

March 15, 2019

Rob King
Hampton Bays Water District
P.O. Box 1013
Hampton Bays, NY 11946

RE: Project: BACT SERIES 3/14
Pace Project No.: 7082350

Dear Rob King:

Enclosed are the analytical results for sample(s) received by the laboratory on March 14, 2019. 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,



Stu Murrell
stu.murrell@pacelabs.com
(631)694-3040
Project Manager

Enclosures

cc: Warren Booth, Hampton Bays Water District
John Collins, H2M Group
Stella Michaels, Hampton Bays Water District
Paul Ponturo, H2M Group



REPORT OF LABORATORY ANALYSIS

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CERTIFICATIONS

Project: BACT SERIES 3/14

Pace Project No.: 7082350

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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SAMPLE SUMMARY

Project: BACT SERIES 3/14

Pace Project No.: 7082350

Lab ID	Sample ID	Matrix	Date Collected	Date Received
7082350001	S-15687 0-MIN.	Drinking Water	03/14/19 08:37	03/14/19 12:12
7082350002	S-15687 1-MIN.	Drinking Water	03/14/19 08:38	03/14/19 12:12
7082350003	S-15687 5-MIN.	Drinking Water	03/14/19 08:42	03/14/19 12:12
7082350004	S-15687 15-MIN.	Drinking Water	03/14/19 08:52	03/14/19 12:12
7082350005	S-15687 30-MIN.	Drinking Water	03/14/19 09:07	03/14/19 12:12

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SAMPLE ANALYTE COUNT

Project: BACT SERIES 3/14

Pace Project No.: 7082350

Lab ID	Sample ID	Method	Analysts	Analytes Reported
7082350001	S-15687 0-MIN.	SM22 9223B Colilert	AL1	2
7082350002	S-15687 1-MIN.	SM22 9223B Colilert	AL1	2
7082350003	S-15687 5-MIN.	SM22 9223B Colilert	AL1	2
7082350004	S-15687 15-MIN.	SM22 9223B Colilert	AL1	2
7082350005	S-15687 30-MIN.	SM22 9223B Colilert	AL1	2

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ANALYTICAL RESULTS

Project: BACT SERIES 3/14

Pace Project No.: 7082350

Sample: S-15687 0-MIN. **Lab ID: 7082350001** Collected: 03/14/19 08:37 Received: 03/14/19 12:12 Matrix: Drinking Water

Parameters	Results	Units	Report Limit	Reg. Limit	DF	Prepared	Analyzed	CAS No.	Qual
MBIO Total Coliform DW									
Analytical Method: SM22 9223B Colilert Preparation Method: SM22 9223B Colilert									
Total Coliforms	Absent				1	03/14/19 18:25	03/15/19 12:25		
E.coli	Absent				1	03/14/19 18:25	03/15/19 12:25		

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ANALYTICAL RESULTS

Project: BACT SERIES 3/14

Pace Project No.: 7082350

Sample: S-15687 1-MIN. **Lab ID: 7082350002** Collected: 03/14/19 08:38 Received: 03/14/19 12:12 Matrix: Drinking Water

Parameters	Results	Units	Report Limit	Reg. Limit	DF	Prepared	Analyzed	CAS No.	Qual
MBIO Total Coliform DW									
Analytical Method: SM22 9223B Colilert Preparation Method: SM22 9223B Colilert									
Total Coliforms	Absent				1	03/14/19 18:25	03/15/19 12:25		
E.coli	Absent				1	03/14/19 18:25	03/15/19 12:25		

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ANALYTICAL RESULTS

Project: BACT SERIES 3/14

Pace Project No.: 7082350

Sample: S-15687 5-MIN. **Lab ID: 7082350003** Collected: 03/14/19 08:42 Received: 03/14/19 12:12 Matrix: Drinking Water

Parameters	Results	Units	Report Limit	Reg. Limit	DF	Prepared	Analyzed	CAS No.	Qual
MBIO Total Coliform DW									
Analytical Method: SM22 9223B Colilert Preparation Method: SM22 9223B Colilert									
Total Coliforms	Absent				1	03/14/19 18:25	03/15/19 12:25		
E.coli	Absent				1	03/14/19 18:25	03/15/19 12:25		

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ANALYTICAL RESULTS

Project: BACT SERIES 3/14

Pace Project No.: 7082350

Sample: S-15687 15-MIN. **Lab ID: 7082350004** Collected: 03/14/19 08:52 Received: 03/14/19 12:12 Matrix: Drinking Water

Parameters	Results	Units	Report Limit	Reg. Limit	DF	Prepared	Analyzed	CAS No.	Qual
MBIO Total Coliform DW									
Analytical Method: SM22 9223B Colilert Preparation Method: SM22 9223B Colilert									
Total Coliforms	Absent				1	03/14/19 18:25	03/15/19 12:25		
E.coli	Absent				1	03/14/19 18:25	03/15/19 12:25		

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ANALYTICAL RESULTS

Project: BACT SERIES 3/14

Pace Project No.: 7082350

Sample: S-15687 30-MIN. **Lab ID: 7082350005** Collected: 03/14/19 09:07 Received: 03/14/19 12:12 Matrix: Drinking Water

