

May 10, 2018

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

RE: Project: DIST BACT 5/9
Pace Project No.: 7051088

Dear Rob King:
Enclosed are the analytical results for sample(s) received by the laboratory on May 09, 2018. 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: DIST BACT 5/9

Pace Project No.: 7051088

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: DIST BACT 5/9

Pace Project No.: 7051088

Lab ID	Sample ID	Matrix	Date Collected	Date Received
7051088001	HB12	Drinking Water	05/09/18 07:30	05/09/18 16:45
7051088002	HB13	Drinking Water	05/09/18 07:45	05/09/18 16:45
7051088003	HB28	Drinking Water	05/09/18 08:00	05/09/18 16:45
7051088004	HB29	Drinking Water	05/09/18 08:20	05/09/18 16:45
7051088005	HB16	Drinking Water	05/09/18 09:10	05/09/18 16:45
7051088006	HB31	Drinking Water	05/09/18 08:55	05/09/18 16:45
7051088007	HB25	Drinking Water	05/09/18 09:40	05/09/18 16:45
7051088008	HB19	Drinking Water	05/09/18 08:40	05/09/18 16:45
7051088009	HB21	Drinking Water	05/09/18 09:25	05/09/18 16:45
7051088010	HB5A	Drinking Water	05/09/18 10:00	05/09/18 16:45

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SAMPLE ANALYTE COUNT

Project: DIST BACT 5/9

Pace Project No.: 7051088

Lab ID	Sample ID	Method	Analysts	Analytes Reported
7051088001	HB12	SM22 9223B Colilert	NML	2
7051088002	HB13	SM22 9223B Colilert	NML	2
7051088003	HB28	SM22 9223B Colilert	NML	2
7051088004	HB29	SM22 9223B Colilert	NML	2
7051088005	HB16	SM22 9223B Colilert	NML	2
7051088006	HB31	SM22 9223B Colilert	NML	2
7051088007	HB25	SM22 9223B Colilert	NML	2
7051088008	HB19	SM22 9223B Colilert	NML	2
7051088009	HB21	SM22 9223B Colilert	NML	2
7051088010	HB5A	SM22 9223B Colilert	NML	2

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ANALYTICAL RESULTS

Project: DIST BACT 5/9

Pace Project No.: 7051088

Sample: HB12		Lab ID: 7051088001		Collected: 05/09/18 07:30	Received: 05/09/18 16:45	Matrix: Drinking Water				
Parameters	Results	Units	Report Limit	Reg. Limit	DF	Prepared	Analyzed	CAS No.	Qual	
Field Chlorine and pH		Analytical Method:								
Field Residual Chlorine	0.41	mg/L			1		05/09/18 07:30		N3	
MBIO Total Coliform DW		Analytical Method: SM22 9223B Colilert Preparation Method: SM22 9223B Colilert								
Total Coliforms	Absent				1	05/09/18 18:45	05/10/18 12:45			
E.coli	Absent				1	05/09/18 18:45	05/10/18 12:45			

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ANALYTICAL RESULTS

Project: DIST BACT 5/9

Pace Project No.: 7051088

Sample: HB13		Lab ID: 7051088002		Collected: 05/09/18 07:45	Received: 05/09/18 16:45	Matrix: Drinking Water			
Parameters	Results	Units	Report Limit	Reg. Limit	DF	Prepared	Analyzed	CAS No.	Qual
Field Chlorine and pH		Analytical Method:							
Field Residual Chlorine	0.64	mg/L			1		05/09/18 07:45		N3
MBIO Total Coliform DW		Analytical Method: SM22 9223B Colilert Preparation Method: SM22 9223B Colilert							
Total Coliforms	Absent				1	05/09/18 18:45	05/10/18 12:45		
E.coli	Absent				1	05/09/18 18:45	05/10/18 12:45		

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ANALYTICAL RESULTS

Project: DIST BACT 5/9

Pace Project No.: 7051088

Sample: HB28		Lab ID: 7051088003		Collected: 05/09/18 08:00	Received: 05/09/18 16:45	Matrix: Drinking Water			
Parameters	Results	Units	Report Limit	Reg. Limit	DF	Prepared	Analyzed	CAS No.	Qual
Field Chlorine and pH		Analytical Method:							
Field Residual Chlorine	0.47	mg/L			1		05/09/18 08:00		N3
MBIO Total Coliform DW		Analytical Method: SM22 9223B Colilert Preparation Method: SM22 9223B Colilert							
Total Coliforms	Absent				1	05/09/18 18:45	05/10/18 12:45		
E.coli	Absent				1	05/09/18 18:45	05/10/18 12:45		

