Pace Analytical®
575 Broad Hollow Road, Melville, NY 11747
TEL: (631) 694-3040 FAX: (631) 420-8436
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
P.O. Box 1013
Hampton Bays, NY 11946
Attn To : Rob King
Federal ID : 5103704

Lab Project No. : 70110955

Received :11/06/2019 3:40
Sample Type :Water

Date Reported: 11/07/2019

Lab	Location	Collected		E.coli	Total Coliforms	Field Residual
			Units	N/A	N/A	mg/L
			Metho	SM22 9223B Colilert	SM22 9223B Colilert	
			Limits	Absent	Absent	4
70110955001	HB27	11/6/2019 7:45:00		**Absent**	**Absent**	**0.56**
Routine	Suffolk Cty. Hwy. Dept.	Collected by: CLIENT	Analysis Time	**11/7/2019 12:32:00**	**11/7/2019 12:32:00**	**10/6/2019 7:45:00 AM**
Distribution	North Hwy.					
70110955002	HB2	11/6/2019 8:00:00		**Absent**	**Absent**	**0.66**
Routine	R. Loetscher	Collected by: CLIENT	Analysis Time	**11/7/2019 12:32:00**	**11/7/2019 12:32:00**	**10/6/2019 8:00:00 AM**
Distribution	Wakeman Rd.					
70110955003	HB3	11/6/2019 8:15:00		**Absent**	**Absent**	**0.36**
Routine	U.S.C.G.	Collected by: CLIENT	Analysis Time	**11/7/2019 12:32:00**	**11/7/2019 12:32:00**	**10/6/2019 8:15:00 AM**
Distribution	Foster Ave.					
70110955004	HB4	11/6/2019 8:30:00		**Absent**	**Absent**	**0.56**
Routine	H.B. Elem School	Collected by: CLIENT	Analysis Time	**11/7/2019 12:32:00**	**11/7/2019 12:32:00**	**10/6/2019 8:30:00 AM**
Distribution	Ponquogue Ave.					
70110955005	HB5	11/6/2019 8:45:00		**Absent**	**Absent**	**0.68**
Routine	H.B. High School	Collected by: CLIENT	Analysis Time	**11/7/2019 12:32:00**	**11/7/2019 12:32:00**	**10/6/2019 8:45:00 AM**
Distribution	Argonne Rd.					
70110955006	HB6	11/6/2019 9:05:00		**Absent**	**Absent**	**0.64**
Routine	Strong Oil	Collected by: CLIENT	Analysis Time	**11/7/2019 12:32:00**	**11/7/2019 12:32:00**	**10/6/2019 9:05:00 AM**
Distribution	Montauk Hwy. East					

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.

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Stu Murrell

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Attn To : Rob King
Federal ID : 5103704

Lab Project No. : 70110955

Received :11/06/2019 3:40
Sample Type :Water

Date Reported: 11/07/2019

Lab	Location	Collected		E.coli	Total Coliforms	Field Residual
			Units	N/A	N/A	mg/L
			Metho	SM22 9223B Colilert	SM22 9223B Colilert	
			Limits	Absent	Absent	4
70110955007 Routine Distribution	HB7 SO. Town Parks & Rec	11/6/2019 9:20:00 Collected by: CLIENT	Analysis Time	**Absent** **11/7/2019 12:32:00**	**Absent** **11/7/2019 12:32:00**	**0.58** **10/6/2019 9:20:00 AM**
70110955008 Routine Distribution	HB8 B. McCormack Bittersweet Ave.	11/6/2019 9:35:00 Collected by: CLIENT	Analysis Time	**Absent** **11/7/2019 12:32:00**	**Absent** **11/7/2019 12:32:00**	**0.87** **10/6/2019 9:35:00 AM**
70110955009 Routine Distribution	HB9 SO. Town Highway Dept. Jackson Ave.	11/6/2019 7:30:00 Collected by: CLIENT	Analysis Time	**Absent** **11/7/2019 12:32:00**	**Absent** **11/7/2019 12:32:00**	**0.38** **10/6/2019 7:30:00 AM**
70110955010 Routine Distribution	HB10 Pete's Deli Montauk Hwy. West	11/6/2019 10:10:00 Collected by: CLIENT	Analysis Time	**Absent** **11/7/2019 12:32:00**	**Absent** **11/7/2019 12:32:00**	**0.61** **10/6/2019 10:10:00**
70110955011 Routine Distribution	HB11 Riverhead Building Supply Montauk Hwy. West	11/6/2019 9:50:00 Collected by: CLIENT	Analysis Time	**Absent** **11/7/2019 12:32:00**	**Absent** **11/7/2019 12:32:00**	**0.47** **10/6/2019 9:50:00 AM**

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.

