

## 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

### Sample Information:

Type: Drinking Water  
Origin: Raw Well  
Routine

**Hampton Bays Water District**

**P.O. Box 1013**

**Hampton Bays, NY 11946**

**Attn To : Rob King**

Federal ID : 5103704

Collected : 07/10/2019 08:20 AM Point S-15687

Received : 07/10/2019 05:00 PM Location Well #1-1

Collected By CLIENT

**Lab No. : 7097006001**

**Client Sample ID.: S-15687**

#### Analytical Method:EPA 200.7

| Parameter(s) | Results | Qualifier | D.F. | Units | Limit | Analyzed:          | Container:  |
|--------------|---------|-----------|------|-------|-------|--------------------|-------------|
| Iron         | <0.020  |           | 1    | mg/L  | 0.3   | 07/18/2019 4:53 PM | 001 BP4N1/1 |
| Manganese    | 0.030   |           | 1    | mg/L  | 0.3   | 07/18/2019 4:53 PM | 001 BP4N1/1 |

#### Analytical Method:EPA 353.2

| Parameter(s)           | Results | Qualifier | D.F. | Units | Limit | Analyzed:        | Container:  |
|------------------------|---------|-----------|------|-------|-------|------------------|-------------|
| Nitrate as N           | 4.6     |           | 10   | mg/L  | 10    | 07/10/2019 11:44 | 001 BP4U1/1 |
| Nitrate-Nitrite (as N) | 4.6     |           | 10   | mg/L  |       | 07/10/2019 11:44 | 001 BP4U1/1 |

#### Analytical Method:EPA 353.2

| Parameter(s) | Results | Qualifier | D.F. | Units | Limit | Analyzed:          | Container:  |
|--------------|---------|-----------|------|-------|-------|--------------------|-------------|
| Nitrite as N | <0.050  |           | 1    | mg/L  | 1     | 07/10/2019 9:33 PM | 001 BP4U1/1 |

#### Analytical Method:EPA 537

#### Prep Method: EPA 537

Prep Date: 07/23/2019 9:37 AM

| Parameter(s)                 | Results | Qualifier | D.F. | Units | Limit | Analyzed:        | Container:  |
|------------------------------|---------|-----------|------|-------|-------|------------------|-------------|
| Perfluorobutanesulfonic acid | 1.9     |           | 1    | ng/L  |       | 07/25/2019 12:22 | 001 BP3T1/2 |
| Perfluoroheptanoic acid      | 7.8     |           | 1    | ng/L  |       | 07/25/2019 12:22 | 001 BP3T1/2 |
| Perfluorohexanesulfonic acid | 26.9    |           | 1    | ng/L  |       | 07/25/2019 12:22 | 001 BP3T1/2 |
| Perfluorononanoic acid       | 6.5     |           | 1    | ng/L  |       | 07/25/2019 12:22 | 001 BP3T1/2 |
| Perfluorooctanesulfonic acid | 81.1    |           | 1    | ng/L  |       | 07/25/2019 12:22 | 001 BP3T1/2 |
| Perfluorooctanoic acid       | 7.9     |           | 1    | ng/L  |       | 07/25/2019 12:22 | 001 BP3T1/2 |
| Surr: 13C2-PFDA (S)          | 109%    |           | 1    | %REC  |       | 07/25/2019 12:22 | 001 BP3T1/2 |
| Surr: 13C2-PFHxA (S)         | 114%    |           | 1    | %REC  |       | 07/25/2019 12:22 | 001 BP3T1/2 |
| Surr: HFPO-DAS (S)           | 98%     |           | 1    | %REC  |       | 07/25/2019 12:22 | 001 BP3T1/2 |
| Surr: NETFOSAA-d5 (S)        | 72%     |           | 1    | %REC  |       | 07/25/2019 12:22 | 001 BP3T1/2 |

#### Analytical Method:SM22 9223B Colilert

#### Prep Method: SM22 9223B Colilert

Prep Date: 07/10/2019 6:34 PM

| Parameter(s)    | Results | Qualifier | D.F. | Units | Limit  | Analyzed:        | Container:  |
|-----------------|---------|-----------|------|-------|--------|------------------|-------------|
| E.coli          | Absent  |           | 1    |       | Absent | 07/11/2019 12:34 | 001 SP5T1/1 |
| Total Coliforms | Absent  |           | 1    |       | Absent | 07/11/2019 12:34 | 001 SP5T1/1 |

#### Qualifiers:

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.