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ANALYTICAL RESULTS

Project: DIST BACT 5/9

Pace Project No.: 7051088

Parameters	Results	Units	Report Limit	Reg. Limit	DF	Prepared	Analyzed	CAS No.	Qual
Sample: HB29									
Lab ID: 7051088004									
Collected: 05/09/18 08:20 Received: 05/09/18 16:45 Matrix: Drinking Water									
Field Chlorine and pH									
Analytical Method:									
Field Residual Chlorine	0.46	mg/L			1		05/09/18 08:20		N3
MBIO Total Coliform DW									
Analytical Method: SM22 9223B Colilert Preparation Method: SM22 9223B Colilert									
Total Coliforms	Absent				1	05/09/18 18:45	05/10/18 12:45		
E.coli	Absent				1	05/09/18 18:45	05/10/18 12:45		

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ANALYTICAL RESULTS

Project: DIST BACT 5/9

Pace Project No.: 7051088

Parameters	Results	Units	Report Limit	Reg. Limit	DF	Prepared	Analyzed	CAS No.	Qual
Sample: HB16									
Lab ID: 7051088005									
Collected: 05/09/18 09:10 Received: 05/09/18 16:45 Matrix: Drinking Water									
Field Chlorine and pH									
Analytical Method:									
Field Residual Chlorine	0.47	mg/L			1		05/09/18 09:10		N3
MBIO Total Coliform DW									
Analytical Method: SM22 9223B Colilert Preparation Method: SM22 9223B Colilert									
Total Coliforms	Absent				1	05/09/18 18:45	05/10/18 12:45		
E.coli	Absent				1	05/09/18 18:45	05/10/18 12:45		

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ANALYTICAL RESULTS

Project: DIST BACT 5/9

Pace Project No.: 7051088

Sample: HB31		Lab ID: 7051088006		Collected: 05/09/18 08:55	Received: 05/09/18 16:45	Matrix: Drinking Water			
Parameters	Results	Units	Report Limit	Reg. Limit	DF	Prepared	Analyzed	CAS No.	Qual
Field Chlorine and pH		Analytical Method:							
Field Residual Chlorine	0.63	mg/L			1		05/09/18 08:55		N3
MBIO Total Coliform DW		Analytical Method: SM22 9223B Colilert Preparation Method: SM22 9223B Colilert							
Total Coliforms	Absent				1	05/09/18 18:45	05/10/18 12:45		
E.coli	Absent				1	05/09/18 18:45	05/10/18 12:45		

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ANALYTICAL RESULTS

Project: DIST BACT 5/9

Pace Project No.: 7051088

Sample: HB25		Lab ID: 7051088007		Collected: 05/09/18 09:40	Received: 05/09/18 16:45	Matrix: Drinking Water			
Parameters	Results	Units	Report Limit	Reg. Limit	DF	Prepared	Analyzed	CAS No.	Qual
Field Chlorine and pH		Analytical Method:							
Field Residual Chlorine	0.60	mg/L			1		05/09/18 09:40		N3
MBIO Total Coliform DW		Analytical Method: SM22 9223B Colilert Preparation Method: SM22 9223B Colilert							
Total Coliforms	Absent				1	05/09/18 18:45	05/10/18 12:45		
E.coli	Absent				1	05/09/18 18:45	05/10/18 12:45		

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ANALYTICAL RESULTS

Project: DIST BACT 5/9

Pace Project No.: 7051088

Sample: HB19		Lab ID: 7051088008		Collected: 05/09/18 08:40	Received: 05/09/18 16:45	Matrix: Drinking Water			
Parameters	Results	Units	Report Limit	Reg. Limit	DF	Prepared	Analyzed	CAS No.	Qual
Field Chlorine and pH		Analytical Method:							
Field Residual Chlorine	0.65	mg/L			1		05/09/18 08:40		N3
MBIO Total Coliform DW		Analytical Method: SM22 9223B Colilert Preparation Method: SM22 9223B Colilert							
Total Coliforms	Absent				1	05/09/18 18:45	05/10/18 12:45		
E.coli	Absent				1	05/09/18 18:45	05/10/18 12:45		

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ANALYTICAL RESULTS

Project: DIST BACT 5/9

Pace Project No.: 7051088

Sample: HB21 **Lab ID: 7051088009** Collected: 05/09/18 09:25 Received: 05/09/18 16:45 Matrix: Drinking Water