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WorkOrder :
70110955

Laboratory Certifications

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

Date Reported: 11/07/2019

WO#:70110955

70110955

747

Sample Request Form
PUBLIC WATER SUPPLIER

BACK IN LAB 1540

Date: 11-6-19

Collected By: K. TUTHILL

Accepted By: WKelly 11/6/19

Cooler Temp: 4.8 °C 1145

☐ WELL OFF LINE

☐ WELL RUN TO SYSTEM

☐ YES ☐ NO VOC'S PRESERVED WITH HCl

Client Info:

Name or Code: HAMPTON BAYS WATER DISTRICT

Address: P.O. BOX 1013
HAMPTON BAYS, NEW YORK 11946
(631) 728-0179

Phone #:

Attn:

Proj. # or (Name):

Bill To:

Copies To:

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	

Sample Info:

Date/Time Collected:	Sample Type	Location	Origin	Treatment Type	Purpose	Field Readings Cl_2	Field Readings pH/Temp	Analysis	Lab No.
7:45AM 11-6-19	PW	#27	D	-	RO	.56	7.39	BACT w/cl	001
8:00AM 11-6-19	PW	#2	D	-	RO	.66	7.39	BACT w/cl	002
8:15AM 11-6-19	PW	#3	D	-	RO	.36	7.40	BACT w/cl	003
8:30AM 11-6-19	PW	#4	D	-	RO	.56	7.41	BACT w/cl	004
8:45AM 11-6-19	PW	#5	D	-	RO	.68	7.45	BACT w/cl	005
9:05AM 11-6-19	PW	#6	D	-	RO	.64	7.46	BACT w/cl	006
9:20AM 11-6-19	PW	#7	D	-	RO	.58	7.61	BACT w/cl	007
9:35AM 11-6-19	PW	#8	D	-	RO	.87	7.49	BACT w/cl	008
7:30AM 11-6-19	PW	#9	D	-	RO	.38	7.32	BACT w/cl	009
10:10AM 11-6-19	PW	#10	D	-	RO	.61	7.51	BACT w/cl	010
9:50AM 11-6-19	PW	#11	D	-	RO	.47	7.50	BACT & w/cl	011

Remarks:

Pace Analytical

Sample Condition Upon Receipt

WO#: 70110955
PM: SWM Due Date: 12/06/19
CLIENT: HBW

Client Name: HBW

Projec

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: +0.2

☐ Samples on ice, cooling process has begun

Cooler Temperature (°C): 4.8 Cooler Temperature Corrected (°C): 5.0

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: 11/6/1958

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:	☑Yes	☐No		1.
Chain of Custody Filled Out:	☑Yes	☐No		2.
Chain of Custody Relinquished:	☑Yes	☐No		3.
Sampler Name & Signature on COC:	☑Yes	☐No	☐N/A	4.
Samples Arrived within Hold Time:	☑Yes	☐No		5.
Short Hold Time Analysis (<72hr):	☑Yes	☐No		6.
Rush Turn Around Time Requested:	☐Yes	☑No		7.
Sufficient Volume: (Triple volume provided for MS/MSD	☑Yes	☐No		8.
Correct Containers Used:	☑Yes	☐No		9.
-Pace Containers Used:	☑Yes	☐No		
Containers Intact:	☑Yes	☐No		10.
Filtered volume received for Dissolved tests	☐Yes	☐No	☑N/A	11. Note if sediment is visible in the dissolved container.
Sample Labels match COC:	☑Yes	☐No		12.
-Includes date/time/ID/Analysis Matrix SL (WT) OIL				
All containers needing preservation have been checked	☐Yes	☐No	☑N/A	13. ☐ HNO_3 ☐ H_2SO_4 ☐ NaOH ☐ HCl
pH paper Lot #				
All containers needing preservation are found to be in compliance with EPA recommendation? (HNO_3, H_2SO_4, HCl, NaOH>9 Sulfide, NAOH>12 Cyanide) Exceptions: VOA, Coliform, TOC/DOC, Oil and Grease, DRO/8015 (water). Per Method, VOA pH is checked after analysis	☐Yes	☐No	☑N/A	Sample #
				Initial when completed: / Lot # of added preservative: / Date/Time preservative added
Samples checked for dechlorination:	☐Yes	☐No	☑N/A	14.
KI starch test strips Lot #				
Residual chlorine strips Lot #				Positive for Res. Chlorine? Y N
Headspace in VOA Vials (>6mm):	☐Yes	☐No	☑N/A	15.
Trip Blank Present:	☐Yes	☐No	☑N/A	16.
Trip Blank Custody Seals Present	☐Yes	☐No	☑N/A	
Pace Trip Blank Lot # (if applicable):				

Client Notification/ Resolution: Field Data Required? Y / N

Person Contacted: Date/Time:

Comments/ Resolution:

* PM (Project Manager) review is documented electronically in LIMS.