ND - Not Detected at or above adjusted reporting limit.

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit. Estimated value - below calibration range

U - Indicates the compound was analyzed for, but not detected

Result(s) reported meet(s) NYS Regulatory Limit(s).

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

Date Reported: 07/25/2019



Stu Murrell

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.



575 Broad Hollow Road, Melville, NY 11747

TEL: (631) 694-3040 FAX: (631) 420-8436

[www.pacelabs.com](http://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

### Sample Information:

Type: Drinking Water

Origin: Raw Well

Routine

Hampton Bays Water District

P.O. Box 1013

Hampton Bays, NY 11946

Attn To : Rob King

Federal ID : 5103704

Collected : 07/10/2019 08:10 AM Point S-24848

Received : 07/10/2019 05:00 PM Location Well #1-2

Collected By CLIENT

Lab No. : 7097006002

Client Sample ID.: S-24848

#### Analytical Method:EPA 200.7

| Parameter(s) | Results | Qualifier | D.F. | Units | Limit | Analyzed:          | Container:  |
|--------------|---------|-----------|------|-------|-------|--------------------|-------------|
| Iron         | <0.020  |           | 1    | mg/L  | 0.3   | 07/18/2019 4:54 PM | 002 BP4N1/1 |
| Manganese    | 0.31*   |           | 1    | mg/L  | 0.3   | 07/18/2019 4:54 PM | 002 BP4N1/1 |

#### Analytical Method:EPA 353.2

| Parameter(s)           | Results | Qualifier | D.F. | Units | Limit | Analyzed:        | Container:  |
|------------------------|---------|-----------|------|-------|-------|------------------|-------------|
| Nitrate as N           | 4.3     |           | 10   | mg/L  | 10    | 07/10/2019 11:45 | 002 BP4U1/1 |
| Nitrate-Nitrite (as N) | 4.3     |           | 10   | mg/L  |       | 07/10/2019 11:45 | 002 BP4U1/1 |

#### Analytical Method:EPA 353.2

| Parameter(s) | Results | Qualifier | D.F. | Units | Limit | Analyzed:          | Container:  |
|--------------|---------|-----------|------|-------|-------|--------------------|-------------|
| Nitrite as N | <0.050  |           | 1    | mg/L  | 1     | 07/10/2019 9:34 PM | 002 BP4U1/1 |

#### Analytical Method:EPA 537

#### Prep Method: EPA 537

Prep Date: 07/23/2019 9:37 AM

| Parameter(s)                 | Results | Qualifier | D.F. | Units | Limit | Analyzed:        | Container:  |
|------------------------------|---------|-----------|------|-------|-------|------------------|-------------|
| Perfluorobutanesulfonic acid | 2.4     |           | 1    | ng/L  |       | 07/25/2019 12:40 | 002 BP3T1/2 |
| Perfluoroheptanoic acid      | 6.3     |           | 1    | ng/L  |       | 07/25/2019 12:40 | 002 BP3T1/2 |
| Perfluorohexanesulfonic acid | 10.5    |           | 1    | ng/L  |       | 07/25/2019 12:40 | 002 BP3T1/2 |
| Perfluorononanoic acid       | 22.1    |           | 1    | ng/L  |       | 07/25/2019 12:40 | 002 BP3T1/2 |
| Perfluorooctanesulfonic acid | 22.3    |           | 1    | ng/L  |       | 07/25/2019 12:40 | 002 BP3T1/2 |
| Perfluorooctanoic acid       | 5.2     |           | 1    | ng/L  |       | 07/25/2019 12:40 | 002 BP3T1/2 |
| Surr: 13C2-PFDA (S)          | 119%    |           | 1    | %REC  |       | 07/25/2019 12:40 | 002 BP3T1/2 |
| Surr: 13C2-PFHxA (S)         | 120%    |           | 1    | %REC  |       | 07/25/2019 12:40 | 002 BP3T1/2 |
| Surr: HFPO-DAS (S)           | 101%    |           | 1    | %REC  |       | 07/25/2019 12:40 | 002 BP3T1/2 |
| Surr: NETFOSAA-d5 (S)        | 68%     | P2,S0     | 1    | %REC  |       | 07/25/2019 12:40 | 002 BP3T1/2 |

