



## **LEAD IN POTABLE WATER SCREENING REPORT**

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**INVESTIGATION FOR:** Kenneth Stromsland  
Board of Education Township of Edison  
312 Pierson Avenue  
Edison, NJ 07642

**SITE INVESTIGATED:** John Marshall Elementary  
15 Cornell Street  
Edison, NJ 08817

**ASSESSMENT BY:** Kyle Brown  
Omega Environmental Services, Inc.  
280 Huyler Street  
South Hackensack, NJ 07606

**INVESTIGATION  
CONDUCTED:** 8/03/16

**DATE OF REPORT:** 8/25/16

(Omega Project # 16-27002E)

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## **EXECUTIVE SUMMARY:**

The Board of Education Township of Edison requested lead in water testing of potable water outlets at John Marshall Elementary, 15 Cornell Street, Edison, NJ 08817.

### *Previous Testing*

No information related to previous testing was available.

### *Recent Testing (8/03/16)*

In order to assess the building water outlets a full testing of all potable outlets was performed on August 3, 2016.

Reportedly the outlets were not flushed or used on the day of testing.

First draw and flush samples (30 second) were collected of 36 water fountains and sinks.

**Results of most first draw samples analyzed were below the Lead and Copper Rule action level of 15 ppb. Seven first draw samples were above 15 ppb. The associated flush samples were below 15 ppb.**

See Section 3 Discussion of Results

# 1 RESULTS TABLE:

Outlet #	Sample #	Location	1 <sup>st</sup> draw (FD) or flush (FL)	Results (ppb)	LCR Action Level <sup>(1)</sup> (ppb)
11	1	Water Fountain Nurse's Office	FD	23	15
11	2	Water Fountain Nurse's Office	FL	2	15
13	3	Water Fountain Near Guidance Department	FD	18	15
13	4	Water Fountain Near Guidance Department	FL	1.1	15
15	5	Water Fountain Room 5	FD	13	15
15	6	Water Fountain Room 5	FL	3.1	15
14	7	Water Fountain Room 6	FD	2,300	15
14	8	Water Fountain Room 6	FL	14	15
17	9	Water Fountain Room 3	FD	21	15
17	10	Water Fountain Room 3	FL	2.6	15
16	11	Water Fountain Room 4	FD	14	15
16	12	Water Fountain Room 4	FL	1.8	15
19	13	Water Fountain Room 1	FD	1.3	15
19	14	Water Fountain Room 1	FL	1.7	15
18	15	Water Fountain Room 2	FD	1.2	15
18	16	Water Fountain Room 2	FL	<1.0	15
09	17	Water Fountain across Speech Room	FD	5.0	15
09	18	Water Fountain across Speech Room	FL	6.6	15
03	19	Kitchen Sink near stove	FD	6.0	15
03	20	Kitchen Sink near stove	FL	<1.0	15
03A	21	Kitchen Sink near food display	FD	6.6	15
03A	22	Kitchen Sink near food display	FL	<1.0	15
02	23	Kitchen Sink washing station (L)	FD	17	15
02	24	Kitchen Sink washing station (L)	FL	<1.0	15
01	25	Kitchen Sink washing station (R)	FD	9.0	15
01	26	Kitchen Sink washing station (R)	FL	<1.0	15
21	27	Water Fountain Room 7	FD	12	15
21	28	Water Fountain Room 7	FL	1.7	15
20	29	Water Fountain Room 8	FD	11	15
20	30	Water Fountain Room 8	FL	1.7	15
23	31	Water Fountain Room 9	FD	6.2	15
23	32	Water Fountain Room 9	FL	1.9	15
22	33	Water Fountain Room 10	FD	4.6	15
22	34	Water Fountain Room 10	FL	1.7	15
28	35	Water Fountain Room 11	FD	8.1	15
28	36	Water Fountain Room 11	FL	1.9	15
27	37	Water Fountain Room 12	FD	9.7	15
27	38	Water Fountain Room 12	FL	1.9	15

33	39	Water Fountain Room 13	FD	7.2	15
33	40	Water Fountain Room 13	FL	3.2	15
32	41	Water Fountain Room 14	FD	21	15
32	42	Water Fountain Room 14	FL	5.8	15
35	43	Water Fountain Room 15	FD	11	15
35	44	Water Fountain Room 15	FL	2.8	15
34	45	Water Fountain Room 16	FD	15	15
34	46	Water Fountain Room 16	FL	2.8	15
53	47	Water Fountain next to Music Room (L)	FD	8.4	15
53	48	Water Fountain next to Music Room (L)	FL	14	15
54	49	Water Fountain next to Music Room (C)	FD	4.5	15
54	50	Water Fountain next to Music Room (C)	FL	5.0	15
55	51	Water Fountain next to Music Room (R)	FD	1.4	15
55	52	Water Fountain next to Music Room (R)	FL	<1.0	15
50	53	Water Fountain Room 33	FD	3.4	15
50	54	Water Fountain Room 33	FL	<1.0	15
49	55	Water Fountain Room 30	FD	2.5	15
49	56	Water Fountain Room 30	FL	<1.0	15
48	57	Water Fountain Room 31	FD	9.2	15
48	58	Water Fountain Room 31	FL	<1.0	15
47	59	Water Fountain Room 28	FD	29	15
47	60	Water Fountain Room 28	FL	<1.0	15
46	61	Water Fountain Room 29	FD	<1.0	15
46	62	Water Fountain Room 29	FL	1.2	15
45	63	Water Fountain Room 26	FD	<1.0	15
45	64	Water Fountain Room 26	FL	<1.0	15
28	65	Water Fountain next to Faculty Bathroom	FD	<1.0	15
28	66	Water Fountain next to Faculty Bathroom	FL	<1.0	15
43	67	Sink in Teacher Room	FD	1.6	15
43	68	Sink in Teacher Room	FL	<1.0	15
44	69	Water Fountain Room 27	FD	2.5	15
44	70	Water Fountain Room 27	FL	<1.0	15
32	71	Water Fountain Room 24	FD	4.4	15
32	72	Water Fountain Room 24	FL	3.1	15

<sup>(1)</sup> EPA Lead in Copper Rule (1991) Action Level for water suppliers (municipalities and private wells) and March 2016 Newark Public Schools Lead Water Testing Sampling Plan.

FD – First Draw Sample

FL – Flush Sample (30 sec)

NA – Not Analyzed

## **2 SAMPLING METHODOLOGY:**

First Draw Samples - Without allowing any water to spill until sample collection, samples were collected with a relatively slow flow rate in 250 mL bottles prepared with Nitric Acid (HNO<sub>3</sub>) as a preservative.

Flush Samples – After collection of first draw samples the water was allowed to flow at a relatively slow rate for thirty second to flush the fixture and close piping. The flush samples are intended to test the plumbing further upstream from the fixture (behind walls).

The samples were packaged in a cooler and shipped to Pace Analytical, Melville, NY for total lead in potable water analysis (method E200.8 IOC).