Parameters	Results	Units	Report Limit	Reg. Limit	DF	Prepared	Analyzed	CAS No.	Qual
Field Chlorine and pH									
Analytical Method:									
Field Residual Chlorine	0.41	mg/L			1		05/09/18 09:25		N3
MBIO Total Coliform DW									
Analytical Method: SM22 9223B Colilert Preparation Method: SM22 9223B Colilert									
Total Coliforms	Absent				1	05/09/18 18:45	05/10/18 12:45		
E.coli	Absent				1	05/09/18 18:45	05/10/18 12:45		

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ANALYTICAL RESULTS

Project: DIST BACT 5/9

Pace Project No.: 7051088

Sample: HB5A		Lab ID: 7051088010		Collected: 05/09/18 10:00	Received: 05/09/18 16:45	Matrix: Drinking Water				
Parameters	Results	Units	Report Limit	Reg. Limit	DF	Prepared	Analyzed	CAS No.	Qual	
Field Chlorine and pH		Analytical Method:								
Field Residual Chlorine	0.40	mg/L			1		05/09/18 10:00		N3	
MBIO Total Coliform DW		Analytical Method: SM22 9223B Colilert Preparation Method: SM22 9223B Colilert								
Total Coliforms	Absent				1	05/09/18 18:45	05/10/18 12:45			
E.coli	Absent				1	05/09/18 18:45	05/10/18 12:45			

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QUALIFIERS

Project: DIST BACT 5/9

Pace Project No.: 7051088

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.

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

N3 Accreditation is not offered by the relevant laboratory accrediting body for this parameter.

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QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: DIST BACT 5/9

Pace Project No.: 7051088

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
7051088001	HB12		66961		
7051088002	HB13		66961		
7051088003	HB28		66961		
7051088004	HB29		66961		
7051088005	HB16		66961		
7051088006	HB31		66961		
7051088007	HB25		66961		
7051088008	HB19		66961		
7051088009	HB21		66961		
7051088010	HB5A		66961		
7051088001	HB12	SM22 9223B Colilert	66965	SM22 9223B Colilert	66969
7051088002	HB13	SM22 9223B Colilert	66965	SM22 9223B Colilert	66969
7051088003	HB28	SM22 9223B Colilert	66965	SM22 9223B Colilert	66969
7051088004	HB29	SM22 9223B Colilert	66965	SM22 9223B Colilert	66969
7051088005	HB16	SM22 9223B Colilert	66965	SM22 9223B Colilert	66969
7051088006	HB31	SM22 9223B Colilert	66965	SM22 9223B Colilert	66969
7051088007	HB25	SM22 9223B Colilert	66965	SM22 9223B Colilert	66969
7051088008	HB19	SM22 9223B Colilert	66965	SM22 9223B Colilert	66969
7051088009	HB21	SM22 9223B Colilert	66965	SM22 9223B Colilert	66969
7051088010	HB5A	SM22 9223B Colilert	66965	SM22 9223B Colilert	66969

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WO#: 7051088



Sample Request Form PUBLIC WATER SUPPLIER

WELL OFF LINE

Date: 5-9-18

WELL RUN TO SYSTEM

Collected By: K. TUTHILL

Accepted By: *[Signature]*

Cooler Temp: 9.3 °C

YES NO VOC'S PRESERVED WITH HCl

Back 1643

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.
7:50AM 5-9-18	PW	#12	D	-	RO	.41	7.13	BACT w/ccl	
7:45AM 5-9-18	PW	#13	D	-	RO	.64	7.13	BACT w/ccl	
8:00AM 5-9-18	PW	#28	D	-	RO	.47	7.34	BACT w/ccl	
8:20AM 5-9-18	PW	#29	D	-	RO	.46	7.38	BACT w/ccl	
9:00AM 5-9-18	PW	#16	D	-	RO	.47	7.21	BACT w/ccl	
8:55AM 5-9-18	PW	#31	D	-	RO	.63	7.56	BACT w/ccl	
9:40AM 5-9-18	PW	#25	D	-	RO	.60	7.20	BACT w/ccl	
8:40AM 5-9-18	PW	#19	D	-	RO	.65	7.55	BACT w/ccl	
9:35AM 5-9-18	PW	#21	D	-	RO	.41	7.44	BACT w/ccl	
10:00AM 5-9-18	PW	#5A	D	-	RO	.40	7.59	BACT w/ccl	

Remarks: _____



Sample Condition Upon Receipt

Client Name: HBW

Project **WO#: 7051088**
 PM SWM Due Date: 06/08/18
 CL ENT: 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): 2.3

Cooler Temperature Corrected (°C): 2.3

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: AS/10

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 SL WT OIL			
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: _____