#### Analytical Method:SM22 9223B Colilert

#### Prep Method: SM22 9223B Colilert

Prep Date: 07/10/2019 6:34 PM

| Parameter(s)    | Results | Qualifier | D.F. | Units | Limit  | Analyzed:        | Container:  |
|-----------------|---------|-----------|------|-------|--------|------------------|-------------|
| E.coli          | Absent  |           | 1    |       | Absent | 07/11/2019 12:34 | 002 SP5T1/1 |
| Total Coliforms | Absent  |           | 1    |       | Absent | 07/11/2019 12:34 | 002 SP5T1/1 |

#### Qualifiers:

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.

ND - Not Detected at or above adjusted reporting limit.

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit. Estimated value - below calibration range

U - Indicates the compound was analyzed for, but not detected

Result(s) reported meet(s) NYS Regulatory Limit(s).

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

Date Reported: 07/25/2019

Stu Murrell

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.



575 Broad Hollow Road, Melville, NY 11747

TEL: (631) 694-3040 FAX: (631) 420-8436

[www.pacelabs.com](http://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

### Sample Information:

Type: Drinking Water  
Origin: Raw Well  
Routine

Hampton Bays Water District

P.O. Box 1013

Hampton Bays, NY 11946

Attn To : Rob King

Federal ID : 5103704

Collected : 07/10/2019 07:40 AM Point S-31636

Received : 07/10/2019 05:00 PM Location Well #1-3

Collected By CLIENT

Lab No. : 7097006003

Client Sample ID.: S-31636

#### Analytical Method:EPA 200.7

| Parameter(s) | Results | Qualifier | D.F. | Units | Limit | Analyzed:          | Container:  |
|--------------|---------|-----------|------|-------|-------|--------------------|-------------|
| Iron         | <0.020  |           | 1    | mg/L  | 0.3   | 07/18/2019 4:55 PM | 003 BP4N1/1 |
| Manganese    | 0.026   |           | 1    | mg/L  | 0.3   | 07/18/2019 4:55 PM | 003 BP4N1/1 |

#### Analytical Method:EPA 353.2

| Parameter(s)           | Results | Qualifier | D.F. | Units | Limit | Analyzed:        | Container:  |
|------------------------|---------|-----------|------|-------|-------|------------------|-------------|
| Nitrate as N           | 4.5     |           | 10   | mg/L  | 10    | 07/10/2019 11:46 | 003 BP4U1/1 |
| Nitrate-Nitrite (as N) | 4.5     |           | 10   | mg/L  |       | 07/10/2019 11:46 | 003 BP4U1/1 |

#### Analytical Method:EPA 353.2

| Parameter(s) | Results | Qualifier | D.F. | Units | Limit | Analyzed:          | Container:  |
|--------------|---------|-----------|------|-------|-------|--------------------|-------------|
| Nitrite as N | <0.050  |           | 1    | mg/L  | 1     | 07/10/2019 9:35 PM | 003 BP4U1/1 |