## **3 DISCUSSION OF RESULTS:**

Seven first draw sample results were above 15 ppb, but associated flush samples results were below 15 ppb. This indicates the source of lead is related to the fixtures themselves, not in the main building plumbing.

## **4 RECOMMENDATIONS:**

### *Short term:*

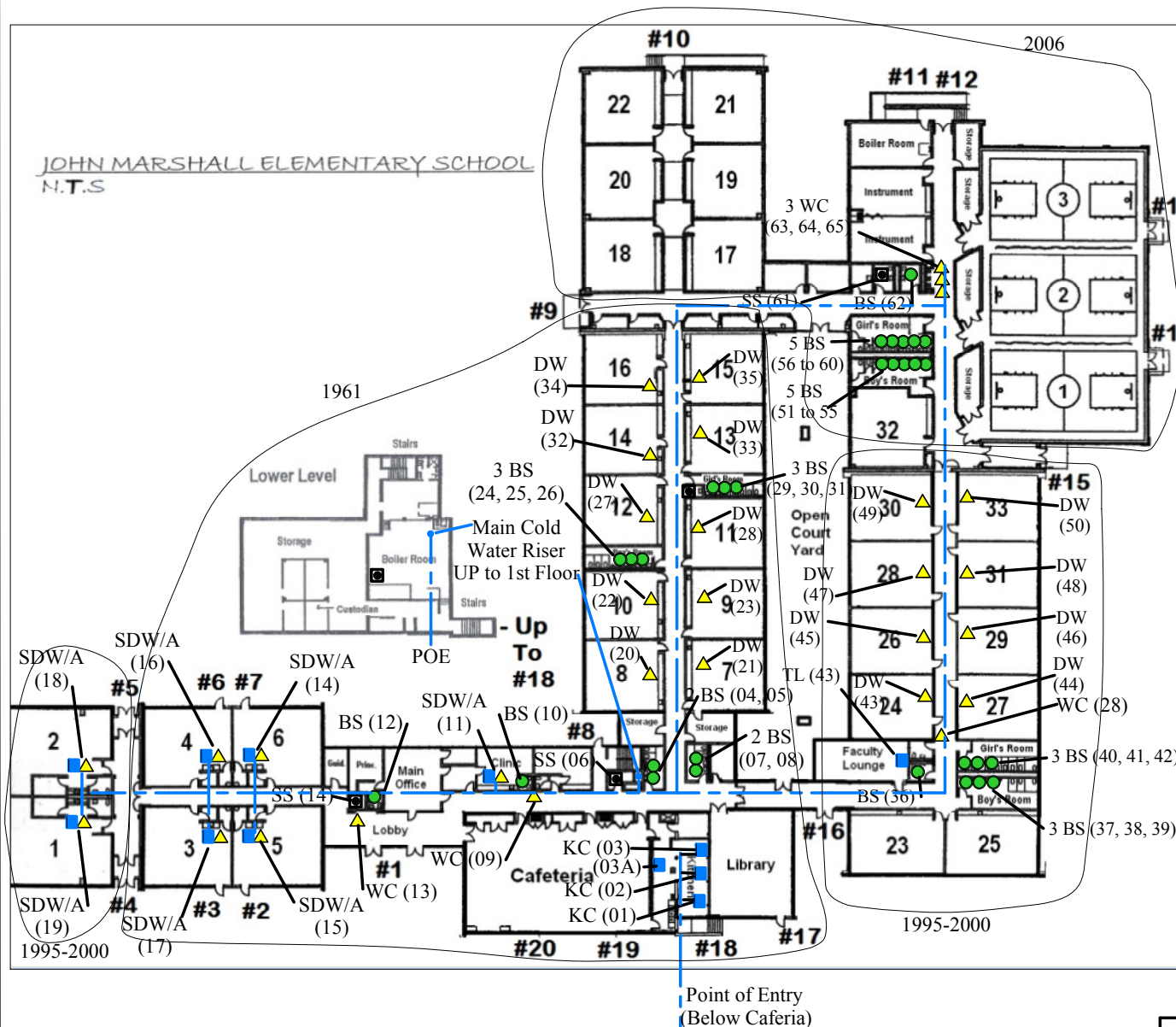
- Conduct further evaluation and testing of outlets with elevated results.
- Take any outlets with elevated results out of service.

### *Long Term:*

- If additional testing shows similar results (first draw results above 15 ppb) consider replacing the spout of the fountains (may contain brass, adding to lead levels), installing filters (if practical), or fixture replacement.
- Repeat full building testing on an annual basis. Generally this should be performed in August prior to the start of the school season.
- Develop a Lead in Water Management Plan in accordance with the 2006 EPA 3Ts for Reducing Lead in Drinking Water in Schools.

## A. Outlet Location Plan

# JOHN MARSHALL ELEMENTARY SCHOOL N.T.S



## KEY

- KC = Kitchen Outlet, Cold
- ▲ WC = Water Cooler (Chilled Bubbler Unit)
- TL= Teacher Lounge Sink
- FP= Food Preparation Sink
- ▲ DW= Drinking Water Bubbler (non-chilled)
- ▲ SDW= Combination Sink Water Bubbler
- ▲ DDW=Double Drinking Water Bubbler
- EC = Home Economics Outlet, Cold
- IM = Ice Machine
- BS = Bathroom Sink
- NS = Nurse's Office Sink
- SS=Janitors Slop Sink
- /A = outlet has an aerator
- /F = outlet has a filter
- (01)=Outlet Number

## Notes

1. Point of Entry is below Cafeteria. Small risers feed the kitchen and the main service travels into the Boiler Room. The main riser travels up to above the 1st Floor ceiling tiles. Distribution piping runs above the ceiling in hallways with laterals to each group of outlets.
2. Original building was constructed in 1961. Additions were constructed in 1995 to 2000 and in 2006 as shown above. Areas circled are reported additions

Dwg. Title: Plumbing Schematic		
Location: John Marshall Elementary School, Edison, NJ		
Client: Edison Board of Education		
<b>OMEGA</b> ENVIRONMENTAL SERVICES, INC.	280 Huyler Street S. Hackensack, NJ 07606 Tel: (201) 489-8700 Fax: (201) 342-5412	Date: 8/24/16
		Proj. # 16-27002E
		Dwn. By: DSE
		Dwg. # 27002E-01P

## B. Lead in Water Laboratory Reports



# CHAIN-OF-CUSTODY / Analytical Request Document

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.

