Pace Analytical®
575 Broad Hollow Road, Melville, NY 11747
TEL: (631) 694-3040 FAX: (631) 420-8436
www.pacelabs.com

Laboratory Results

Results for the samples and analytes requested

The lab is not directly responsible for the integrity of the sample before receipt at the lab and is responsible only for the certified tests

Hampton Bays Water District
P.O. Box 1013
Hampton Bays, NY 11946
Attn To : Supt. McCuen
Federal ID : 5103704

Lab Project No. : 70134087

Received :06/10/2020 4:30
Sample Type :Drinking Water

Date Reported: 06/11/2020

Lab	Location	Collected		E.coli	Total Coliforms	Field Residual
			Units	N/A	N/A	mg/L
			Metho	SM22 9223B Colilert	SM22 9223B Colilert	
			Limits	Absent	Absent	4
70134087001	HB12	6/10/2020 7:30:00	Analysis	**Absent**	**Absent**	**0.78**
Routine	M. Layburn	Collected by: CLIENT	Time	**6/11/2020 12:06:00**	**6/11/2020 12:06:00**	**6/10/2020 7:30:00 AM**
Distribution	Squires Pond Rd.					
70134087002	HB13	6/10/2020 8:00:00	Analysis	**Absent**	**Absent**	**0.59**
Routine	H.B. Bagel	Collected by: CLIENT	Time	**6/11/2020 12:06:00**	**6/11/2020 12:06:00**	**6/10/2020 8:00:00 AM**
Distribution	W. Montauk Hwy.					
70134087003	HB28	6/10/2020 7:45:00	Analysis	**Absent**	**Absent**	**0.91**
Routine	Huebner	Collected by: CLIENT	Time	**6/11/2020 12:06:00**	**6/11/2020 12:06:00**	**6/10/2020 7:45:00 AM**
Distribution	Oakwood Rd.					
70134087004	HB29	6/10/2020 8:15:00	Analysis	**Absent**	**Absent**	**0.90**
Routine	McFarland	Collected by: CLIENT	Time	**6/11/2020 12:06:00**	**6/11/2020 12:06:00**	**6/10/2020 8:15:00 AM**
Distribution	Ridgewood La.					
70134087005	HB16	6/10/2020 8:30:00	Analysis	**Absent**	**Absent**	**0.84**
Routine	Spellman's Marine	Collected by: CLIENT	Time	**6/11/2020 12:06:00**	**6/11/2020 12:06:00**	**6/10/2020 8:30:00 AM**
Distribution	Rampasture Rd.					
70134087006	HB34	6/10/2020 8:45:00	Analysis	**Absent**	**Absent**	**0.89**
Routine	Kappers; 23 Washington Ave.	Collected by: CLIENT	Time	**6/11/2020 12:06:00**	**6/11/2020 12:06:00**	**6/10/2020 8:45:00 AM**
Distribution						

Result(s) reported meet(s) NYS Regulatory Limit(s).
Result(s) flagged with * Exceed NYS Regulatory Limit(s). Limit Noted.

Treatments
A = Air Stripper
FM = Iron/Manganese Removal
N = Nitrate Removal
G = Granular Activated
O = Other

Test results meet the requirements of NELAC unless otherwise noted.

This report shall not be reproduced except in full, without the written approval of the laboratory.

