

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. : 70159357

Received :01/13/2021 4:23
 Sample Type :Drinking Water

Date Reported:01/14/2021

Lab	Location	Collected	Units Metho Limits	<u>E.coli</u>	<u>Total Coliforms</u>	<u>Field Residual</u>
				N/A SM22 9223B Colilert Absent	N/A SM22 9223B Colilert Absent	mg/L 4
70159357001	HB12 Routine Distribution M. Layburn Squires Pond Rd.	1/13/2021 8:00:00 Collected by: CLIENT	Analysis Time	Absent 1/14/2021 11:53:00	Absent 1/14/2021 11:53:00	0.39 1/13/2021 8:10:00 AM
70159357002	HB13 Routine Distribution H.B. Bagel W. Montauk Hwy.	1/13/2021 8:15:00 Collected by: CLIENT	Analysis Time	Absent 1/14/2021 11:53:00	Absent 1/14/2021 11:53:00	0.51 1/13/2021 8:15:00 AM
70159357003	HB28 Routine Distribution Huebner Oakwood Rd.	1/13/2021 8:30:00 Collected by: CLIENT	Analysis Time	Absent 1/14/2021 11:53:00	Absent 1/14/2021 11:53:00	0.69 1/13/2021 8:20:00 AM
70159357004	HB29 Routine Distribution McFarland Ridgewood La.	1/13/2021 8:45:00 Collected by: CLIENT	Analysis Time	Absent 1/14/2021 11:53:00	Absent 1/14/2021 11:53:00	0.53 1/13/2021 8:45:00 AM
70159357005	HB16 Routine Distribution Spellman's Marine Rampasture Rd.	1/13/2021 9:00:00 Collected by: CLIENT	Analysis Time	Absent 1/14/2021 11:53:00	Absent 1/14/2021 11:53:00	0.51 1/13/2021 9:00:00 AM
70159357006	HB34 Routine Distribution Kappers - 23 Washington Ave.	1/13/2021 9:30:00 Collected by: CLIENT	Analysis Time	Absent 1/14/2021 11:53:00	Absent 1/14/2021 11:53:00	0.53 1/13/2021 9:30:00 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	G = Granular Activated
FM = Iron/Manganese Removal	
N = Nitrate Removal	O = Other

Test results meet the requirements of NELAC unless otherwise noted.

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Kimberley Mack
 Kimberley Mack

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			<u>Metho</u>	N/A	N/A	mg/L
			<u>Limits</u>	SM22 9223B Colilert	SM22 9223B Colilert	
				Absent	Absent	4
70159357007	HB31	1/13/2021 9:15:00		Absent	Absent	0.59
Routine Distribution	Maryland Blvd.	Collected by: CLIENT	Analysis Time	1/14/2021 11:53:00	1/14/2021 11:53:00	1/13/2021 9:15:00 AM
70159357008	SPB#1	1/13/2021 9:45:00		Absent	Absent	0.55
Routine Distribution	Adj. Hydrant#465	Collected by: CLIENT	Analysis Time	1/14/2021 11:53:00	1/14/2021 11:53:00	1/13/2021 9:45:00 AM
70159357009	HB21	1/13/2021 10:00:00		Absent	Absent	0.53
Routine Distribution	H.B. Fire Dept. Montauk Hwy.	Collected by: CLIENT	Analysis Time	1/14/2021 11:53:00	1/14/2021 11:53:00	1/13/2021 10:00:00
70159357010	HB5A	1/13/2021 10:15:00		Absent	Absent	0.39
Routine Distribution	Sunday's By The Bay Dune Rd.	Collected by: CLIENT	Analysis Time	1/14/2021 11:53:00	1/14/2021 11:53:00	1/13/2021 10:15:00

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

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

WorkOrder :

70159357

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

Del. by: *[Signature]* 16:23 1/13/21

Date: 1-13-21
 Collected By: K. T. WILLIAMS / G. VALENTI (W/O)
 Accepted By: [Signature] 13:36 1/13/21
 Cooler Temp: 5.9 °C

WELL OFF LINE
 WELL RUN TO SYSTEM
 YES NO VOC'S PRESERVED WITH HCl

Client Info:
 Name or Code: HAMPTON BAYS WATER DISTRICT
 Address: PO. BOX 4013
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 pH/Temp	Analysis	Lab No.
8:00 AM 1-13-21	PW	#12	D	-	RO	.39 7.48	BACT w/CL	
8:15 AM 1-13-21	PW	#13	D	-	RO	.51 7.55	BACT w/CL	
8:30 AM 1-13-21	PW	#28	D	-	RO	.69 7.61	BACT w/CL	
8:45 AM 1-13-21	PW	#29	D	-	RO	.53 7.53	BACT w/CL	
9:00 AM 1-13-21	PW	#16	D	-	RO	.51 7.61	BACT w/CL	
9:30 AM 1-13-21	PW	#34	D	-	RO	.53 7.57	BACT w/CL	
9:45 AM 1-13-21	PW	#31	D	-	RO	.59 7.57	BACT w/CL	
9:45 AM 1-13-21	PW	SPB #1	D	-	RO	.55 7.29	BACT w/CL	
10:00 AM 1-13-21	PW	#21	D	-	RO	.53 7.42	BACT w/CL	
10:15 AM 1-13-21	PW	#5A	D	-	RO	.39 7.36	BACT w/CL	

Remarks:



Sample Condition upon Receipt

WO#: 70159357

Client Name: Hampton Bay W.D.

PM: KMM Due Date: 02/12/21 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: -0.2 Cooler Temperature (C): 5.9 Cooler Temperature Corrected (C): 5.7

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 6.0C USDA Regulated Soil (N/A, water sample) Date and Initials of person examining contents: 11/13/21 EU

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 including Hawaii and Puerto Rico? Yes No

Table with 17 rows and 3 columns. Columns: Question, Yes/No/N/A, Comments. Rows include Chain of Custody Present, Filtered volume received for Dissolved tests, All containers needing preservation have been checked?, etc.

Client Notification/ Resolution: Person Contacted: Comments/ Resolution: Field Data Required? Y / N Date/Time:

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