



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

Lab No. : 70141551001
Client Sample ID.: HB3

Attn To : Supt. McCuen
 Federal ID : 5103704
 Collected : 08/12/2020 08:00 AM Point HB3
 Received : 08/12/2020 04:08 PM Location U.S.C.G.
 Collected By CLIENT Foster Ave.

Analytical Method:EPA 300.1

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Chlorate	37.4		5	ug/L		08/25/2020 6:18 AM	001 AG4E1/1

Analytical Method:EPA 524.2

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Bromodichloromethane	<0.50		1	ug/L		08/18/2020 11:11	001 VG9C1/2
Bromoform	<0.50		1	ug/L		08/18/2020 11:11	001 VG9C1/2
Chloroform	0.86		1	ug/L		08/18/2020 11:11	001 VG9C1/2
Dibromochloromethane	<0.50		1	ug/L		08/18/2020 11:11	001 VG9C1/2
Total Trihalomethanes (Calc.)	0.86		1	ug/L	80	08/18/2020 11:11	001 VG9C1/2
Surr: 1,2-Dichlorobenzene-d4 (S)	83%		1	%REC		08/18/2020 11:11	001 VG9C1/2
Surr: 4-Bromofluorobenzene (S)	106%		1	%REC		08/18/2020 11:11	001 VG9C1/2

Analytical Method:EPA 552.2

Prep Method: EPA 552.2

Prep Date: 08/20/2020 10:00

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Dibromoacetic Acid	<1.0		1	ug/L		08/21/2020 3:39 PM	001 AG341/1
Dichloroacetic Acid	<1.0		1	ug/L		08/21/2020 3:39 PM	001 AG341/1
Haloacetic Acids (Total)	<2.0		1	ug/L	60	08/21/2020 3:39 PM	001 AG341/1
Monobromoacetic Acid	<1.0		1	ug/L		08/21/2020 3:39 PM	001 AG341/1
Monochloroacetic Acid	<2.0		1	ug/L		08/21/2020 3:39 PM	001 AG341/1
Trichloroacetic Acid	<1.0		1	ug/L		08/21/2020 3:39 PM	001 AG341/1
Surr: 2,3-Dibromopropanoic Acid (S)	114%		1	%REC		08/21/2020 3:39 PM	001 AG341/1

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

Kimberley Mack

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.

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

Date Reported: 08/26/2020



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
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Sample Information:

Type: Drinking Water
 Origin: Distribution
 Routine

Hampton Bays Water District
P.O. Box 1013
Hampton Bays, NY 11946

Lab No. : 70141551002
Client Sample ID.: HB8

Attn To : Supt. McCuen
 Federal ID : 5103704
 Collected : 08/12/2020 09:30 AM Point HB8
 Received : 08/12/2020 04:08 PM Location B. McCormack
 Collected By CLIENT Bittersweet Ave.

Analytical Method:EPA 300.1

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Chlorate	50.5		5	ug/L		08/25/2020 7:00 AM	002 AG4E1/1

Analytical Method:EPA 524.2

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Bromodichloromethane	<0.50		1	ug/L		08/18/2020 11:37	002 VG9C1/2
Bromoform	<0.50		1	ug/L		08/18/2020 11:37	002 VG9C1/2
Chloroform	0.81		1	ug/L		08/18/2020 11:37	002 VG9C1/2
Dibromochloromethane	<0.50		1	ug/L		08/18/2020 11:37	002 VG9C1/2
Total Trihalomethanes (Calc.)	0.81		1	ug/L	80	08/18/2020 11:37	002 VG9C1/2
Surr: 1,2-Dichlorobenzene-d4 (S)	88%		1	%REC		08/18/2020 11:37	002 VG9C1/2
Surr: 4-Bromofluorobenzene (S)	105%		1	%REC		08/18/2020 11:37	002 VG9C1/2

Analytical Method:EPA 552.2

Prep Method: EPA 552.2

Prep Date: 08/20/2020 10:00

Parameter(s)	Results	Qualifier	D.F.	Units	Limit	Analyzed:	Container:
Dibromoacetic Acid	<1.0		1	ug/L		08/21/2020 4:04 PM	002 AG341/1
Dichloroacetic Acid	<1.0		1	ug/L		08/21/2020 4:04 PM	002 AG341/1
Haloacetic Acids (Total)	<2.0		1	ug/L	60	08/21/2020 4:04 PM	002 AG341/1
Monobromoacetic Acid	<1.0		1	ug/L		08/21/2020 4:04 PM	002 AG341/1
Monochloroacetic Acid	<2.0		1	ug/L		08/21/2020 4:04 PM	002 AG341/1
Trichloroacetic Acid	<1.0		1	ug/L		08/21/2020 4:04 PM	002 AG341/1
Surr: 2,3-Dibromopropanoic Acid (S)	103%		1	%REC		08/21/2020 4:04 PM	002 AG341/1

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
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Kimberley Mack

Test results meet the requirements of NELAC unless otherwise noted.

