Legibly Print Name

3-6-24 2-29-80
Date Date of Birth

☐ **PARTNERSHIP:**

Signature - General Partner

Legibly Print Name

Date Date of Birth

Signature - General Partner

Legibly Print Name

Date Date of Birth

☐ **CORPORATION OR ASSOCIATION / NON-PROFIT ENTITY:**

Name of Corporation or Non-Profit Entity

Name of current CEO/President/or similar

Official Title

Date of Birth of CEO/President/or similar

Signature of Corporate / Association / Non-Profit Official

Official Title of Signatory

Legibly Print Name

Date

☐ **LIMITED LIABILITY COMPANY (LLC) OR LIMITED LIABILITY PARTNERSHIP (LLP):**

Name of LLC or LLP

Name of Senior Official/General Partner, or Similar

Official Title

Date of Birth of Senior Official/General Partner, or Similar

Signature - Member

Date

Signature - Member

Date

Legibly Print Name

Legibly Print Name

RETAIL FOOD FACILITY LICENSE APPLICATION
FARMERS MARKETS

LEGAL BUSINESS NAME (if different than facility name):

Ephraim Stoltzfus

LEGAL OWNER MAILING ADDRESS (if different than above mailing address):

233 Gunter Rd
Owner street number and name

Mohnton
City

PA
State

19540
Zip code

[REDACTED]
Owner phone number

(717) 438 5500
Owner fax number

Ephraim @ KingdomLivestock.com
Owner e-mail address

SECTION 8: ALL APPLICANTS READ AND SIGN

All material must be submitted at least **60 days prior** to the preparation/sale of food from a retail food facility. Failure to provide all required information could delay your plan review.

Please check and sign you have included all required supporting documentation along with submission of the completed application.

Section 3:

I have attached the following supporting documents:

- ☐ Food Employee Certification N/A

Section 4:

I have attached proof of municipal water supply OR I have contacted DEP and attached my approval letter OR I have attached my non-public water supply results and affidavit/DEP documentation. **Failure to provide written proof from DEP will result in denial of plans from this Department**

- ☐ Proof of municipal water supply (ex. A copy of a water bill)
OR
☐ DEP Approval Letter for a non-community public water system
OR
☒ Non-public water supply results **AND** affidavit / DEP documentation

Section 5:

I have attached the following supporting documents:

- ☒ Vendor floorplan / layout* [REDACTED]
☐ Location of all food service equipment
☐ List of equipment including manufacture's names and model numbers

Section 6:

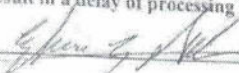
I have attached the following supporting documents:

- ☐ Sales tax license or proof of application
OR
☒ According to the PA Department of Revenue rules and regulations, I have determined that my business is exempt from collection of sales tax.
☐ I certify the facility is compliant with sales tax licensing.

RETAIL FOOD FACILITY LICENSE APPLICATION
FARMERS MARKETS

*plans may be hand drawn, but must be to approximate scale, neat and legible. Plans will **NOT** be returned.

I have attached all required documentation for each section outlined above that are applicable to this plan review application. I have signed all applicable individual sections within the application. **Failure to provide documentation or sign all sections will result in a delay of processing and/or the application may be denied.**

Applicant Signature: 

The Department of Agriculture will review the plans and notify you of its approval/disapproval. Please allow **4-6 weeks** for processing. Once you receive your approval, notify your Food Inspector or regional office at least ten (10) days prior to operation to arrange a licensing inspection. Inquiries regarding your application status should be directed to 717-787-4315 or RA-AGPlanReview@pa.gov.

All material **must be fully completed** and returned with any necessary accompanying documentation to:

RA-AGPLANREVIEW@pa.gov

or mail / fax to:

**Pennsylvania Department of Agriculture
Bureau of Food Safety and Laboratory Services
Attn: Plan Review
2301 N. Cameron St, Room 112
Harrisburg, PA 17110**

Fax: 717-787-1873

*If your county is under a County Health Department Jurisdiction, you should contact them directly for licensing. These counties include Allegheny, Bucks, Chester, Delaware, Erie, Montgomery, and Philadelphia.

There are NO fees associated with this Plan Review Application. DO NOT SEND MONEY WITH THIS APPLICATION.