#### Analytical Method:EPA 537

#### Prep Method: EPA 537

Prep Date: 07/23/2019 9:37 AM

| Parameter(s)                 | Results | Qualifier | D.F. | Units | Limit | Analyzed:        | Container:  |
|------------------------------|---------|-----------|------|-------|-------|------------------|-------------|
| Perfluorobutanesulfonic acid | 2.8     |           | 1    | ng/L  |       | 07/25/2019 12:58 | 003 BP3T1/2 |
| Perfluoroheptanoic acid      | 6.9     |           | 1    | ng/L  |       | 07/25/2019 12:58 | 003 BP3T1/2 |
| Perfluorohexanesulfonic acid | 15.9    |           | 1    | ng/L  |       | 07/25/2019 12:58 | 003 BP3T1/2 |
| Perfluorononanoic acid       | 8.2     |           | 1    | ng/L  |       | 07/25/2019 12:58 | 003 BP3T1/2 |
| Perfluorooctanesulfonic acid | 13.9    |           | 1    | ng/L  |       | 07/25/2019 12:58 | 003 BP3T1/2 |
| Perfluorooctanoic acid       | 5.0     |           | 1    | ng/L  |       | 07/25/2019 12:58 | 003 BP3T1/2 |
| Surr: 13C2-PFDA (S)          | 119%    |           | 1    | %REC  |       | 07/25/2019 12:58 | 003 BP3T1/2 |
| Surr: 13C2-PFHxA (S)         | 125%    |           | 1    | %REC  |       | 07/25/2019 12:58 | 003 BP3T1/2 |
| Surr: HFPO-DAS (S)           | 105%    |           | 1    | %REC  |       | 07/25/2019 12:58 | 003 BP3T1/2 |
| Surr: NETFOSAA-d5 (S)        | 79%     |           | 1    | %REC  |       | 07/25/2019 12:58 | 003 BP3T1/2 |

#### Analytical Method:SM22 9223B Colilert

#### Prep Method: SM22 9223B Colilert

Prep Date: 07/10/2019 6:34 PM

| Parameter(s)    | Results | Qualifier | D.F. | Units | Limit  | Analyzed:        | Container:  |
|-----------------|---------|-----------|------|-------|--------|------------------|-------------|
| E.coli          | Absent  |           | 1    |       | Absent | 07/11/2019 12:34 | 003 SP5T1/1 |
| Total Coliforms | Absent  |           | 1    |       | Absent | 07/11/2019 12:34 | 003 SP5T1/1 |

#### Qualifiers:

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.

ND - Not Detected at or above adjusted reporting limit.

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit. Estimated value - below calibration range

U - Indicates the compound was analyzed for, but not detected

Result(s) reported meet(s) NYS Regulatory Limit(s).

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

Date Reported: 07/25/2019

*Stu Murrell*

Stu Murrell

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.

## 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

### Sample Information:

Type: Drinking Water  
Origin: Raw Well  
Routine

**Hampton Bays Water District**

**P.O. Box 1013**

**Hampton Bays, NY 11946**

**Attn To : Rob King**

Federal ID : 5103704

Collected : 07/10/2019 08:00 AM Point

Received : 07/10/2019 05:00 PM Location

Collected By CLIENT

**Lab No. : 7097006004**

**Client Sample ID.: BLEND INF**

#### Analytical Method:EPA 200.7

| Parameter(s) | Results | Qualifier | D.F. | Units | Limit | Analyzed:          | Container:  |
|--------------|---------|-----------|------|-------|-------|--------------------|-------------|
| Iron         | <0.020  |           | 1    | mg/L  | 0.3   | 07/18/2019 4:58 PM | 004 BP4N1/1 |
| Manganese    | 0.099   |           | 1    | mg/L  | 0.3   | 07/18/2019 4:58 PM | 004 BP4N1/1 |

#### Analytical Method:EPA 353.2

| Parameter(s)           | Results | Qualifier | D.F. | Units | Limit | Analyzed:        | Container:  |
|------------------------|---------|-----------|------|-------|-------|------------------|-------------|
| Nitrate as N           | 4.3     |           | 10   | mg/L  | 10    | 07/10/2019 11:47 | 004 BP4U1/1 |
| Nitrate-Nitrite (as N) | 4.3     |           | 10   | mg/L  |       | 07/10/2019 11:47 | 004 BP4U1/1 |

#### Analytical Method:EPA 353.2

| Parameter(s) | Results | Qualifier | D.F. | Units | Limit | Analyzed:          | Container:  |
|--------------|---------|-----------|------|-------|-------|--------------------|-------------|
| Nitrite as N | <0.050  |           | 1    | mg/L  | 1     | 07/10/2019 9:36 PM | 004 BP4U1/1 |

#### Analytical Method:EPA 537

#### Prep Method: EPA 537

Prep Date: 07/23/2019 9:37 AM

| Parameter(s)                 | Results | Qualifier | D.F. | Units | Limit | Analyzed:          | Container:  |
|------------------------------|---------|-----------|------|-------|-------|--------------------|-------------|
| Perfluorobutanesulfonic acid | 2.4     |           | 1    | ng/L  |       | 07/25/2019 1:16 AM | 004 BP3T1/2 |
| Perfluoroheptanoic acid      | 6.6     |           | 1    | ng/L  |       | 07/25/2019 1:16 AM | 004 BP3T1/2 |
| Perfluorohexanesulfonic acid | 17.2    |           | 1    | ng/L  |       | 07/25/2019 1:16 AM | 004 BP3T1/2 |
| Perfluorononanoic acid       | 12.0    |           | 1    | ng/L  |       | 07/25/2019 1:16 AM | 004 BP3T1/2 |
| Perfluorooctanesulfonic acid | 33.4    |           | 1    | ng/L  |       | 07/25/2019 1:16 AM | 004 BP3T1/2 |
| Perfluorooctanoic acid       | 5.7     |           | 1    | ng/L  |       | 07/25/2019 1:16 AM | 004 BP3T1/2 |
| Surr: 13C2-PFDA (S)          | 116%    |           | 1    | %REC  |       | 07/25/2019 1:16 AM | 004 BP3T1/2 |
| Surr: 13C2-PFHxA (S)         | 121%    |           | 1    | %REC  |       | 07/25/2019 1:16 AM | 004 BP3T1/2 |
| Surr: HFPO-DAS (S)           | 103%    |           | 1    | %REC  |       | 07/25/2019 1:16 AM | 004 BP3T1/2 |
| Surr: NEtFOSAA-d5 (S)        | 76%     |           | 1    | %REC  |       | 07/25/2019 1:16 AM | 004 BP3T1/2 |

#### Analytical Method:SM22 9223B Colilert

#### Prep Method: SM22 9223B Colilert

Prep Date: 07/10/2019 6:34 PM

| Parameter(s)    | Results | Qualifier | D.F. | Units | Limit  | Analyzed:        | Container:  |
|-----------------|---------|-----------|------|-------|--------|------------------|-------------|
| E.coli          | Absent  |           | 1    |       | Absent | 07/11/2019 12:34 | 004 SP5T1/1 |
| Total Coliforms | Absent  |           | 1    |       | Absent | 07/11/2019 12:34 | 004 SP5T1/1 |

#### Qualifiers:

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.

ND - Not Detected at or above adjusted reporting limit.

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit. Estimated value - below calibration range

U - Indicates the compound was analyzed for, but not detected

Result(s) reported meet(s) NYS Regulatory Limit(s).

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

Date Reported: 07/25/2019



Stu Murrell

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.

## 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

### Sample Information:

Type: Drinking Water  
Origin: Distribution  
Routine

**Hampton Bays Water District**

**P.O. Box 1013**

**Hampton Bays, NY 11946**

**Attn To : Rob King**

Federal ID : 5103704

Collected : 07/10/2019 07:50 AM Point

Received : 07/10/2019 05:00 PM Location

Collected By CLIENT

**Lab No. : 7097006005**

**Client Sample ID.: BLEND EFF**

#### Analytical Method:EPA 200.7

| Parameter(s) | Results | Qualifier | D.F. | Units | Limit | Analyzed:          | Container:  |
|--------------|---------|-----------|------|-------|-------|--------------------|-------------|
| Iron         | <0.020  |           | 1    | mg/L  | 0.3   | 07/18/2019 4:59 PM | 005 BP4N1/1 |
| Manganese    | 0.014   |           | 1    | mg/L  | 0.3   | 07/18/2019 4:59 PM | 005 BP4N1/1 |

#### Analytical Method:EPA 353.2

| Parameter(s)           | Results | Qualifier | D.F. | Units | Limit | Analyzed:        | Container:  |
|------------------------|---------|-----------|------|-------|-------|------------------|-------------|
| Nitrate as N           | 4.1     |           | 10   | mg/L  | 10    | 07/11/2019 10:45 | 005 BP4U1/1 |
| Nitrate-Nitrite (as N) | 4.1     |           | 10   | mg/L  |       | 07/11/2019 10:45 | 005 BP4U1/1 |

#### Analytical Method:EPA 353.2

| Parameter(s) | Results | Qualifier | D.F. | Units | Limit | Analyzed:          | Container:  |
|--------------|---------|-----------|------|-------|-------|--------------------|-------------|
| Nitrite as N | <0.050  |           | 1    | mg/L  | 1     | 07/11/2019 8:46 PM | 005 BP4U1/1 |

#### Analytical Method:EPA 537

#### Prep Method: EPA 537

Prep Date: 07/23/2019 9:37 AM

| Parameter(s)                 | Results | Qualifier | D.F. | Units | Limit | Analyzed:          | Container:  |
|------------------------------|---------|-----------|------|-------|-------|--------------------|-------------|
| Perfluorobutanesulfonic acid | <1.8    |           | 1    | ng/L  |       | 07/25/2019 1:34 AM | 005 BP3T1/2 |
| Perfluoroheptanoic acid      | <1.8    |           | 1    | ng/L  |       | 07/25/2019 1:34 AM | 005 BP3T1/2 |
| Perfluorohexanesulfonic acid | <1.8    |           | 1    | ng/L  |       | 07/25/2019 1:34 AM | 005 BP3T1/2 |
| Perfluorononanoic acid       | <1.8    |           | 1    | ng/L  |       | 07/25/2019 1:34 AM | 005 BP3T1/2 |
| Perfluorooctanesulfonic acid | <1.8    |           | 1    | ng/L  |       | 07/25/2019 1:34 AM | 005 BP3T1/2 |
| Perfluorooctanoic acid       | <1.8    |           | 1    | ng/L  |       | 07/25/2019 1:34 AM | 005 BP3T1/2 |
| Surr: 13C2-PFDA (S)          | 119%    |           | 1    | %REC  |       | 07/25/2019 1:34 AM | 005 BP3T1/2 |
| Surr: 13C2-PFHxA (S)         | 123%    |           | 1    | %REC  |       | 07/25/2019 1:34 AM | 005 BP3T1/2 |
| Surr: HFPO-DAS (S)           | 125%    |           | 1    | %REC  |       | 07/25/2019 1:34 AM | 005 BP3T1/2 |
| Surr: NEtFOSAA-d5 (S)        | 82%     |           | 1    | %REC  |       | 07/25/2019 1:34 AM | 005 BP3T1/2 |

#### Qualifiers:

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to changes in sample preparation, dilution of the sample aliquot, or moisture content.

ND - Not Detected at or above adjusted reporting limit.

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit. Estimated value - below calibration range

U - Indicates the compound was analyzed for, but not detected

Result(s) reported meet(s) NYS Regulatory Limit(s).

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

Date Reported: 07/25/2019



Stu Murrell

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.

**WorkOrder :**

7097006

## Laboratory Certifications

---

**Ormond Beach Certification IDs**

8 East Tower Circle, Ormond Beach, FL 32174  
Alaska DEC- CS/UST/LUST  
Alabama Certification #: 41320  
Arizona Certification# AZ0819  
Colorado Certification: FL NELAC Reciprocity  
Connecticut Certification #: PH-0216  
Delaware Certification: FL NELAC Reciprocity  
Florida Certification #: E83079  
Georgia Certification #: 955  
Guam Certification: FL NELAC Reciprocity  
Hawaii Certification: FL NELAC Reciprocity  
Illinois Certification #: 200068  
Indiana Certification: FL NELAC Reciprocity  
Kansas Certification #: E-10383  
Kentucky Certification #: 90050  
Louisiana Certification #: FL NELAC Reciprocity  
Louisiana Environmental Certificate #: 05007  
Maryland Certification: #346  
Michigan Certification #: 9911  
Mississippi Certification: FL NELAC Reciprocity  
Missouri Certification #: 236  
Montana Certification #: Cert 0074  
Nebraska Certification: NE-OS-28-14  
New Hampshire Certification #: 2958  
New Jersey Certification #: FL022  
New York Certification #: 11608  
North Carolina Environmental Certificate #: 667  
North Carolina Certification #: 12710  
North Dakota Certification #: R-216  
Oklahoma Certification #: D9947  
Pennsylvania Certification #: 68-00547  
Puerto Rico Certification #: FL01264  
South Carolina Certification: #96042001  
Tennessee Certification #: TN02974  
Texas Certification: FL NELAC Reciprocity  
US Virgin Islands Certification: FL NELAC Reciprocity  
Virginia Environmental Certification #: 460165  
West Virginia Certification #: 9962C  
Wisconsin Certification #: 399079670  
Wyoming (EPA Region 8): FL NELAC Reciprocity

**Long Island Certification IDs**

575 Broad Hollow Rd, Melville, NY 11747



575 Broad Hollow Road, Melville, NY 11747  
TEL: (631) 694-3040 FAX: (631) 420-8436  
[www.pacelabs.com](http://www.pacelabs.com)

**WorkOrder :**

7097006

## Laboratory Certifications

---

**Long Island Certification IDs**

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





[illegible]

☐ WELL OFF LINE

**WELL RUN TO SYSTEM**

**WELL RUN TO SYSTEM**

**Client Info:**  
Name or Code: **HAMPTON BAYS WATER DISTRICT**  
Address: **PO. BOX 1013**  
**HAMPTON BAYS, NEW YORK 11946**  
**(631) 728-0179**

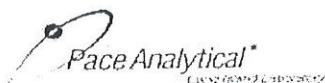
Name or Code: **HAMPTON BAYS WATER DISTRICT**  
 Address: **PO. BOX 1013**  
**HAMPTON BAYS, NEW YORK 11946**  
**(631) 728-0179**

Phone #: \_\_\_\_\_  
Attn: \_\_\_\_\_  
Proj. # or (Name): \_\_\_\_\_  
Bill To: \_\_\_\_\_  
Copies To: \_\_\_\_\_

**Sample Info:**

[illegible]

Remarks:



# Sample Condition Upon Receipt

Client Name: HBW

Project

WO#: 7097006

PM: SWM Due Date: 08/09/19

CLIENT: HBW

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

Tracking #: \_\_\_\_\_

Custody Seal on Cooler/Box Present: ☒ Yes ☐ No Seals intact: ☒ Yes ☐ NoPacking Material: ☐ Bubble Wrap ☐ Bubble Bags ☐ Ziploc ☒ None ☐ Other

Thermometer Used: TH091

Correction Factor: +0.2Cooler Temperature (°C): 3.7Cooler Temperature Corrected (°C): 3.9Temperature Blank Present: ☐ Yes ☒ NoType 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: 6/7/10/19Did 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 ☒ NODid 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:                                                                                                                                                             | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No                                         | 1.                                                                                                                                                               |
| Chain of Custody Filled Out:                                                                                                                                                          | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No                                         | 2.                                                                                                                                                               |
| Chain of Custody Relinquished:                                                                                                                                                        | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No                                         | 3.                                                                                                                                                               |
| Sampler Name & Signature on COC:                                                                                                                                                      | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No <input type="checkbox"/> N/A            | 4.                                                                                                                                                               |
| Samples Arrived within Hold Time:                                                                                                                                                     | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No                                         | 5.                                                                                                                                                               |
| Short Hold Time Analysis (<72hr):                                                                                                                                                     | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No                                         | 6.                                                                                                                                                               |
| Rush Turn Around Time Requested:                                                                                                                                                      | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No                              | 7.                                                                                                                                                               |
| Sufficient Volume: (Triple volume provided for MS/MSD)                                                                                                                                | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No                                         | 8.                                                                                                                                                               |
| Correct Containers Used:                                                                                                                                                              | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No                                         | 9.                                                                                                                                                               |
| -Pace Containers Used:                                                                                                                                                                | <input type="checkbox"/> Yes            | <input type="checkbox"/> No                                         |                                                                                                                                                                  |
| Containers Intact:                                                                                                                                                                    | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No                                         | 10.                                                                                                                                                              |
| Filtered volume received for Dissolved tests                                                                                                                                          | <input type="checkbox"/> Yes            | <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A | 11. Note if sediment is visible in the dissolved container.                                                                                                      |
| Sample Labels match COC:                                                                                                                                                              | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No                                         | 12.                                                                                                                                                              |
| -Includes date/time/ID/Analysis Matrix SL WT OIL                                                                                                                                      |                                         |                                                                     |                                                                                                                                                                  |
| All containers needing preservation have been checked                                                                                                                                 | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No <input type="checkbox"/> N/A            | 13. <input type="checkbox"/> HNO <sub>3</sub> <input type="checkbox"/> H <sub>2</sub> SO <sub>4</sub> <input type="checkbox"/> NaOH <input type="checkbox"/> HCl |
| pH paper Lot # <u>HC 863u63</u>                                                                                                                                                       |                                         |                                                                     | Sample #                                                                                                                                                         |
| All containers needing preservation are found to be in compliance with EPA recommendation? (HNO <sub>3</sub> , H <sub>2</sub> SO <sub>4</sub> , HCl, NaOH>9 Sulfide, NAOH>12 Cyanide) | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No <input type="checkbox"/> N/A            |                                                                                                                                                                  |
| Exceptions: VOA, Coliform, TOC/DOC, Oil and Grease, DRO/8015 (water). Per Method, VOA pH is checked after analysis                                                                    |                                         |                                                                     | Initial when completed: Lot # of added preservative: Date/Time preservative added                                                                                |
| Samples checked for dechlorination:                                                                                                                                                   | <input type="checkbox"/> Yes            | <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A | 14.                                                                                                                                                              |
| KI starch test strips Lot #                                                                                                                                                           |                                         |                                                                     |                                                                                                                                                                  |
| Residual chlorine strips Lot #                                                                                                                                                        |                                         |                                                                     | Positive for Res. Chlorine? Y N                                                                                                                                  |
| Headspace in VOA Vials (>6mm):                                                                                                                                                        | <input type="checkbox"/> Yes            | <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A | 15.                                                                                                                                                              |
| Trip Blank Present:                                                                                                                                                                   | <input type="checkbox"/> Yes            | <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A | 16.                                                                                                                                                              |
| Trip Blank Custody Seals Present                                                                                                                                                      | <input type="checkbox"/> Yes            | <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A |                                                                                                                                                                  |
| Pace Trip Blank Lot # (if applicable):                                                                                                                                                |                                         |                                                                     |                                                                                                                                                                  |

Client Notification/ Resolution:

Field Data Required? Y / N

Person Contacted: \_\_\_\_\_

Date/Time: \_\_\_\_\_

Comments/ Resolution: \_\_\_\_\_