Parameters	Results	Units	Report Limit	Reg. Limit	DF	Prepared	Analyzed	CAS No.	Qual
MBIO Total Coliform DW									
Analytical Method: SM22 9223B Colilert Preparation Method: SM22 9223B Colilert									
Total Coliforms	Absent				1	03/14/19 18:25	03/15/19 12:25		
E.coli	Absent				1	03/14/19 18:25	03/15/19 12:25		

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QUALITY CONTROL DATA

Project: BACT SERIES 3/14

Pace Project No.: 7082350

QC Batch: 105589

Analysis Method: SM22 9223B Colilert

QC Batch Method: SM22 9223B Colilert

Analysis Description: TotColDW MBIO Total Coliform

Associated Lab Samples: 7082350001, 7082350002, 7082350003, 7082350004, 7082350005

METHOD BLANK: 488098

Matrix: Drinking Water

Associated Lab Samples: 7082350001, 7082350002, 7082350003, 7082350004, 7082350005

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
E.coli		Absent		03/15/19 12:25	
Total Coliforms		Absent		03/15/19 12:25	

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: BACT SERIES 3/14

Pace Project No.: 7082350

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.

TNTC - Too Numerous To Count

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 - The lowest concentration value that meets project requirements for quantitative data with known precision and bias for a specific analyte in a specific matrix.

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.

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QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: BACT SERIES 3/14

Pace Project No.: 7082350

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
7082350001	S-15687 0-MIN.	SM22 9223B Colilert	105589	SM22 9223B Colilert	105596
7082350002	S-15687 1-MIN.	SM22 9223B Colilert	105589	SM22 9223B Colilert	105596
7082350003	S-15687 5-MIN.	SM22 9223B Colilert	105589	SM22 9223B Colilert	105596
7082350004	S-15687 15-MIN.	SM22 9223B Colilert	105589	SM22 9223B Colilert	105596
7082350005	S-15687 30-MIN.	SM22 9223B Colilert	105589	SM22 9223B Colilert	105596

REPORT OF LABORATORY ANALYSIS

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Sample Request Form PUBLIC WATER SUPPLIER

WELL OFF LINE

WELL RUN TO SYSTEM

YES NO VOC'S PRESERVED WITH HCl

Date: 3-14-19

Collected By: DELTA WELL

Accepted By: [Signature] 12:12

Cooler Temp: 6.4 °C (B)

WO#: 7082350



Client Info:

Name or Code: HAMPTON BAYS WATER DISTRICT

P.O. BOX 1013

Address: HAMPTON BAYS, NEW YORK 11946

(631) 728-0179

Phone #: _____
 Attn: _____
 Proj. # or (Name): _____
 Bill To: _____
 Copies To: _____

Sample Info:

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	

Date/Time Collected:	Sample Type	Location	Origin	Treatment Type	Purpose	Field Readings Cl ₂ pH/Temp	Analysis	Lab No.
3-14-19 8:37 Am	GW	WELL 1-1 5LW	RW	-	S		BACT NO CL	001
3-14-19 8:38 Am	GW	WELL 1-1 1MIN	RW	-	S		BACT NO CL	002
3-14-19 8:42 Am	GW	WELL 1-1 5MIN	RW	-	S		BACT NO CL	003
3-14-19 8:52 Am	GW	WELL 1-1 15MIN	RW	-	S		BACT NO CL	004
3-14-19 9:07 Am	GW	WELL 1-1 30MIN	RW	-	S		BACT NO CL	005
Remarks: _____								



Sample Condition Upon Receipt

Client Name: HBW

Project

WO#: 7082350
 PM: SWM Due Date: 04/13/19
 CLIENT: HBW

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: TH091 Correction Factor: 0.0

Samples on ice, cooling process has begun

Cooler Temperature (°C): 6.4 Cooler Temperature Corrected (°C): 6.4

Date/Time 5035A kits placed in freezer _____

Temp should be above freezing to 6.0°C

USDA Regulated Soil (N/A, water sample)

Date and Initials of person examining contents: 3/14/19 JVP

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 (internationally, including Hawaii and Puerto Rico)? Yes No

If Yes to either question, fill out a Regulated Soil Checklist (F-LI-C-010) and include with SCUR/COC paperwork.

			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 checked="" type="checkbox"/> Yes	<input 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	
Containers Intact:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	10.
Filtered volume received for Dissolved tests	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11. 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</u> <u>WT</u> <u>OIL</u>			
All containers needing preservation have been checked	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	13. <input type="checkbox"/> HNO ₃ <input type="checkbox"/> H ₂ SO ₄ <input type="checkbox"/> NaOH <input type="checkbox"/> HCl
pH paper Lot #			Sample #
All containers needing preservation are found to be in compliance with EPA recommendation? (HNO ₃ , H ₂ SO ₄ , HCl, NaOH>9 Sulfide, NAOH>12 Cyanide)	<input type="checkbox"/> Yes	<input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	Initial when completed: _____ Lot # of added preservative: _____ Date/Time preservative added: _____
Exceptions: VOA, Coliform, TOC/DOC, Oil and Grease, DRO/8015 (water). Per Method, VOA pH is checked after analysis			
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 #			
Residual chlorine strips Lot #			
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 applicable): _____			

Client Notification/ Resolution:

Field Data Required? Y / N

Person Contacted: _____

Date/Time: _____

Comments/ Resolution: _____