Kimberley Mack

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Lab	Location	Collected		E.coli	Total Coliforms	Field Residual
			Units	N/A	N/A	mg/L
			Metho	SM22 9223B Colilert	SM22 9223B Colilert	
			Limits	Absent	Absent	4
70134087007	HB31	6/10/2020 9:05:00		**Absent**	**Absent**	**0.90**
Routine Distribution		Collected by: CLIENT	Analysis Time	**6/11/2020 12:06:00**	**6/11/2020 12:06:00**	**6/10/2020 9:05:00 AM**
70134087008	SPB1	6/10/2020 9:20:00		**Absent**	**Absent**	**0.86**
Routine Distribution		Collected by: CLIENT	Analysis Time	**6/11/2020 12:06:00**	**6/11/2020 12:06:00**	**6/10/2020 9:20:00 AM**
70134087009	HB21	6/10/2020 9:35:00		**Absent**	**Absent**	**0.64**
Routine Distribution	H.B. Fire Dept. Montauk Hwy.	Collected by: CLIENT	Analysis Time	**6/11/2020 12:06:00**	**6/11/2020 12:06:00**	**6/10/2020 9:35:00 AM**
70134087010	HB5A	6/10/2020 9:50:00		**Absent**	**Absent**	**0.47**
Routine Distribution	Sunday's By The Bay Dune Rd.	Collected by: CLIENT	Analysis Time	**6/11/2020 12:06:00**	**6/11/2020 12:06:00**	**6/10/2020 9:00:00 AM**

Result(s) reported meet(s) NYS Regulatory Limit(s).
Result(s) flagged with * Exceed NYS Regulatory Limit(s). Limit Noted.

Treatments
A = Air Stripper
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FM = Iron/Manganese Removal
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WorkOrder :
70134087

Laboratory Certifications

Pace Analytical Services Long Island
575 Broad Hollow Rd, Melville, NY 11747
New York Certification #: 10478 Primary Accrediting Body
New Jersey Certification #: NY158
Pennsylvania Certification #: 68-00350
Connecticut Certification #: PH-0435
Maryland Certification #: 208
Rhode Island Certification #: LAO00340
Massachusetts Certification #: M-NY026
New Hampshire Certification #: 2987

Date Reported: 06/11/2020

WO# : 70134087

70134087

Sample Request Form
PUBLIC WATER SUPPLIER

BACK IN LAB 1630

Date: 6-10-20

Collected By: K. TUTHILL

Accepted By: LOCKED 6/10/20

Cooler Temp: 3.4 °C V320

❑ WELL OFF LINE _____

❑ WELL RUN TO SYSTEM _____

❑ YES ❑ NO VOC'S PRESERVED WITH HCl

Client Info:

Name or Code: HAMPTON BAYS WATER DISTRICT

Address: P.O. BOX 1013 HAMPTON BAYS, NEW YORK 11946

(631) 728-0179

Phone #:

Attn:

Proj. # or (Name):

Bill To:

Copies To:

Sample Types	Purpose	Origin	Treatment Types
PW - Potable Water	RO - Routine	D - Distribution	AST - Air Stripper
GW - Groundwater	RE - Resample	RW - Raw Well	GAC - Granular Activated Charcoal
SW - Surface Water	S - Special	TW - Treated Well	N - Nitrate Removal Plant
WW - Waste Water		T - Tank	FE - Iron Removal Plant
AQ - Aqueous		MW - Monitoring Well	O - Other
S - Soil		I - Influent	
		E - Effluent	

Sample Info:

Date/Time Collected:	Sample Type	Location	Origin	Treatment Type	Purpose	Field Readings Cl_2	Field Readings pH/Temp	Analysis	Lab No.
7:30 AM 6-10-20	PW	#12	D	-	RO	.78	7.21	BACT w/cl	001
8:00 AM 6-10-20	PW	#13	D	-	RO	.59	7.24	BACT w/cl	002
7:45 AM 6-10-20	PW	#28	D	-	RO	.91	7.20	BACT w/cl	003
8:15 AM 6-10-20	PW	#29	D	-	RO	.90	7.44	BACT w/cl	004
8:30 AM 6-10-20	PW	#16	D	-	RO	.84	7.11	BACT w/cl	005
8:45 AM 6-10-20	PW	#34	D	-	RO	.89	7.19	BACT w/cl	006
9:05 AM 6-10-20	PW	#31	D	-	RO	.90	7.12	BACT w/cl	007
9:20 AM 6-10-20	PW	SAB #1	D	-	RO	.86	7.04	BACT w/cl	008
9:35 AM 6-10-20	PW	#21	D	-	RO	.64	7.37	BACT w/cl	009
9:50 AM 6-10-20	PW	5A	D	-	RO	.49	7.26	BACT w/cl	010

