



575 Broad Hollow Road, Melville, NY 11747
 TEL: (516) 370-6000 FAX: (516) 886-5526
 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
18B Ponquogue Ave.
PO Box 1013
Hampton Bays, NY 11946
Attn To : Keith Tuthill
 Federal ID : 5103704

Lab Project No. : 70413883

Received :03/25/26 5:50 PM
 Sample Type :Drinking Water

Date Reported:03/27/2026

Lab	Location	Collected	Units	E.coli	Total Coliforms	Field Residual
			Method	N/A	N/A	mg/L
			Limits	Absent	Absent	4
70413883001	HB29	3/25/26 8:07:00 AM		Absent	Absent	0.67
Routine	McFarland	Collected by: Hampton	Analysis	3/26/26 11:55:00 AM	3/26/26 11:55:00 AM	3/25/26 8:07:00 AM
Distribution	Ridgewood La.	Bays Water District	Time			
70413883002	HB34	3/25/26 9:17:00 AM		Absent	Absent	0.73
Routine	Kappers	Collected by: Hampton	Analysis	3/26/26 11:55:00 AM	3/26/26 11:55:00 AM	3/25/26 9:17:00 AM
Distribution	23 Washington Ave.	Bays Water District	Time			
70413883003	SPB#1	3/25/26 8:41:00 AM		Absent	Absent	0.61
Routine	SPB#1	Collected by: Hampton	Analysis	3/26/26 11:55:00 AM	3/26/26 11:55:00 AM	3/25/26 8:41:00 AM
Distribution	Adj. Hydrant#465	Bays Water District	Time			
70413883004	HB5A	3/25/26 8:23:00 AM		Absent	Absent	0.38
Routine	Sunday's By The Bay	Collected by: Hampton	Analysis	3/26/26 11:55:00 AM	3/26/26 11:55:00 AM	3/25/26 8:23:00 AM
Distribution	Dune Rd.	Bays Water District	Time			
70413883005	HB21	3/25/26 9:00:00 AM		Absent	Absent	0.71
Routine	H.B. Fire Dept.	Collected by: Hampton	Analysis	3/26/26 11:55:00 AM	3/26/26 11:55:00 AM	3/25/26 9:00:00 AM
Distribution	Montauk Hwy.	Bays Water District	Time			

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.

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

Michelle Cohen



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WorkOrder :

70413883

Laboratory Certifications

Pace Analytical Services, LLC - Melville, NY

575 Broad Hollow Rd, Melville, NY 11747

Connecticut Certification #: PH-0435

Delaware Certification # NY 10478

Maryland Certification #: 208

Massachusetts Certification #: M-NY026

New Hampshire Certification #: 2987

New Jersey Certification #: NY158

New York Certification #: 10478 Primary Accrediting Body

Pennsylvania Certification #: 68-00350

Rhode Island Certification #: LAO00340

Texas Certification #: T104704582

Florida Certification #: E871198

Vermont Certification #: VT-10478

Client: **HBW**
Work ID: **DIST BACT 3/25**

Profile #: **5223**

Use Point Number Spreadsheet Multiday Project

COC Page _____ of _____
Add SCLOGFD to first sample for field charge

COC Line Item	Matrix	Container Codes	Matrix
1			
2			
3			
4			
5			
6			
7			
8			
9			
10			
11			
12			

WO#: 70413883
PM: MC1 Due Date: 04/06/26
CLIENT: HBW

Container Codes	Glass	Plastic
VG9U	40mL unpres clear vial	BP4U 125mL unpreserved plastic
VG9C	40mL Ascorbic-HCl clear vial	BP3U 250mL unpreserved plastic
VG9H	40mL HCl clear vial	BP2U 500mL unpreserved plastic
VG9S	40mL Sulfuric clear vial	BP1U 1L unpreserved plastic
VG9T	40mL Na Thiosulfate vial	BP4N 125mL HNO3 plastic
DG9Y	40mL Citrate-Na Thiosulfate	BP3N 250mL HNO3 plastic
DG9P	40mL amber vial - TSP	BP2N 500mL HNO3 plastic
DG9A	Ascorbic/Maleic Acid 40mL	BP3S 250mL H2SO4 plastic
DG6T	Na Thio 60mL Vial	BP2S 500mL H2SO4 plastic
DG9S	Ammonium Cl/CuSO4 40mL	BP3C NaOH 250mL bottle
CG1U	1L Unpres Jar (Can Ect)	BP3T 250mL Trimza
WG9O	8oz clear soil jar	AG1A (NH4Cl)
WG9O	4oz clear soil jar	AG5U 100mL unpres Amber Glass
		AG44 Ammonium Cl 120mL bottle
		BP1Z 1L NaOH, Zn Acetate
		BP1N 1L HNO3 plastic
		BP1B Na Thiosulfate Amber Bottle

