

December 17, 2016

N Henner
Hannibal CSD
928 Cayuga St
Hannibal, NY 13074

RE: Project: DMK/FIELD HOUSE
Pace Project No.: 705461

Dear N Henner:

Enclosed are the analytical results for sample(s) received by the laboratory on November 19, 2016. The results relate only to the samples included in this report. Results reported herein conform to the most current, applicable TNI/NELAC standards and the laboratory's Quality Assurance Manual, where applicable, unless otherwise noted in the body of the report.

If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Wayne Bryce
wayne.bryce@pacelabs.com
Project Manager

Enclosures



REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
without the written consent of Pace Analytical Services, LLC.

CERTIFICATIONS

Project: DMK/FIELD HOUSE

Pace Project No.: 705461

Long Island Certification IDs

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

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ANALYTICAL RESULTS

Project: DMK/FIELD HOUSE

Pace Project No.: 705461

Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
Sample: FIELD HOUSE 947979		Lab ID: 705461001		Collected: 11/17/16 00:00	Received: 11/19/16 10:40	Matrix: Drinking Water		
200.8 MET ICPMS Drinking Water		Analytical Method: EPA 200.8						
Lead	1.2	ug/L	1.0	1		12/11/16 21:40	7439-92-1	

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ANALYTICAL RESULTS

Project: DMK/FIELD HOUSE

Pace Project No.: 705461

Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
Sample: DMK 101 947983		Lab ID: 705461002		Collected: 11/17/16 00:00	Received: 11/19/16 10:40	Matrix: Drinking Water		
200.8 MET ICPMS Drinking Water		Analytical Method: EPA 200.8						
Lead	<1.0	ug/L	1.0	1		12/11/16 21:42	7439-92-1	

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ANALYTICAL RESULTS

Project: DMK/FIELD HOUSE

Pace Project No.: 705461

Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
Sample: DMK 107 947982		Lab ID: 705461003		Collected: 11/17/16 00:00	Received: 11/19/16 10:40	Matrix: Drinking Water		
200.8 MET ICPMS Drinking Water		Analytical Method: EPA 200.8						
Lead	<1.0	ug/L	1.0	1		12/11/16 21:45	7439-92-1	

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ANALYTICAL RESULTS

Project: DMK/FIELD HOUSE

Pace Project No.: 705461

Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
Sample: DMK 109 947981		Lab ID: 705461004		Collected: 11/17/16 00:00	Received: 11/19/16 10:40	Matrix: Drinking Water		
200.8 MET ICPMS Drinking Water		Analytical Method: EPA 200.8						
Lead	2.1	ug/L	1.0	1		12/11/16 21:54	7439-92-1	

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QUALITY CONTROL DATA

Project: DMK/FIELD HOUSE

Pace Project No.: 705461

QC Batch: 6319

Analysis Method: EPA 200.8

QC Batch Method: EPA 200.8

Analysis Description: 200.8 MET No Prep Drinking Water

Associated Lab Samples: 705461001, 705461002, 705461003, 705461004

METHOD BLANK: 31449

Matrix: Water

Associated Lab Samples: 705461001, 705461002, 705461003, 705461004

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Lead	ug/L	<1.0	1.0	12/11/16 20:56	

LABORATORY CONTROL SAMPLE: 31450

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Lead	ug/L	50	49.8	100	85-115	

MATRIX SPIKE SAMPLE: 31452

Parameter	Units	705378028 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Lead	ug/L	<1.0	2	2.9	134	70-130	M1

SAMPLE DUPLICATE: 31451

Parameter	Units	705378028 Result	Dup Result	RPD	Qualifiers
Lead	ug/L	<1.0	<1.0		

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

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QUALIFIERS

Project: DMK/FIELD HOUSE

Pace Project No.: 705461

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit.

S - Surrogate

1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAC Institute.

ANALYTE QUALIFIERS

M1 Matrix spike recovery exceeded QC limits. Batch accepted based on laboratory control sample (LCS) recovery.