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

Date Reported: 08/26/2020

WorkOrder :

70141551

Laboratory Certifications

Pace Analytical Services Ormond Beach

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
Ohio DEP 87780
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

Pace Analytical Services Long Island

WorkOrder :
70141551

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

Sample Request Form PUBLIC WATER SUPPLIER

WELL OFF LINE WELL RUN TO SYSTEM

Date: 8-12-20

WELL RUN TO SYSTEM

Collected By: K. TOTHILL

Accepted By: [Signature]

Cooler Temp: 37 °C

YES NO VOC'S PRESERVED WITH HCl

Pace Analytical
WO#: 70141551

 70141551

Client Info:
 Name or Code: HAMPTON BAYS WATER DISTRICT
 Address: P.O. BOX 1013
HAMPTON BAYS, NEW YORK 11946
(516) 728-0179
 Phone #: _____
 Attn: _____
 Proj. # or (Name): _____
 Bill To: _____
 Copies To: _____

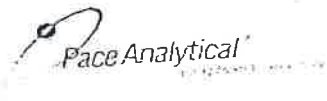
Sample Types	Purpose	Origin	Treatment Types
PW - Potable Water	RO - Routine	D - Distribution	AST - Air Stripper
GW - Groundwater	RE - Resample	RW - Raw Well	GAC - Granular Activated Charcoal
SW - Surface Water	S - Special	TW - Treated Well	N - Nitrate Removal Plant
WW - Waste Water		T - Tank	FE - Iron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

Sample Info:		Sample Type	Location	Origin	Treatment Type	Purpose	Cl ₂	Field Readings pH/Temp	Analysis	Lab No.
7:30AM	8-12-20	PW	#9	D	-	RO	.48	7.33	BEST WCL	
9:00AM	8-12-20	PW	#27	D	-	RO	.64	7.24	BEST WCL	
7:45AM	8-12-20	PW	#2	D	-	RO	.72	7.11	BEST WCL	
8:00AM	8-12-20	PW	#3	D	-	RO	.51	7.17	BEST WCL, THM + HAAS CHLORATE	001
8:12-20	8-12-20	PW	#4	D	-	RO	.76	7.16	BEST WCL	
8:15AM	8-12-20	PW	#5	D	-	RO	.59	7.17	BEST WCL	
8:50AM	8-12-20	PW	#6	D	-	RO	.66	7.18	BEST WCL	
9:45AM	8-12-20	PW	#7	D	-	RO	.54	7.26	BEST WCL	
8:12-20	8-12-20	PW	#8	D	-	RO	.67	7.26	BEST WCL, THM + HAAS CHLORATE	002
9:30AM	8-12-20	PW	#10	D	-	RO	.50	7.30	BEST WCL	
8:12-20	8-12-20	PW	#11	D	-	RO	.86	7.46	BEST WCL	

Remarks:

Sample Condition Upon Receipt

WO#: 70141551



Client Name: HBW

Project: **PM: KMM** Due Date: **08/24/20**
CLIENT: HBW

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: +0.4
 Cooler Temperature (°C): 3.7 Cooler Temperature Corrected (°C): 4.1

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: PM 8/12/20

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

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

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 <input type="checkbox"/> N/A	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 type="checkbox"/> Yes <input checked="" 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 checked="" type="checkbox"/> Yes <input type="checkbox"/> No	10.
Containers Intact:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	11. Note if sediment is visible in the dissolved container.
Filtered volume received for Dissolved tests	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	12.
Sample Labels match COC:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	13. <input type="checkbox"/> HNO ₃ <input type="checkbox"/> H ₂ SO ₄ <input type="checkbox"/> NaOH <input type="checkbox"/> HCl Sample #
-Includes date/time/ID/Analysis Matrix SL WT OIL	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
All containers needing preservation have been checked	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	Initial when completed: _____ Lot # of added preservative: _____ Date/Time preservative added: _____
pH paper Lot #		14. Positive for Res. Chlorine? Y N
All containers needing preservation are found to be in compliance with EPA recommendation? (HNO ₃ , H ₂ SO 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	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Samples checked for dechlorination: KI starch test strips Lot #	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	15.
Residual chlorine strips Lot #	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	16.
Headspace in VOA Vials (>6mm):	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Trip Blank Present:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
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: _____ Date/Time: _____
 Person Contacted: _____
 Comments/ Resolution: _____

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