License fees will be collected at the time of the licensing inspection pending the facility is compliant with all Food Safety laws and regulations. The fees are as follows (payable to: Commonwealth of PA):

License Fee Exemptions (not exempt from inspections)

- Pre-packaged non-TCS (time and temperature control for safety) foods ONLY
- Raw agricultural commodities ONLY

Retail Food License

- New Licenses:
 - Under 50 seats AND Owner Operated – **\$103**

Other fees

- Annual Renewals – \$82
- 2nd Follow-up Inspection – \$150
- 3rd or Subsequent Follow-up Inspection – \$300
- Duplicate License – \$14
- Courtesy Inspection – \$150

RETAIL FOOD FACILITY LICENSE APPLICATION **FARMERS MARKETS**

The following chart/schedules are for your optional use. Complete and submit with your plans ALL facility details and equipment schedules

FLOORS, WALLS, CEILINGS SCHEDULE

	Wall Finishes	Floor Finishes	Ceiling Finishes
Example	Drop down screening	Linoleum	Overhead tarp
Kitchen/Cooking Food Prep			
Sales Area	Concrete	Concrete	Painted ceiling
Dry Storage			
Warewashing			

Notes: _____

LIGHTING SCHEDULE

If lighting is not provided due to outside/natural lighting, please indicate such.

	Foot Candles (fc)	Arrangement	Cleaning and Service	Shielding and Protection
Example	35 fluorescent overhead lights	35 fluorescent lights spaced 4' apart	Routine monthly cleaning	Protected by plastic sheaths and end caps
Preparation/Work Area	N/A			
Storage	N/A			
Serving	N/A			
Dining Area	N/A			
Special	N/A			

Notes: _____

RETAIL FOOD FACILITY LICENSE APPLICATION
FARMERS MARKETS

EQUIPMENT SCHEDULE

provide a scaled layout drawing of all equipment, even if minimal, in the retail food facility. Complete the following list of equipment and submit with your plans.

Item No.	Type of Equipment	Manufacturer's Name	Model No.	Quantity
Example	Freezer Refrigerator	Hobart QBD	ABC124 GDS-47-HC	1 1



Report of Analysis

Mail to: Kingdom Livestock
233 Gunhart Rd
Mohnton PA 19540

Lab Number: 412445-01
Date Reported: 02/01/2024

Analyte	Result	Pass/Fail	Maximum Contaminant Level	Analysis					Reporting Limit
				Date	Time	Analyst	Method		
Sampled: 01/29/2024 14:43 - Sampler: Seth Kulp - Source: Outdoor Tap - Kingdom Livestock 233 Gunhart Road - Mohnton PA 19540									
Bacteria - Total Coliform	<1 MPN/100ml	Pass	0 MPN/100ml	01/30/2024	14:10	emm	SM6223	0	
Coliform bacteria are a large group of bacteria that are used as an indicator organism to indicate the potential for disease-causing bacteria to be present in water. Coliform bacteria occur frequently in private water systems, usually from contamination by surface runoff or from human or animal wastes. Consuming water with coliform bacteria present may cause gastrointestinal illnesses, fever, and other flu-like symptoms. Results from coliform bacteria tests are normally expressed as the number of bacteria colonies present per 100 milliliters (mL) of water.									
Bacteria - E. coli	<1 MPN/100ml	Pass	0 MPN/100ml	01/30/2024	14:10	emm	SM6223	0	
E. coli (short for Escherichia coli) is a more specific bacteria. This is a type of fecal coliform bacteria commonly found in the intestines of animals and humans. A positive E. coli result is a strong indication that human sewage or animal waste has contaminated the water. E. coli can produce a powerful toxin that causes severe illness and even death.									

This sample was collected by a lab-authorized sampler.



The Maximum Contaminant Level (MCL) is the maximum permissible level of a contaminant in water per the SDWA. Some parameters have no established MCL.

Pure-Test is certified #30-00338 by the Pennsylvania Department of Environmental Protection, #345 by the Maryland Department of the Environment.

This sample meets state and federal standards for safe drinking water, for the parameters reported.

MDE

Report Approved By:

Andrew T Heist, Lab Technician

