

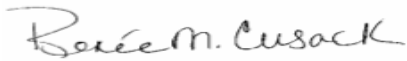
January 2, 2024

V Kaptein
NB-Lozier Environmental Consulting, Inc
2011 E Main Street
Rochester, NY 14609

Project Location:
Project Number: Lozier Environmental Consulting
Laboratory Work Order Number: 23L3449

Enclosed are results of analyses for samples received by the laboratory on December 26, 2023. If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Project Manager



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

NB-Lozier Environmental Consulting, Inc
2011 E Main Street
Rochester, NY 14609
ATTN: V Kaptein

REPORT DATE: 1/2/2024

PURCHASE ORDER NUMBER:

PROJECT NUMBER: Lozier Environmental Consulting

ANALYTICAL SUMMARY

WORK ORDER NUMBER: 23L3449

The results of analyses performed on the following samples submitted to Pace Analytical Services, LLC - Newburgh are found in this report.

PROJECT LOCATION:

FIELD SAMPLE #	LAB ID:	MATRIX	SAMPLE DESCRIPTION	TEST	SUB LAB
09-01-CR-IN-105-T	23L3449-01	Drinking Water		EPA 200.8 Rev 5.4	
09-01-CR-IN-120-TR	23L3449-02	Drinking Water		EPA 200.8 Rev 5.4	
09-02-CR-IN-220-TR	23L3449-03	Drinking Water		EPA 200.8 Rev 5.4	
09-03-CR-IN-328-B	23L3449-04	Drinking Water		EPA 200.8 Rev 5.4	
34-02-HA-BY-220B-BF	23L3449-05	Drinking Water		EPA 200.8 Rev 5.4	
39-01-CR-IN-102-B	23L3449-06	Drinking Water		EPA 200.8 Rev 5.4	
39-01-CR-IN-102-T	23L3449-07	Drinking Water		EPA 200.8 Rev 5.4	

CASE NARRATIVE SUMMARY

All reported results are within defined laboratory quality control objectives unless listed below or otherwise qualified in this report.

EPA 200.8 Rev 5.4

Qualifications:

Z-01

#

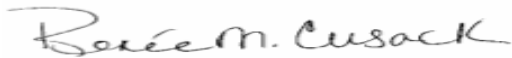
Analyte & Samples(s) Qualified:

Lead

23L3449-02[09-01-CR-IN-120-TR], 23L3449-03[09-02-CR-IN-220-TR], 23L3449-04[09-03-CR-IN-328-B]

The results of analyses reported only relate to samples submitted to the Pace Analytical Services, LLC - Newburgh for testing.

I certify that the analyses listed above, unless specifically listed as subcontracted, if any, were performed under my direction according to the approved methodologies listed in this document, and that based upon my inquiry of those individuals immediately responsible for obtaining the information, the material contained in this report is, to the best of my knowledge and belief, accurate and complete.



Renee Cusack
PM



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location:

Sample Description:

Work Order: 23L3449

Date Received: 12/26/2023

Field Sample #: 09-01-CR-IN-105-T

Sampled: 12/20/2023 06:15

Sample ID: 23L3449-01

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	RL	MCL/SMCL	Units	Dilution	Flag/Qual	Method	Date Prepared	Date/Time Analyzed	Analyst
Lead	11	1.0	15	µg/L	1		EPA 200.8 Rev 5.4	12/29/23	12/29/23 16:44	EMC



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Project Location:

Sample Description:

Work Order: 23L3449

Date Received: 12/26/2023

Field Sample #: 09-01-CR-IN-120-TR

Sampled: 12/20/2023 06:15

Sample ID: 23L3449-02

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	RL	MCL/SMCL	Units	Dilution	Flag/Qual	Method	Date Prepared	Date/Time Analyzed	Analyst
Lead	30	1.0	15	µg/L	1	Z-01	EPA 200.8 Rev 5.4	12/29/23	12/29/23 16:47	EMC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location:

Sample Description:

Work Order: 23L3449

Date Received: 12/26/2023

Field Sample #: 09-02-CR-IN-220-TR

Sampled: 12/20/2023 06:15

Sample ID: 23L3449-03

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	RL	MCL/SMCL	Units	Dilution	Flag/Qual	Method	Date Prepared	Date/Time Analyzed	Analyst
Lead	190	1.0	15	µg/L	1	Z-01	EPA 200.8 Rev 5.4	12/29/23	12/29/23 16:49	EMC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location:

Sample Description:

Work Order: 23L3449

Date Received: 12/26/2023

Field Sample #: 09-03-CR-IN-328-B

Sampled: 12/20/2023 06:15

Sample ID: 23L3449-04

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	RL	MCL/SMCL	Units	Dilution	Flag/Qual	Method	Date Prepared	Date/Time Analyzed	Analyst
Lead	57	1.0	15	µg/L	1	Z-01	EPA 200.8 Rev 5.4	12/29/23	12/29/23 16:52	EMC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location:

Sample Description:

Work Order: 23L3449

Date Received: 12/26/2023

Field Sample #: 34-02-HA-BY-220B-BF

Sampled: 12/20/2023 06:36

Sample ID: 23L3449-05

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	RL	MCL/SMCL	Units	Dilution	Flag/Qual	Method	Date Prepared	Date/Time Analyzed	Analyst
Lead	ND	1.0	15	µg/L	1		EPA 200.8 Rev 5.4	12/29/23	12/29/23 16:54	EMC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location:

Sample Description:

Work Order: 23L3449

Date Received: 12/26/2023

Field Sample #: 39-01-CR-IN-102-B

Sampled: 12/20/2023 06:54

Sample ID: 23L3449-06

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	RL	MCL/SMCL	Units	Dilution	Flag/Qual	Method	Date Prepared	Date/Time Analyzed	Analyst
Lead	1.4	1.0	15	µg/L	1		EPA 200.8 Rev 5.4	12/29/23	12/29/23 16:57	EMC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location:

Sample Description:

Work Order: 23L3449

Date Received: 12/26/2023

Field Sample #: 39-01-CR-IN-102-T

Sampled: 12/20/2023 06:54

Sample ID: 23L3449-07

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	RL	MCL/SMCL	Units	Dilution	Flag/Qual	Method	Date Prepared	Date/Time Analyzed	Analyst
Lead	ND	1.0	15	µg/L	1		EPA 200.8 Rev 5.4	12/29/23	12/29/23 16:59	EMC

FLAG/QUALIFIER SUMMARY

*	QC result is outside of established limits.
†	Wide recovery limits established for difficult compound.
‡	Wide RPD limits established for difficult compound.
#	Data exceeded client recommended or regulatory level
ND	Not Detected
RL	Reporting Limit is at the level of quantitation (LOQ)
DL	Detection Limit is the lower limit of detection determined by the MDL study
MCL	Maximum Contaminant Level
	Percent recoveries and relative percent differences (RPDs) are determined by the software using values in the calculation which have not been rounded.
	No results have been blank subtracted unless specified in the case narrative section.
Z-01	#

CERTIFICATIONS

Certified Analyses included in this Report

Analyte	Certifications
<i>EPA 200.8 Rev 5.4 in Drinking Water</i>	

Lead NB-CT,NB-NJ,NB-NY

Pace Analytical Services, LCC operates under the following certifications and accreditations:

Code	Description	Number	Expires
NB-CT	Connecticut Department of Public Health	PH-0823	09/30/2024
NB-NJ	New Jersey DEP	NY015 NELAP	06/30/2023
NB-NY	New York State Department of Health	10142 NELAP	04/1/2024

		REPORT TO:		INVOICE TO:	
LAB ID: M33623		Company: Lozler Environmental Consulting, Inc.		Company: SAME	
PROJECT NAME: RCSD - Re-sample(s) - 09, 34 & 39		Address: 2011 East Main Street		Address:	
TURNAROUND TIME: Standard Rush		City/State/Zip: Rochester, New York 14609		City/State/Zip:	
Other:		Phone: 585-654-9080		Phone:	
E-Mail: vkapein@lozlerenv.com		Fax:		Fax:	
		Purchase Order #:			