<b>Section A</b> Required Client Information:		<b>Section B</b> Required Project Information:		<b>Section C</b> Invoice Information:	
Company:	Omega Environmental	Report To:	Lab@omega-env.com	Attention:	Accts Payable
Address:	280 Huyler Street	Copy To:	mikel@omega-env.com, davide@omega-env.com	Company Name:	Omega Environmental
	S. Hackensack, NJ 07606	Purchase Order No.:	emmam@omega-env.com	Address:	280 Huyler St, S Hackensack, NJ
Email To:	Lab@Omega-env.com	Project Name:	John Marshall Elementary	Pace Quote Reference:	
Phone:	201-489-8700	Project Number:	16-270023	Pace Project Manager:	
Requested Due Date/TAT:	5 day			Pace Profile #:	

Page: 1 of 6

<b>REGULATORY AGENCY</b>	
<input type="checkbox"/> NPDES	<input type="checkbox"/> GROUND WATER
<input type="checkbox"/> UST	<input type="checkbox"/> RCRA
<input checked="" type="checkbox"/> DRINKING WATER	<input type="checkbox"/> OTHER
Site Location	STATE: NJ

ITEM #	Section D Required Client Information	Valid Matrix Codes MATRIX CODE DRINKING WATER DW WASTE WATER WT WASTE WATER PRODUCT P WASTE WATER SOIL/SOLID SL OIL OL WIPE WIPE WP AIR AR OTHER OT TISSUE TS	MATRIX CODE (see valid codes to left)	COLLECTED		SAMPLE TYPE (G=GRAB C=COMP)	SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives							Y/N ↑	Residual Chlorine (Y/N)	Pace Project No./ Lab I.D.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																					
				COMPOSITE START	COMPOSITE END/GRAB				DATE	TIME	DATE	TIME	Unpreserved	H <sub>2</sub> SO <sub>4</sub>	HNO <sub>3</sub>				HCl	NaOH	Na <sub>2</sub> S <sub>2</sub> O <sub>3</sub>	Methanol	Other																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
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Hand to turn WF on in Room 6	Kyle Brown / Omega sampler	8/3/16	11:45	Accepted By / Affiliation	8/5/16 10:00	DATE	TIME	SAMPLE CONDITIONS
FD - First Draw Sample								
FL - Flush Sample								
SAMPLER NAME AND SIGNATURE				DATE Signed (MM/DD/YY): 08/03/16				
PRINT Name of SAMPLER: Kyle Brown								
SIGNATURE of SAMPLER: [Signature]								
Temp in °C				Received on				
Sealed Cooler (Y/N)				Custody (Y/N)				
Samples Intact (Y/N)								

7637 4590 7291

\*Important Note: By signing this form you are accepting Pace's NET 30 day payment terms and agreeing to late charges of 1.5% per month for any invoices not paid within 30 days.

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Address:	280 Huyler Street	Copy To:	mikel@omega-env.com, david@omega-env.com	Company Name:	Omega Environmental
Email To:	Lab@Omega-env.com		emman@omega-env.com	Address:	280 Huyler St, S Hackensack, NJ
Phone:	201-489-8700	Purchase Order No.:		Pace Quote Reference:	
Requested Due Date/TAT:	5 day	Project Name:	John Marshall Elementary	Pace Project Manager:	
		Project Number:	16-27002E	Pace Profile #:	

<b>REGULATORY AGENCY</b>	
<input type="checkbox"/> NPDES	<input type="checkbox"/> GROUND WATER
<input type="checkbox"/> UST	<input checked="" type="checkbox"/> RCRA
<input type="checkbox"/> OTHER	

ITEM #	Section D Required Client Information	Valid Matrix Codes MATRIX CODE DRINKING WATER DW WASTE WATER WW WASTE WATER PRODUCT P SOIL/SOLID SL OIL OL WIPE WP AIR AR OTHER OT TISSUE TS	SAMPLE TYPE (G=GRAB C=COMP) (see valid codes to left)	COLLECTED				SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives										Analysis Test ↓ Analysis Test ↓	Y/N ↓	Requested Analysis Filtered (Y/N)												Pace Project No./ Lab I.D.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
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ADDITIONAL COMMENTS		RELINQUISHED BY / AFFILIATION		DATE		TIME		ACCEPTED BY / AFFILIATION		DATE		TIME		SAMPLE CONDITIONS			
FD - First Draw Sample		Kyle Begen / Omega sampler		8/3/16		11:45		Kyle Begen		8/5/16		10:00					
FL - Flush Sample																	

<b>SAMPLER NAME AND SIGNATURE</b>	
PRINT Name of SAMPLER:	Kyle Begen
SIGNATURE of SAMPLER:	<i>Kyle Begen</i>
DATE Signed (MM/DD/YY):	08/03/16

Temp In °C	
Received on	
Custody Sealed Cooler (Y/N)	
Samples Intact (Y/N)	

\*Important Note: By signing this form you are accepting Pace's NET 30 day payment terms and agreeing to late charges of 1.5% per month for any invoices not paid within 30 days.



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Address:	280 Huyler Street	Copy To:	mikel@omega-env.com, davide@omega-env.com	Company Name:	Omega Environmental
Email To:	Lab@Omega-env.com	Purchase Order No.:	emmam@omega-env.com	Address:	280 Huyler St, S Hackensack, NJ
Phone:	201-489-8700	Project Name:	John Marshall Elementary	Pace Quote Reference:	
Requested Due Date/TAT:	5 day	Project Number:	16-27002E	Pace Project Manager:	
				Pace Profile #:	

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<b>Section D</b> Required Client Information		<b>Section E</b> Requested Analysis Filtered (Y/N)	
Valid Matrix Codes	CODE	NPDES	GROUND WATER
MATRIX	DW	UST	RCRA
DRINKING WATER	WT		OTHER
WASTE WATER	WW		
PRODUCT	P		
SOIL/SOLID	SL		
OIL	OL		
WIPE	WP		
AIR	AR		
OTHER	OT		
TISSUE	TS		

Phone: 201-489-8700		Fax: 5 day		Project Name: John Marshall Elementary		Pace Project Manager:		Site Location NJ		Pace Project No./ Lab I.D.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																															
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SAMPLE ID (A-Z, 0-9 / -) Sample IDs MUST BE UNIQUE		MATRIX CODE (see valid codes to left)		DATE		DATE		TIME		TIME		DATE		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME		DATE		TIME	

RELINQUISHED BY / AFFILIATION		DATE	TIME	ACCEPTED BY / AFFILIATION		DATE	TIME	SAMPLE CONDITIONS			
Kyle Boren / Omega Sampler		8/3/16	11:45	Kyle Boren		8/5/16	10:00				
ADDITIONAL COMMENTS											
FD - First Draw Sample											
FL - Flush Sample											
Temp In °C				Received on		Ice (Y/N)		Custody Sealed Cooler (Y/N)		Samples Intact (Y/N)	
SAMPLER NAME AND SIGNATURE											
PRINT Name of SAMPLER: Kyle Boren				DATE Signed (MM/DD/YY): 08/03/16							
SIGNATURE of SAMPLER: Kyle Boren											

\*Important Note: By signing this form you are accepting Pace's NET 30 day payment terms and agreeing to late charges of 1.5% per month for any invoices not paid within 30 days.