Misc.
SP5T 120mL Coliform Na Thio
R Terracore Kit
WG2U 2oz Unpreserved Jar
WG7U 4oz Unpreserved Jar
WGKU 8oz Unpreserved Jar
WGDU 16oz Unpreserved Jar
ZPLC Zblock Bag
TEDL Tedlar Bag
BG1H 1L HCl Clear Glass
GN General
WIP Wipe
LLHG Low Level Hq Bottles
BG1N 1L HNO3 Clear Glass

IOC
BP1U 1L unpreserved plastic
BP3N* 250mL HNO3 plastic
BP3C 250mL Sodium Hydroxide
AG2U 500mL unpres amber glass
BP3U 250mL unpreserved plastic

* Can also be a BP4N

SOC
VG9T 40mL Na Thio amber vial
DG9A 40mL Ascorbic acid/maleic Acid vials
DG9Y Citrate/Na Thiosulfate 40mL
DG6T Na Thiosulfate 60mL vial
DG6M MonoAcetic/Na Thio 60mL
AG3U 250mL unpres amber glass
AG3T Na Thiosulfate 250mL bottle
BP1B Na Thiosulfate Amber bottle
AG1T Na Thiosulfate 1L Amber
AG1A 525.3 Chemical Blend

Sender Initials **NF**

Additional Comments

WO#: 70413883

PM: MC1 Due Date: 04/06/26

CLIENT: HBW

Client Name: HBW

Project #

Courier: Fed Ex UPS USPS Client Commercial Pace Other

Tracking #:

Custody Seal on Cooler/Box Present: Yes No Seals intact: Yes No Temperature Blank Present: Yes No
 Packing Material: Bubble Wrap Bubble Bags Ziploc None Other Type of Ice: Wet Blue None

Thermometer Used: TARI Correction Factor: 20.1 Samples on ice, cooling process has begun 3/25/26
 Cooler Temperature(°C): 1.3 Cooler Temperature Corrected(°C): 1.2 Date/Time 5035A kits placed in freezer 1750

Temp should be above freezing to 6.0°C

USDA Regulated Soil N/A, water sample)

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

If Yes to either question, fill out a Regulated Soil Checklist (ENV-FRM-MELV-0076) and include with SCUR/COC paperwork.

Date and Initials of person examining contents: AD 3/25/26

	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 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	11.
Filtered volume received for Dissolved tests <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	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: <u>SL, WT, OIL</u> OTHER	

Date and Initials of person checking preservation: AD 3/25/26

All containers needing preservation have been pH paper Lot # <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	T3. <input type="checkbox"/> HNO ₃ <input type="checkbox"/> H ₂ SO ₄ <input type="checkbox"/> NaOH <input type="checkbox"/> HCl
All containers needing preservation are found to be in compliance with method recommendation? (HNO ₃ , H ₂ SO ₄ , HCl, NaOH>9 Sulfide, <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A NAOH>12 Cyanide)	Sample #
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. Positive for Res. Chlorine? Y N
KI starch test strips Lot #	15. Positive for Sulfide? Y N
Residual chlorine strips Lot #	
SM 4500 CN samples checked for sulf <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Lead Acetate Strips Lot #	
Headspace in ALK Bottle (>6mm): <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	16.
Headspace in VOA Vials (>6mm): <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	17.
Trip Blank Present: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Trip Blank Custody Seals Present <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	

Client Notification/ Resolution:

Field Data Required? Y / N

Person Contacted:

Date/Time:

Comments/ Resolution:

* PM (Project Manager) review (which includes the SCUR) is documented electronically in LIMS.