Remarks:

Sample Condition Upon Receipt

Pace Analytical

WO#: 70134087

PM: KMM **Due Date: 07/10/20**

CLIENT: HBW

Client Name: Hampton Bays WATER Pro

Courier: ☐ Fed Ex ☐ UPS ☐ USPS ☐ Client ☐ Commercial ☐ ~~Pace~~ ☐ Other

Tracking #:

Custody Seal on Cooler/Box Present: ☐ Yes ☑ No Seals intact: ☐ Yes ☐ No

Packing Material: ☐ Bubble Wrap ☐ Bubble Bags ☐ Ziploc ☑ None ☐ Other

Thermometer Used: TH091 Correction Factor: +0.2

Cooler Temperature (°C): 3.4 Cooler Temperature Corrected (°C):

Temperature Blank Present: ☐ Yes ☐ No

Type of Ice: Wet Blue None

☐ Samples on ice, cooling process has begun

Date/Time 5035A kits placed in freezer

Temp should be above freezing to 6.0°C

USDA Regulated Soil (☐ N/A, water sample)

Date and Initials of person examining contents: 6/10/20

Did samples originate in a quarantine zone within the United States: AL, AR, CA, FL, GA, ID, LA, MS, NC, NM, NY, OK, OR, SC, TN, TX, or VA (check map)? ☐ YES ☐ NO

Did samples originate from a foreign source (internationally, including Hawaii and Puerto Rico)? ☐ Yes ☒ No

If Yes to either question, fill out a Regulated Soil Checklist (F-LI-C-010) and include with SCUR/COC paperwork.

				COMMENTS:
Chain of Custody Present:	☑Yes	☐No		1.
Chain of Custody Filled Out:	☑Yes	☐No		2.
Chain of Custody Relinquished:	☑Yes	☐No		3.
Sampler Name & Signature on COC:	☑Yes	☐No	☐N/A	4.
Samples Arrived within Hold Time:	☑Yes	☐No		5.
Short Hold Time Analysis (<72hr):	☑Yes	☐No		6.
Rush Turn Around Time Requested:	☐Yes	☑No		7.
Sufficient Volume: (Triple volume provided for MS/MSD)	☑Yes	☐No		8.
Correct Containers Used:	☑Yes	☐No		9.
-Pace Containers Used:	☑Yes	☐No		
Containers Intact:	☑Yes	☐No		10.
Filtered volume received for Dissolved tests	☐Yes	☐No	☑N/A	11. Note if sediment is visible in the dissolved container.
Sample Labels match COC:	☑Yes	☐No		12.
-Includes date/time/ID/Analysis Matrix: SL WT OIL				
All containers needing preservation have been checked	☐Yes	☐No	☑N/A	13. ☐ HNO_3 ☐ H_2SO_4 ☐ NaOH ☐ HCl
pH paper Lot #				Sample #
All containers needing preservation are found to be in compliance with EPA recommendation? (HNO_3, H_2SO_4, HCl, NaOH>9 Sulfide, NaOH>12 Cyanide) Exceptions: VOA, Coliform, TOC/DOC, Oil and Grease, DRO/8015 (water). Per Method, VOA pH is checked after analysis	☐Yes	☐No	☑N/A	Initial when completed: / Lot # of added preservative: / Date/Time preservative added
Samples checked for dechlorination:	☐Yes	☐No	☑N/A	14.
KI starch test strips Lot #				Positive for Res. Chlorine? Y N
Residual chlorine strips Lot #				
Headspace in VOA Vials (>6mm):	☐Yes	☐No	☑N/A	15.
Trip Blank Present:	☐Yes	☐No	☑N/A	16.
Trip Blank Custody Seals Present	☐Yes	☐No	☑N/A	
Pace Trip Blank Lot # (if applicable):				

Client Notification/ Resolution: Field Data Required? Y / N

Person Contacted: Date/Time:

Comments/ Resolution:

* PM (Project Manager) review is documented electronically in LIMS.