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Phone:	201-489-8700	Project Name:	John Maguire Elementary	Pace Quote Reference:	
Requested Due Date/TAT:	5 day	Project Number:	16-22002E	Pace Project Manager:	
				Pace Profile #:	

<b>REGULATORY AGENCY</b>	
<input type="checkbox"/> NPDES	<input type="checkbox"/> GROUND WATER
<input type="checkbox"/> UST	<input type="checkbox"/> RCRA
<input checked="" type="checkbox"/> DRINKING WATER	<input type="checkbox"/> OTHER

Site Location	NJ
STATE:	

Page: 41 of 6

ITEM #	Section D Required Client Information	Valid Matrix Codes MATRIX CODE DRINKING WATER DW WASTE WATER WW PRODUCT P SOIL/SOLID SL OIL OL WIPE WP AIR AR OTHER OT TISSUE TS	MATRIX CODE (see valid codes to left)	SAMPLE TYPE (G=GRAB C=COMP)	COLLECTED		SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives							Analysis Test ↑ Lead in drink water 200.8	Residual Chlorine (Y/N)	Pace Project No./ Lab I.D.		
					COMPOSITE START	COMPOSITE END/GRAB			DATE	TIME	DATE	TIME	Unpreserved	H <sub>2</sub> SO <sub>4</sub>	HNO <sub>3</sub>				HCl	NaOH
1	37 - WP Room 12 - FD		DW	G			8/9/16	6:00												
2	38 - WF Room 12 - FL		DW	G																
3	39 - WP Room 13 - FD		DW	G																
4	40 - WF Room 13 - FL		DW	G																
5	41 - WP Room 14 - FD		DW	G																
6	42 - WF Room 14 - FL		DW	G																
7	43 - WF Room 15 - FD		DW	G																
8	44 - WP Room 15 - FL		DW	G																
9	45 - WF Room 16 - FD		DW	G																
10	46 - WF Room 16 - FL		DW	G																
11	47 - WF Next to Music Room L - FD		DW	G																
12	48 - J		DW	G																

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION		DATE		ACCEPTED BY / AFFILIATION		DATE		SAMPLE CONDITIONS	
	Kyle Brown/Omega Env	Sampler	8/9/16	11:45					8/16/16	

FD - First Draw Sample																				
FL - Flush Sample																				

SAMPLER NAME AND SIGNATURE	
PRINT Name of SAMPLER:	Kyle Brown
SIGNATURE of SAMPLER:	Kyle Brown
DATE Signed (MM/DD/YY):	08/03/16

Temp In °C		Received on		Custody		Sealed Cooler		Samples Intact	

\*Important Note: By signing this form you are accepting Pace's NET 30 day payment terms and agreeing to late charges of 1.5% per month for any invoices not paid within 30 days.

# CHAIN-OF-CUSTODY / Analytical Request Document

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.

<b>Section A</b> Required Client Information:		<b>Section B</b> Required Project Information:		<b>Section C</b> Invoice Information:	
Company: Omega Environmental		Report To: Lab@omega-env.com		Attention: Accts Payable	
Address: 280 Huyler Street		Copy To: mikel@omega-env.com, davide@omega-env.com		Company Name: Omega Environmental	
S. Hackensack, NJ 07606		emman@omega-env.com		Address: 280 Huyler St, S Hackensack, NJ	
Email To: Lab@Omega-env.com		Purchase Order No.:		Pace Quote Reference:	
Phone: 201-489-8700		Project Name: <i>John's 1st 11 Elements</i>		Pace Project Manager:	
Requested Due Date/TAT: 5 day		Project Number: <i>16-27,025</i>		Pace Profile #:	

Page: **5** of **6**

<b>REGULATORY AGENCY</b>	
<input type="checkbox"/> NPDES	<input type="checkbox"/> GROUND WATER
<input type="checkbox"/> UST	<input type="checkbox"/> RCRA
<input checked="" type="checkbox"/> DRINKING WATER	<input type="checkbox"/> OTHER
Site Location	
STATE: <b>NJ</b>	

ITEM #	Section D Required Client Information	Valid Matrix Codes MATRIX CODE DRINKING WATER DW WASTE WATER WW WASTE WATER PRODUCT P SOIL/SOLID SL OIL OL WIPE WP AIR AR OTHER OT TISSUE TS	MATRIX CODE (see valid codes to left)	SAMPLE TYPE (G=GRAB C=COMP)	COLLECTED				SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives										Analysis Test ↑	W/N ↑	Requested Analysis Filtered (Y/N)										Pace Project No./ Lab I.D.																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																									
					COMPOSITE START	COMPOSITE END/GRAB	DATE	TIME			DATE	TIME	DATE	TIME	DATE	TIME	DATE	TIME	DATE	TIME			DATE	TIME	DATE	TIME																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																
1	49 - WF Next to Music Room C - FD		DW	G				8/3/16	6:20																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																	

ADDITIONAL COMMENTS		RELINQUISHED BY / AFFILIATION		DATE		TIME		ACCEPTED BY / AFFILIATION		DATE		TIME		SAMPLE CONDITIONS	
		Kyle Brown/Omega Sampler		8/3/16		11:45		K. Brown		8/16/16		15:16		10:00	
FD - First Draw Sample															
FL - Flush Sample															

<b>SAMPLER NAME AND SIGNATURE</b>	
PRINT Name of SAMPLER: <i>Kyle Brown</i>	DATE Signed (MM/DD/YYYY): <i>8/16/16</i>
SIGNATURE of SAMPLER: <i>[Signature]</i>	

Temp in °C	Received on Ice (Y/N)	Custody Sealed Cooler (Y/N)	Samples Intact (Y/N)

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.

Page: 6 of 6

<b>Section A</b> Required Client Information:		<b>Section B</b> Required Project Information:		<b>Section C</b> Invoice Information:					
Company:	Omega Environmental	Report To:	Lab@omega-env.com	Attention:	Accts Payable				
Address:	280 Huyler Street S. Hackensack, NJ 07606	Copy To:	mikel@omega-env.com, david@omega-env.com	Company Name:	Omega Environmental				
Email To:	Lab@Omega-env.com		emnam@omega-env.com	Address:	280 Huyler St, S Hackensack, NJ				
Phone:	201-489-8700	Purchase Order No.:		Pace Quote Reference:					
Fax:		Project Name:	John Maltby's Elementary	Pace Project Manager:					
Requested Due Date/TAT:	5 day	Project Number:	16-27002E	Pace Profile #:					
			<table border="1"> <tr> <td colspan="2"> <b>REGULATORY AGENCY</b>  <input type="checkbox"/> NPDES   <input type="checkbox"/> GROUND WATER   <input checked="" type="checkbox"/> DRINKING WATER  <input type="checkbox"/> UST   <input type="checkbox"/> RCRA   <input type="checkbox"/> OTHER _____ </td> </tr> <tr> <td> <b>Site Location</b>  NJ </td> <td> <b>STATE:</b>  </td> </tr> </table>			<b>REGULATORY AGENCY</b> <input type="checkbox"/> NPDES <input type="checkbox"/> GROUND WATER <input checked="" type="checkbox"/> DRINKING WATER <input type="checkbox"/> UST <input type="checkbox"/> RCRA <input type="checkbox"/> OTHER _____		<b>Site Location</b> NJ	<b>STATE:</b> 
<b>REGULATORY AGENCY</b> <input type="checkbox"/> NPDES <input type="checkbox"/> GROUND WATER <input checked="" type="checkbox"/> DRINKING WATER <input type="checkbox"/> UST <input type="checkbox"/> RCRA <input type="checkbox"/> OTHER _____									
<b>Site Location</b> NJ	<b>STATE:</b> 								

[illegible]

	Temp In °C	Received on Ice (Y/N)	Custody Sealed Cooler (Y/N)	Samples Intact (Y/N)	SAMPLER NAME AND SIGNATURE						
D - First Draw Sample											
L - Flush Sample											
Kyle Brown / Omega Sample #1	8/3/16	11:45	[Signature]	8/3/16 10:00							

SIGNATURE of SAMPLER: Kyle Brown  
DATE Signed MM/DD/YYYY: 08/13/16



## 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 requested.

### Omega Environmental Services

280 Huyler Street

South Hackensack, NJ 07606

Attn To : Michael Levay

Federal ID :

Copies To :

Received : 08/05/16 10:00 AM

Collected By : Client

Sample Type : Potable Water

CC

Date Reported : 8/18/2016

Lab Number	Location	Collected	<u>Lead</u>	
			<u>Units</u>	ug/L
			<u>Method</u>	E200.8 : IOC
			<u>Limits</u>	15
1608711-001A	WF NURSE'S OFFICE-FD	8/3/2016 6:00:00 AM	Analysis	23 *
	1		Time	8/11/2016 8:26:23 PM
Distribution				JOHN MARSHALL ELEMENTARY
1608711-002A	WF NEAR GUIDANCE DE	8/3/2016 6:00:00 AM	Analysis	18 *
	3		Time	8/11/2016 8:29:18 PM
Distribution				JOHN MARSHALL ELEMENTARY
1608711-003A	WF ROOM 5-FD	8/3/2016 6:00:00 AM	Analysis	13
	5		Time	8/11/2016 8:32:12 PM
Distribution				JOHN MARSHALL ELEMENTARY
1608711-004A	WF ROOM 6-FD	8/3/2016 6:00:00 AM	Analysis	2,300 D*
	7		Time	8/12/2016 2:11:50 PM
Distribution				JOHN MARSHALL ELEMENTARY
1608711-005A	WF ROOM 3-FD	8/3/2016 6:00:00 AM	Analysis	21 *
	9		Time	8/11/2016 8:38:02 PM
Distribution				JOHN MARSHALL ELEMENTARY

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

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

+ = ELAP / NELAC does not offer certification for this analyte

#### Treatments

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

Test results meet the requirements of NELAC unless otherwise noted.

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*Elizabeth Harrison*

Project Manager



## LABORATORY RESULTS

Results for the samples and analytes requested

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### Omega Environmental Services

280 Huyler Street

South Hackensack, NJ 07606

Attn To : Michael Levay

Federal ID :

Copies To :

Received : 08/05/16 10:00 AM

Collected By : Client

Sample Type : Potable Water

CC

Date Reported : 8/18/2016

Lab Number	Location	Collected	<u>Lead</u>	
			<u>Units</u>	
			<u>Method</u>	
			<u>Limits</u>	
1608711-006A	WF ROOM 24-FD	8/3/2016 6:00:00 AM	ug/L	E200.8 : IOC
	11		15	
Distribution				
			Analysis	14
			Time	8/11/2016 8:40:56 PM
				JOHN MARSHALL ELEMENTARY
1608711-007A	WF ROOM 1-FD	8/3/2016 6:00:00 AM	1.3	
	13		Analysis	8/11/2016 8:55:37 PM
Distribution			Time	
				JOHN MARSHALL ELEMENTARY
1608711-008A	WF ROOM 2-FD	8/3/2016 6:00:00 AM	1.2	
	15		Analysis	8/11/2016 8:58:31 PM
Distribution			Time	
				JOHN MARSHALL ELEMENTARY
1608711-009A	WF ACROSS SPEECH R	8/3/2016 6:00:00 AM	5.0	
	17		Analysis	8/11/2016 9:01:27 PM
Distribution			Time	
				JOHN MARSHALL ELEMENTARY
1608711-010A	KS NEAR STORE-FD	8/3/2016 6:00:00 AM	6.0	
	19		Analysis	8/11/2016 9:04:20 PM
Distribution			Time	
				JOHN MARSHALL ELEMENTARY

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

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

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#### Treatments

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*Elizabeth Harrison*

Project Manager



## LABORATORY RESULTS

Results for the samples and analytes requested

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### Omega Environmental Services

280 Huyler Street

South Hackensack, NJ 07606

Attn To : Michael Levay

Federal ID :

Copies To :

Received : 08/05/16 10:00 AM

Collected By : Client

Sample Type : Potable Water

CC

Date Reported : 8/18/2016

Lab Number	Location	Collected	<u>Lead</u>	
			<u>Units</u>	
			<u>Method</u>	
			<u>Limits</u>	
1608711-011A	KS NEAR FOOD DISPLAY	8/3/2016 6:00:00 AM		
	21		Analysis	6.6
Distribution			Time	8/11/2016 9:07:17 PM
				JOHN MARSHALL ELEMENTARY
1608711-012A	KS WASHING STATION L	8/3/2016 6:00:00 AM		
	23		Analysis	17 *
Distribution			Time	8/11/2016 9:10:10 PM
				JOHN MARSHALL ELEMENTARY
1608711-013A	KS WASHING STATION R	8/3/2016 6:00:00 AM		
	25		Analysis	9.0
Distribution			Time	8/11/2016 9:13:04 PM
				JOHN MARSHALL ELEMENTARY
1608711-014A	WF ROOM 7-FD	8/3/2016 6:00:00 AM		
	27		Analysis	12
Distribution			Time	8/11/2016 9:16:01 PM
				JOHN MARSHALL ELEMENTARY
1608711-015A	WF ROOM 8-FD	8/3/2016 6:00:00 AM		
	29		Analysis	11
Distribution			Time	8/11/2016 9:30:35 PM
				JOHN MARSHALL ELEMENTARY

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

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

+ = ELAP / NELAC does not offer certification for this analyte

#### Treatments

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 FM = Iron/Manganese Removal  
 N = Nitrate Removal O = Other

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*Elizabeth Harrison*

Project Manager



## 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 requested.

### Omega Environmental Services

280 Huyler Street

South Hackensack, NJ 07606

Attn To : Michael Levay

Federal ID :

Copies To :

Received : 08/05/16 10:00 AM

Collected By : Client

Sample Type : Potable Water

CC

Date Reported : 8/18/2016

Lab Number	Location	Collected	<u>Lead</u>	
			<u>Units</u>	
			<u>Method</u>	
			<u>Limits</u>	
1608711-016A	WF ROOM 9-FD	8/3/2016 6:00:00 AM	ug/L	E200.8 : IOC
	31		15	
Distribution				
			Analysis	6.2
			Time	8/11/2016 9:33:30 PM
				JOHN MARSHALL ELEMENTARY
1608711-017A	WF ROOM 10-FD	8/3/2016 6:00:00 AM		4.6
	33		Analysis	8/11/2016 9:36:26 PM
Distribution			Time	
				JOHN MARSHALL ELEMENTARY
1608711-018A	WF ROOM 11-FD	8/3/2016 6:00:00 AM		8.1
	35		Analysis	8/11/2016 9:39:21 PM
Distribution			Time	
				JOHN MARSHALL ELEMENTARY
1608711-019A	WF ROOM 12-FD	8/3/2016 6:00:00 AM		9.7
	37		Analysis	8/11/2016 9:42:16 PM
Distribution			Time	
				JOHN MARSHALL ELEMENTARY
1608711-020A	WF ROOM 13-FD	8/3/2016 6:00:00 AM		7.2
	39		Analysis	8/11/2016 9:45:11 PM
Distribution			Time	
				JOHN MARSHALL ELEMENTARY

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

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#### Treatments

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*Elizabeth Harrison*

Project Manager



## 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 requested.

### Omega Environmental Services

280 Huyler Street

South Hackensack, NJ 07606

Attn To : Michael Levay

Federal ID :

Copies To :

Received : 08/05/16 10:00 AM

Collected By : Client

Sample Type : Potable Water

CC

Date Reported : 8/18/2016

Lab Number	Location	Collected	<u>Lead</u>	
			<u>Units</u>	
			<u>Method</u>	
			<u>Limits</u>	
1608711-021A	WF ROOM 14-FD	8/3/2016 6:00:00 AM	ug/L	E200.8 : IOC
	41		15	
Distribution				
			21 *	
			8/11/2016 9:48:05 PM	
			JOHN MARSHALL ELEMENTARY	
1608711-022A	WF ROOM 15-FD	8/3/2016 6:00:00 AM	11	
	43		8/11/2016 9:51:00 PM	
Distribution			JOHN MARSHALL ELEMENTARY	
1608711-023A	WF ROOM 16-FD	8/3/2016 6:00:00 AM	15	
	45		8/11/2016 10:05:40 PM	
Distribution			JOHN MARSHALL ELEMENTARY	
1608711-024A	WF NEXT TO MUSIC RO	8/3/2016 6:00:00 AM	8.4	
	47		8/11/2016 10:08:37 PM	
Distribution			JOHN MARSHALL ELEMENTARY	
1608711-025A	WF NEXT TO MUSIC RO	8/3/2016 6:00:00 AM	4.5	
	49		8/11/2016 10:11:32 PM	
Distribution			JOHN MARSHALL ELEMENTARY	

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

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

+ = ELAP / NELAC does not offer certification for this analyte

#### Treatments

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

Test results meet the requirements of NELAC unless otherwise noted.

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*Elizabeth Harrison*

Project Manager



## 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 requested.

### Omega Environmental Services

280 Huyler Street

South Hackensack, NJ 07606

Attn To : Michael Levay

Federal ID :

Copies To :

Received : 08/05/16 10:00 AM

Collected By : Client

Sample Type : Potable Water

CC

Date Reported : 8/18/2016

Lab Number	Location	Collected	<u>Lead</u>	
			<u>Units</u>	
			<u>Method</u>	
			<u>Limits</u>	
			ug/L	
			E200.8 : IOC	
			15	
<b>1608711-026A</b>	WF NEXT TO MUSIC RO	8/3/2016 6:00:00 AM		
	51		Analysis	<b>1.4</b>
Distribution			Time	<b>8/11/2016 10:14:27 PM</b>
				JOHN MARSHALL ELEMENTARY
<b>1608711-027A</b>	WF ROOM 33-FD	8/3/2016 6:00:00 AM		
	53		Analysis	<b>3.4</b>
Distribution			Time	<b>8/11/2016 10:17:22 PM</b>
				JOHN MARSHALL ELEMENTARY
<b>1608711-028A</b>	WF ROOM 30-FD	8/3/2016 6:00:00 AM		
	55		Analysis	<b>2.5</b>
Distribution			Time	<b>8/11/2016 10:20:19 PM</b>
				JOHN MARSHALL ELEMENTARY
<b>1608711-029A</b>	WF ROOM 31-FD	8/3/2016 6:00:00 AM		
	57		Analysis	<b>9.2</b>
Distribution			Time	<b>8/11/2016 10:23:13 PM</b>
				JOHN MARSHALL ELEMENTARY
<b>1608711-030A</b>	WF ROOM 28-FD	8/3/2016 6:00:00 AM		
	59		Analysis	<b>29 *M+</b>
Distribution			Time	<b>8/12/2016 3:01:32 PM</b>
				JOHN MARSHALL ELEMENTARY

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

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

+ = ELAP / NELAC does not offer certification for this analyte

#### Treatments

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 FM = Iron/Manganese Removal  
 N = Nitrate Removal      O = Other

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*Elizabeth Harrison*

Project Manager



## 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 requested.

### Omega Environmental Services

280 Huyler Street

South Hackensack, NJ 07606

Attn To : Michael Levay

Federal ID :

Copies To :

Received : 08/05/16 10:00 AM

Collected By : Client

Sample Type : Potable Water

CC

Date Reported : 8/18/2016

Lab Number	Location	Collected	<u>Lead</u>	
			<u>Units</u>	ug/L
			<u>Method</u>	E200.8 : IOC
			<u>Limits</u>	15
1608711-031A	WF ROOM 29-FD	8/3/2016 6:00:00 AM	Analysis	< 1.0
	61		Time	8/11/2016 10:26:08 PM
Distribution				JOHN MARSHALL ELEMENTARY
1608711-032A	WF ROOM 26-FD	8/3/2016 6:00:00 AM	Analysis	< 1.0
	63		Time	8/11/2016 10:40:50 PM
Distribution				JOHN MARSHALL ELEMENTARY
1608711-033A	WF NEXT TO FACULTY B	8/3/2016 6:00:00 AM	Analysis	< 1.0
	65		Time	8/11/2016 10:43:43 PM
Distribution				JOHN MARSHALL ELEMENTARY
1608711-034A	SINK IN TEACHER ROOM	8/3/2016 6:00:00 AM	Analysis	1.6
	67		Time	8/11/2016 10:46:39 PM
Distribution				JOHN MARSHALL ELEMENTARY
1608711-035A	WF ROOM 27-FD	8/3/2016 6:00:00 AM	Analysis	2.5
	69		Time	8/11/2016 10:49:34 PM
Distribution				JOHN MARSHALL ELEMENTARY

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

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

+ = ELAP / NELAC does not offer certification for this analyte

#### Treatments

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 FM = Iron/Manganese Removal  
 N = Nitrate Removal      O = Other

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*Elizabeth Harrison*

Project Manager



## LABORATORY RESULTS

Results for the samples and analytes requested

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### Omega Environmental Services

280 Huyler Street

South Hackensack, NJ 07606

Attn To : Michael Levay

Federal ID :

Copies To :

Received : 08/05/16 10:00 AM

Collected By : Client

Sample Type : Potable Water

CC

Date Reported : 8/18/2016

Lab Number	Location	Collected	<u>Lead</u>	
			<u>Units</u>	
			<u>Method</u>	
			<u>Limits</u>	
			ug/L	
			E200.8 : IOC	
			15	
<b>1608711-036A</b>	WF ROOM 24-FD	8/3/2016 6:00:00 AM		
	71		Analysis	<b>4.4</b>
Distribution			Time	<b>8/11/2016 10:52:29 PM</b>
				JOHN MARSHALL ELEMENTARY
<b>1608711-037A</b>	WF NURSE'S OFFICE-FL	8/3/2016 6:00:00 AM		
	2		Analysis	<b>2.0</b>
Distribution			Time	<b>8/18/2016 3:23:17 AM</b>
				JOHN MARSHALL ELEMENTARY
<b>1608711-038A</b>	WF NEAR GUIDANCE DE	8/3/2016 6:00:00 AM		
	4		Analysis	<b>1.1</b>
Distribution			Time	<b>8/18/2016 3:26:12 AM</b>
				JOHN MARSHALL ELEMENTARY
<b>1608711-039A</b>	WF ROOM 5-FL	8/3/2016 6:00:00 AM		
	6		Analysis	<b>3.1</b>
Distribution			Time	<b>8/18/2016 3:29:07 AM</b>
				JOHN MARSHALL ELEMENTARY
<b>1608711-040A</b>	WF ROOM 6-FL	8/3/2016 6:00:00 AM		
	8		Analysis	<b>14</b>
Distribution			Time	<b>8/18/2016 3:32:03 AM</b>
				JOHN MARSHALL ELEMENTARY

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

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

+ = ELAP / NELAC does not offer certification for this analyte

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*Elizabeth Harrison*

Project Manager



## LABORATORY RESULTS

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### Omega Environmental Services

280 Huyler Street

South Hackensack, NJ 07606

Attn To : Michael Levay

Federal ID :

Copies To :

Received : 08/05/16 10:00 AM

Collected By : Client

Sample Type : Potable Water

CC

Date Reported : 8/18/2016

Lab Number	Location	Collected	<u>Lead</u>	
			<u>Units</u>	
			<u>Method</u>	
			<u>Limits</u>	
1608711-041A	WF ROOM 3-FL	8/3/2016 6:00:00 AM	ug/L	E200.8 : IOC
	10		15	
Distribution				
			2.6	
			8/18/2016 3:34:58 AM	
			JOHN MARSHALL ELEMENTARY	
1608711-042A	WF ROOM 24-FL	8/3/2016 6:00:00 AM	1.8	
	12		8/18/2016 3:37:53 AM	
Distribution			JOHN MARSHALL ELEMENTARY	
1608711-043A	WF ROOM 1-FL	8/3/2016 6:00:00 AM	1.7	
	14		8/18/2016 3:40:48 AM	
Distribution			JOHN MARSHALL ELEMENTARY	
1608711-044A	WF ROOM 2-FL	8/3/2016 6:00:00 AM	< 1.0	
	16		8/18/2016 3:43:43 AM	
Distribution			JOHN MARSHALL ELEMENTARY	
1608711-045A	WF ACROSS SPEECH R	8/3/2016 6:00:00 AM	6.6	
	18		8/18/2016 3:58:26 AM	
Distribution			JOHN MARSHALL ELEMENTARY	

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			<u>Units</u>	
			<u>Method</u>	
			<u>Limits</u>	
1608711-046A	KS NEAR STORE-FL 20	8/3/2016 6:00:00 AM	Analysis Time	< 1.0 8/18/2016 4:01:20 AM JOHN MARSHALL ELEMENTARY
1608711-047A	KS NEAR FOOD DISPLAY 22	8/3/2016 6:00:00 AM	Analysis Time	< 1.0 8/18/2016 4:04:16 AM JOHN MARSHALL ELEMENTARY
1608711-048A	KS WASHING STATION L 24	8/3/2016 6:00:00 AM	Analysis Time	< 1.0 8/18/2016 4:07:11 AM JOHN MARSHALL ELEMENTARY
1608711-049A	KS WASHING STATION R 26	8/3/2016 6:00:00 AM	Analysis Time	< 1.0 8/18/2016 4:10:07 AM JOHN MARSHALL ELEMENTARY
1608711-050A	WF ROOM 7-FL 28	8/3/2016 6:00:00 AM	Analysis Time	1.7 8/18/2016 4:13:03 AM JOHN MARSHALL ELEMENTARY

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Collected By : Client

Sample Type : Potable Water

CC

Date Reported : 8/18/2016

Lab Number	Location	Collected	<u>Lead</u>	
			<u>Units</u>	
			<u>Method</u>	
			<u>Limits</u>	
			ug/L	
			E200.8 : IOC	
			15	
<b>1608711-051A</b>	WF ROOM 8-FL	8/3/2016 6:00:00 AM	Analysis	<b>1.7</b>
	30		Time	<b>8/18/2016 4:15:59 AM</b>
Distribution				JOHN MARSHALL ELEMENTARY
<b>1608711-052A</b>	WF ROOM 9-FL	8/3/2016 6:00:00 AM	Analysis	<b>1.9</b>
	32		Time	<b>8/18/2016 4:18:55 AM</b>
Distribution				JOHN MARSHALL ELEMENTARY
<b>1608711-053A</b>	WF ROOM 10-FL	8/3/2016 6:00:00 AM	Analysis	<b>1.7</b>
	34		Time	<b>8/18/2016 4:33:35 AM</b>
Distribution				JOHN MARSHALL ELEMENTARY
<b>1608711-054A</b>	WF ROOM 11-FL	8/3/2016 6:00:00 AM	Analysis	<b>1.9</b>
	36		Time	<b>8/18/2016 4:36:30 AM</b>
Distribution				JOHN MARSHALL ELEMENTARY
<b>1608711-055A</b>	WF ROOM 12-FL	8/3/2016 6:00:00 AM	Analysis	<b>1.9</b>
	38		Time	<b>8/18/2016 4:39:25 AM</b>
Distribution				JOHN MARSHALL ELEMENTARY

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Federal ID :

Copies To :

Received : 08/05/16 10:00 AM

Collected By : Client

Sample Type : Potable Water

CC

Date Reported : 8/18/2016

Lab Number	Location	Collected	<u>Lead</u>	
			<u>Units</u>	
			<u>Method</u>	
			<u>Limits</u>	
1608711-056A	WF ROOM 13-FL	8/3/2016 6:00:00 AM	ug/L	E200.8 : IOC
	40		15	
Distribution				
			Analysis	3.2
			Time	8/18/2016 4:42:21 AM
				JOHN MARSHALL ELEMENTARY
1608711-057A	WF ROOM 14-FL	8/3/2016 6:00:00 AM	5.8	
	42		Analysis	8/18/2016 4:45:16 AM
Distribution			Time	
				JOHN MARSHALL ELEMENTARY
1608711-058A	WF ROOM 15-FL	8/3/2016 6:00:00 AM	2.8	
	44		Analysis	8/18/2016 4:48:11 AM
Distribution			Time	
				JOHN MARSHALL ELEMENTARY
1608711-059A	WF ROOM 16-FL	8/3/2016 6:00:00 AM	2.8	
	46		Analysis	8/18/2016 4:51:07 AM
Distribution			Time	
				JOHN MARSHALL ELEMENTARY
1608711-060A	WF NEXT TO MUSIC RO	8/3/2016 6:00:00 AM	14	
	48		Analysis	8/18/2016 4:54:02 AM
Distribution			Time	
				JOHN MARSHALL ELEMENTARY