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QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: DMK/FIELD HOUSE

Pace Project No.: 705461

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
705461001	FIELD HOUSE 947979	EPA 200.8	6319		
705461002	DMK 101 947983	EPA 200.8	6319		
705461003	DMK 107 947982	EPA 200.8	6319		
705461004	DMK 109 947981	EPA 200.8	6319		

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CHAIN-OF-CUSTODY / Analytical Request Document

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

WO#: 705461

Section A Required Client Information:		Section B Required Project Information:		Section C Invoice Information:	
Company: Hannibal CSO	Report To:	Company Name: City BOCES	Attention:	Company Name: City BOCES	705461
Address: 928 Cayuga St	Copy To:	Address:		REGULATORY AGENCY	
Hannibal NY 13074	Purchase Order No.:	Pace Quote Reference:		<input type="checkbox"/> NPDES <input type="checkbox"/> GROUND WATER <input checked="" type="checkbox"/> DRINKING WATER	
Email To: ahennen@hannibalcsd.com	Project Name: DMK / Field house	Pace Project Manager:		<input type="checkbox"/> UST <input type="checkbox"/> RCRA <input type="checkbox"/> OTHER	
Phone: 564-7977	Project Number:	Pace Profile #:		Site Location	NY
Requested Due Date/TAT:				STATE:	

ITEM #	Section D Required Client Information	Matrix Codes MATRIX / CODE	SAMPLE TYPE (G=GRAB C=COMP)	COLLECTED		SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives	Y/N	Requested Analysis Filtered (Y/N)		Pace Project No./ Lab I.D.
				COMPOSITE START	COMPOSITE END/GRAB					DATE	TIME	
1	Field house 947979	DW	DW G	11-17			1	Unpreserved				
2	DMK 947983	WT	DW C	11-17			1	H ₂ SO ₄				
3	DMK 107 947982	WW	DW C	11-17			1	HNO ₃				
4	DMK 109 947981	P	DW C	11-17			1	NaOH				
5		SL						HCl				
6		OL						Na ₂ S ₂ O ₃				
7		WP						Methanol				
8		AR						Other				
9		TS										
10		OT										
11												
12												

ADDITIONAL COMMENTS		RELINQUISHED BY / AFFILIATION		DATE		TIME		ACCEPTED BY / AFFILIATION		DATE		TIME		SAMPLE CONDITIONS	
James Shub		James Shub		11-17-16		14:05		James Shub		11/17/16		14:25		Received on	
James Shub		James Shub		11/17/16		17:00		James Shub		11/17/16		17:40		Ice (Y/N)	
														Custody (Y/N)	
														Sealed Cooler (Y/N)	
														Temp in °C	
														Samples Intact (Y/N)	

7777 5042918 ORIGINAL

SAMPLER NAME AND SIGNATURE
 PRINT Name of SAMPLER: James Sheeley
 SIGNATURE of SAMPLER: James Shub

DATE Signed (MM/DD/YYYY): 11-17-16



Sample Condition Upon Receipt

WO#: 705461

PM: WB Due Date: 12/07/16
CLIENT: HAN

Client Name: Hannibal CST

Courier: Fed Ex UPS USPS Client Commercial Pace Other

Tracking #: 7777 5042 9118

Custody Seal on Cooler/Box Present: yes no Seals intact: yes no

Optional
Proj. Due Date:
Proj. Name:

Packing Material: Bubble Wrap Bubble Bags None Other

10:40

Thermometer Used: TH077 TH078 Type of Ice: Wet Blue None Samples on ice, cooling process has begun

Cooler Temperature: _____

Box

Date and Initials of person examining contents: <u>11/19/16 JP</u>
--

Temp should be above freezing to 6°C

Comments:

Chain of Custody Present:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1.
Chain of Custody Filled Out:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	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 <input type="checkbox"/> N/A	5.
Short Hold Time Analysis (<72hr):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	6.
Rush Turn Around Time Requested:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	7.
Sufficient Volume:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.
Correct Containers Used:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	9.
-Pace Containers Used:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10.
Filtered volume received for Dissolved tests	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11.
Sample Labels match COC:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	12.
-Includes date/time/ID/Analysis Matrix SL <u>WT</u> OIL		
All containers needing preservation have been checked	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	13.
All containers needing preservation are found to be in compliance with EPA recommendation.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Initial when completed:
		Lot # of added preservative:
Exceptions: VOA, micro, TOC, O&G		Date and Time preservative added:
Samples checked for dechlorination:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	14.
Headspace in VOA Vials (>6mm):	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	15.
Trip Blank Present:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	16.
Trip Blank Custody Seals Present	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Pace Trip Blank Lot # (if purchased): _____		

Client Notification/ Resolution:

Field Data Required? Y / N

Person Contacted: _____ Date/Time: _____

Comments/ Resolution: _____