

Actions Taken											
Address	Zone	Call Date	Facility Type Residence, Business, School, CDC, CDH, MDV	Complaint Description (sheen, taste, odor, other)	Response Date	Samples Collected (Y/N)	Analytes Tested	Sample Results	Type of Testing	Resolution	Status (Pending/ Closed)
Address B	A3	1/4/2025	Residence	Requested sample	1/10/2025	Y	TPH	ND (ND)	RRT (Certified)	No Further Action Needed	Closed
Address C	H1	1/21/2025	Residence	Requested sample	1/23/2025	Y	TPH	ND (Pending)	RRT (Certified)	Pending Validated Results*	Pending
Address D	D2	1/28/2025	Residence	Requested sample	2/3/2025	Y	TPH	ND (Pending)	RRT (Certified)	Pending Validated Results*	Pending
Address E	A2	1/30/2025	Residence	Requested sample	2/7/2025	Y	TPH	ND (Pending)	RRT (Certified)	Pending Validated Results*	Pending
*Results pending due to ongoing validation of data											