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Copies To :

Received : 08/05/16 10:00 AM

Collected By : Client

Sample Type : Potable Water

CC

Date Reported : 8/18/2016

Lab Number	Location	Collected	<u>Lead</u>	
			<u>Units</u>	ug/L
			<u>Method</u>	E200.8 : IOC
			<u>Limits</u>	15
1608711-061A	WF NEXT TO MUSIC RO	8/3/2016 6:00:00 AM	Analysis	5.0
	50		Time	8/18/2016 5:08:43 AM
Distribution				JOHN MARSHALL ELEMENTARY
1608711-062A	WF NEXT TO MUSIC RO	8/3/2016 6:00:00 AM	Analysis	< 1.0
	52		Time	8/18/2016 5:11:38 AM
Distribution				JOHN MARSHALL ELEMENTARY
1608711-063A	WF ROOM 33-FL	8/3/2016 6:00:00 AM	Analysis	< 1.0
	54		Time	8/18/2016 5:14:35 AM
Distribution				JOHN MARSHALL ELEMENTARY
1608711-064A	WF ROOM 30-FL	8/3/2016 6:00:00 AM	Analysis	< 1.0
	56		Time	8/18/2016 5:17:30 AM
Distribution				JOHN MARSHALL ELEMENTARY
1608711-065A	WF ROOM 31-FL	8/3/2016 6:00:00 AM	Analysis	< 1.0
	58		Time	8/18/2016 5:20:24 AM
Distribution				JOHN MARSHALL ELEMENTARY

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CC

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Lab Number	Location	Collected	<u>Lead</u>	
			<u>Units</u>	ug/L
			<u>Method</u>	E200.8 : IOC
			<u>Limits</u>	15
1608711-066A	WF ROOM 28-FL	8/3/2016 6:00:00 AM	Analysis	< 1.0
	60		Time	8/18/2016 5:23:19 AM
Distribution				JOHN MARSHALL ELEMENTARY
1608711-067A	WF ROOM 29-FL	8/3/2016 6:00:00 AM	Analysis	1.2
	62		Time	8/18/2016 5:26:14 AM
Distribution				JOHN MARSHALL ELEMENTARY
1608711-068A	WF ROOM 26-FL	8/3/2016 6:00:00 AM	Analysis	< 1.0
	64		Time	8/18/2016 5:29:10 AM
Distribution				JOHN MARSHALL ELEMENTARY
1608711-069A	WF NEXT TO FACULTY B	8/3/2016 6:00:00 AM	Analysis	< 1.0
	66		Time	8/18/2016 5:43:52 AM
Distribution				JOHN MARSHALL ELEMENTARY
1608711-070A	SINK IN TEACHER ROOM	8/3/2016 6:00:00 AM	Analysis	< 1.0
	68		Time	8/18/2016 5:46:47 AM
Distribution				JOHN MARSHALL ELEMENTARY

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Sample Type : Potable Water

CC

Date Reported : 8/18/2016

Lab Number	Location	Collected	<u>Lead</u>	
			<u>Units</u>	
			<u>Method</u>	
			<u>Limits</u>	
			ug/L	
			E200.8 : IOC	
			15	
<b>1608711-071A</b>	WF ROOM 27-FL	8/3/2016 6:00:00 AM		
	70		Analysis	<b>&lt; 1.0</b>
Distribution			Time	<b>8/18/2016 5:49:43 AM</b>
				JOHN MARSHALL ELEMENTARY
<b>1608711-072A</b>	WF ROOM 24-FL	8/3/2016 6:00:00 AM		
	72		Analysis	<b>3.1</b>
Distribution			Time	<b>8/18/2016 5:52:39 AM</b>
				JOHN MARSHALL ELEMENTARY

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

## Sample Receipt Checklist

Client Name **OES**

Date and Time Received: **8/5/2016 10:00:00 AM**

Work Order Number: **1608711**

RcptNo: **1**

Received by **John Stanton**

Completed by:

Reviewed by:

Completed Date: 8/6/2016 2:27:26 PM

Reviewed Date:

Carrier name:

Chain of custody present?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>		
Chain of custody signed when relinquished and received?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>		
Chain of custody agrees with sample labels?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>		
Are matrices correctly identified on Chain of custody?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>		
Is it clear what analyses were requested?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>		
Custody seals intact on sample bottles?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	Not Present <input checked="" type="checkbox"/>	
Samples in proper container/bottle?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>		
Were correct preservatives used and noted?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
Preservative added to bottles:				
Sample Condition?	Intact <input checked="" type="checkbox"/>	Broken <input type="checkbox"/>	Leaking <input type="checkbox"/>	
Sufficient sample volume for indicated test?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>		
Were container labels complete (ID, Pres, Date)?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>		
All samples received within holding time?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>		
Was an attempt made to cool the samples?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	NA <input type="checkbox"/>	
All samples received at a temp. of > 0° C to 6.0° C?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	
Response when temperature is outside of range:				
Sample Temp. taken and recorded upon receipt?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>	To ° <input type="checkbox"/>	
Water - Were bubbles absent in VOC vials?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	No Vials <input checked="" type="checkbox"/>	
Water - Was there Chlorine Present?	Yes <input type="checkbox"/>	No <input type="checkbox"/>	NA <input checked="" type="checkbox"/>	
Water - pH acceptable upon receipt?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>	No Water <input type="checkbox"/>	
Are Samples considered acceptable?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>		
Custody Seals present?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>		
Airbill or Sticker?	Air Bil <input checked="" type="checkbox"/>	Sticker <input type="checkbox"/>	Not Present <input type="checkbox"/>	
Airbill No:				

Case Number:

SDG:

SAS:

Any No response should be detailed in the comments section below, if applicable.

Client Contacted? ☐ Yes ☐ No ☒ NA Person Contacted:  
Contact Mode: ☐ Phone: ☐ Fax: ☐ Email: ☐ In Person:  
Client Instructions:  
Date Contacted: Contacted By:  
Regarding:  
Comments:  
CorrectiveAction:

WorkOrder :  
1608711

## Certifications

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STATE	CERTIFICATION #
NEW YORK	10478
NEW JERSEY	NY158
CONNECTICUT	PH-0435
MARYLAND	208
MASSACHUSETTS	M-NY026
NEW HAMPSHIRE	2987
RHODE ISLAND	LAO00340
PENNSYLVANIA	68-00350