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LAB ID (Lab Use Only)	SAMPLE DESCRIPTION / LOCATION	DATE	TIME	AIR	WATER: P=Potable NP=Non-Potable	SOIL / SOLID	WIPE / SWAB / TAPE LIFT	SAMPLE COMMENTS	REQUESTED ANALYSIS					
									LEAD					
1	09-01-CR-IN-105-T	12/20/2023	615		DW				X					
2	09-01-CR-IN-120-TR	12/20/2023	615		DW				X					
3	09-02-CR-IN-220-TR	12/20/2023	615		DW				X					
4	09-03-CR-IN-328-B	12/20/2023	615		DW				X					
5	34-02-HA-BY-220B-BF	12/20/2023	636		DW				X					
6	39-01-CR-IN-102-B	12/20/2023	654		DW				X					
7	39-01-CR-IN-102-T	12/20/2023	654		DW				X					



23L3449

Container Type (Circle One): Plastic Glass Sterile Other _____

Delivery (Circle One): Client Drop-Off / Courier (Tracking # _____)

SAMPLED BY*: J. Savore		
RELINQUISHED BY*: X Kaptein	DATE: 12/20/23	TIME: 09:34
RECEIVED BY: [Signature]	DATE: 12/26/23	TIME: 10:50
RELINQUISHED BY*:	DATE:	TIME:
RECEIVED BY:	DATE:	TIME:
RELINQUISHED BY*:	DATE:	TIME:
RECEIVED BY:	DATE:	TIME:

FOR LAB USE ONLY	PRESERVATIVE/BIOCIDES: <u>HNO3</u> TOTAL NUMBER OF CONTAINERS: _____ CUSTODY SEAL INTACT? YES NO SAMPLE ON ICE? YES <u>NO</u> TEMPERATURE: <u>12.8C</u> SAMPLE IN COMPLIANCE: YES NO
	FOR POTABLE WATER ONLY: COLIFORM BACTERIA: Present Absent If Present, Date Client is contacted with result: Date: _____ Contacted By: _____

*The above signatures hereby authorize subcontracting of samples as required for laboratory analysis

FED EX GRS 7745 5714 1901

Sample Condition Upon Receipt Form (SCUR)

Project # 23L3449
Client: Lozier

Date and Initials of person:

Examining contents: EC

Label: EC

Deliver to location: EC

pH: EC

Thermometer Used: IRG4

Date: 12/26

Time: 1030

Initials: EC

State of Origin: NY

Cooler #1 Temp.°C 12.9 (Visual) 0.2 @ 0.0°C, -0.5 @ 20.0°C (Correction Factor) 13.1 (Actual) ☐ Samples on ice, cooling process has begun

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

Shipping Method: ☐ First Overnight ☐ Priority Overnight ☐ Standard Overnight ☐ Ground
☐ Other

Tracking # 7745 5714 1901

Custody Seal on Cooler/Box Present: ☐ Yes ☐ No Seals intact: ☐ Yes ☐ No Ice: Wet Blue Melted None

Packing Material: ☒ Bubble Wrap ☐ Bubble Bags ☐ None ☐ Other

Samples were collected by Pace employee ☐ Yes ☐ No ☐ N/A

Comments:

Chain of Custody Present	☒ Yes ☐ No ☐ N/A	
Chain of Custody Filled Out	☒ Yes ☐ No ☐ N/A	
Relinquished Signature on COC	☒ Yes ☐ No ☐ N/A	
Sampler Name and Signature on COC	☒ Yes ☐ No ☐ N/A	
Samples Arrived within Hold Time	☒ Yes ☐ No ☐ N/A	
Rush TAT requested on COC	☐ Yes ☐ No ☐ N/A	
Sufficient Volume	☒ Yes ☐ No ☐ N/A	
Correct Containers Used	☒ Yes ☐ No ☐ N/A	
Containers Intact	☒ Yes ☐ No ☐ N/A	
Sample Labels match COC (sample IDs & date/time of collection)	☒ Yes ☐ No ☐ N/A	
All containers needing acid/base preservation have been checked.	☐ Yes ☐ No ☐ N/A	Preservation Information:
All Containers needing preservation are found to be in compliance with EPA recommendation:	☐ Yes ☐ No ☐ N/A	Preservative: _____
Exceptions: Vials, Microbiology, O&G, Metals		Lot #/Trace #: _____
		Date: _____ Time: _____
		Initials: _____
Headspace in VOA Vials? (>6mm):	☐ Yes ☐ No ☐ N/A	
Trip Blank Present:	☐ Yes ☐ No ☐ N/A	

Additional Login Comments:

Client notification/ Resolution

Person Contacted: _____ Date/Time: _____

Comments/Resolution: