

State of New Jersey  
Department of Children and Families  
Office of Licensing

# DRINKING WATER TESTING STATEMENT OF ASSURANCE

• PROGRAMS IN OPERATING PUBLIC SCHOOLS ARE NOT REQUIRED TO COMPLETE THIS FORM •

|                                                                      |  |                               |  |
|----------------------------------------------------------------------|--|-------------------------------|--|
| Name of Child Care Center:<br>The Leaguers, Inc.                     |  | License ID:<br>160900113      |  |
| Site Address (Building # and Street):<br>999-1005 Broad Street       |  |                               |  |
| Municipality:<br>Newark                                              |  | County:<br>Essex              |  |
| Sponsor/Sponsor Representative:<br>Helen Grace-Fields                |  | Phone #:<br>973-643-0300 x208 |  |
| Sponsor/Sponsor Representative Email:<br>helen_grace@theleaguers.org |  |                               |  |
| Additional Contact Person:                                           |  | Phone #:                      |  |
| Title:<br>Director of Facilities                                     |  | Email:                        |  |

1. The center, as described above, has reviewed the MANUAL OF REQUIREMENTS FOR CHILD CARE CENTERS requiring testing for lead and copper in drinking water and provides assurance that the development and implementation of a testing program was completed in accordance with N.J.A.C. 3A:52-5.3(i)5i as evidenced by our completion of the attached Drinking Water Testing Checklist.
2. The center, as described above, provided all notifications of test results consistent with the requirements of this subchapter.
3. The center, as described above, will continue to fully implement the requirements of this subchapter, including the continuance of any actions taken in response to a lead or copper action level exceedance (e.g., continue to provide bottled water and/or maintain any remedial measure or treatment unit).

**CERTIFICATION:** By signing below, the **Sponsor or Sponsor Representative** certifies that all statements above are true and accurate:

|                                                               |                                  |                              |
|---------------------------------------------------------------|----------------------------------|------------------------------|
| Sponsor/Sponsor Representative: (PRINT)<br>Helen Grace-Fields | Signature:<br>Helen Grace-Fields | Signature Date:<br>2/16/2021 |
|---------------------------------------------------------------|----------------------------------|------------------------------|

**•PROGRAMS IN OPERATING PUBLIC SCHOOLS ARE NOT REQUIRED TO COMPLETE THIS FORM•**

## DRINKING WATER TESTING CHECKLIST

*Note: This form is for child care centers that are supplied water by a community water system.*

State of New Jersey  
Department of Children and Families  
Office of Licensing

### CHILD CARE CENTER INFORMATION

|                                 |  |                                       |  |                |  |                             |  |
|---------------------------------|--|---------------------------------------|--|----------------|--|-----------------------------|--|
| Name of Child Care Center:      |  | The Leaguers, Inc. Head Start Program |  | License ID:    |  | 160900113                   |  |
| Site Address                    |  | Building # and Street:                |  | Municipality:  |  | County:                     |  |
| of Center:                      |  | 999 Broad Street                      |  | Newark         |  | Essex                       |  |
| Sponsor/Sponsor Representative: |  |                                       |  | Phone Number:  |  | Email:                      |  |
| Helen Grace-Fields              |  |                                       |  | (973) 643-0300 |  | helen_grace@theleaguers.org |  |

### CERTIFICATION OF COMPLIANCE WITH LEAD & COPPER SAMPLING AT THE ABOVE CHILD CARE CENTER

|                   |                                                                                                                                                                                    |                                         |                              |
|-------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|------------------------------|
| Sampling Date(s): |                                                                                                                                                                                    | February 29, 2020                       |                              |
| 1.                | Does the center have a signed contract with a New Jersey Certified Drinking Water Laboratory for lead & copper analysis?                                                           | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>  |
| 2.                | Is there an onsite water outlet assessment in accordance with technical guidance?                                                                                                  | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>  |
| 3.                | Is there a floor plan in accordance with technical guidance?                                                                                                                       | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>  |
| 4.                | Were all the drinking water outlets in the center where a child or staff has or may have access (including food preparation and outside drinking water outlets) sampled?           | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>  |
| Sample Date:      |                                                                                                                                                                                    |                                         |                              |
| 6.                | Does the child care center have the chain of custody and analytical reports for all drinking water outlets sampled? <b>Please attach copies.</b>                                   | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>  |
| 7.                | Was all the drinking water outlets sampled in the sequence determined by the floor plan beginning with the outlet closest to the point of entry?                                   | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>  |
| 8.                | Were all samples taken after the water sat undisturbed in pipes for at least 8 hours but no more than 48 hours?                                                                    | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>  |
| 9.                | Were samples collected in pre-cleaned high density polyethylene (HDPE) 250 ml wide mouth single use rigid sample containers?                                                       | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>  |
| 10.               | Were all existing aerators, screens, and filters left in place prior to and during the sampling event?                                                                             | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>  |
| 11.               | Were only cold water samples collected?                                                                                                                                            | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>  |
| 12.               | Did no pre-stagnant flushing take place unless the outlet deviated from normal use and documented on flushing log?                                                                 | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>  |
| 13.               | Was all point of use treatment on outlets, such as filters, documented?                                                                                                            | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>  |
| 14.               | Did any result exceed the action level for lead (.015 µg/L) or copper (1.3 µg/L)?                                                                                                  | YES <input checked="" type="checkbox"/> | NO <input type="checkbox"/>  |
| 15.               | If a result exceeded the action level for lead (15 µg/L) or copper (1500 µg/L) was use of all drinking water outlets immediately discontinued?                                     | YES <input checked="" type="checkbox"/> | N/A <input type="checkbox"/> |
| 16.               | If a result exceeded the action level for lead (15 µg/L) or copper (1500 µg/L) was bottled water provided for drinking and food preparation?                                       | YES <input checked="" type="checkbox"/> | N/A <input type="checkbox"/> |
| 17.               | If a result exceeded the action level for lead (15 µg/L) or copper (1500 µg/L) were signs posted to indicate that the outlets are not to be used for drinking or food preparation? | YES <input checked="" type="checkbox"/> | N/A <input type="checkbox"/> |
| 18.               | Did all drinking water outlets with a result that exceeded the action level for lead (15 µg/L) or copper (1500 µg/L) have a follow-up flush sample conducted?                      | YES <input checked="" type="checkbox"/> | N/A <input type="checkbox"/> |



|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                             |
|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <p><a href="https://www13.state.nj.us/DataMiner/Search/SearchByCategory?isExternal=y&amp;getCategory=y&amp;catName=Certified+Laboratories">https://www13.state.nj.us/DataMiner/Search/SearchByCategory?isExternal=y&amp;getCategory=y&amp;catName=Certified+Laboratories</a></p> <p>List of NJ Certified Laboratories:</p> <p>Drinking Water Outlet Inventory Form: <a href="http://www.nj.gov/dep/watersupply/doc/SP Attachment%20C.docx">http://www.nj.gov/dep/watersupply/doc/SP Attachment%20C.docx</a></p> <p>Types of Water Outlets: <a href="https://www.epa.gov/dwreginfo/3ts-reducing-lead-drinking-water-testing">https://www.epa.gov/dwreginfo/3ts-reducing-lead-drinking-water-testing</a></p> <p>Water Stagnation Vignette: <a href="http://www.nj.gov/dep/watersupply/doc/SP Attachment%20F.docx">http://www.nj.gov/dep/watersupply/doc/SP Attachment%20F.docx</a></p> <p>Sample Collection Vignette: <a href="http://www.nj.gov/dep/watersupply/pdf/quickref.pdf">http://www.nj.gov/dep/watersupply/pdf/quickref.pdf</a></p> <p>Pre Stagnation Flushing Log: <a href="http://www.nj.gov/dep/watersupply/doc/SP Attachment%20E.docx">http://www.nj.gov/dep/watersupply/doc/SP Attachment%20E.docx</a></p> <p>Filter Inventory Form: <a href="http://www.nj.gov/dep/watersupply/doc/SP Attachment%20D.docx">http://www.nj.gov/dep/watersupply/doc/SP Attachment%20D.docx</a></p> <p>Results Letter Template: <a href="http://www.nj.gov/dep/watersupply/doc/resultsletter.doc">http://www.nj.gov/dep/watersupply/doc/resultsletter.doc</a></p> |
| <b>DRINKING WATER TESTING RESOURCES</b>                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                     |

|                                         |                    |                 |                                                                             |
|-----------------------------------------|--------------------|-----------------|-----------------------------------------------------------------------------|
| Sponsor/Sponsor Representative: (PRINT) | Helen Grace-Fields | Signature Date: | 02/16/2021                                                                  |
|                                         | Helen Grace-Fields | Signature:      | Digitally signed by Helen Grace-Fields<br>Date: 2021.02.16 11:21:28 -05'00' |

**CERTIFICATION:** By signing below, the Sponsor or Sponsor Representative certifies that all answers on this checklist are true and accurate:

|                                                                                                      |                                                                                                                                                                                                                                               |
|------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| 19. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO                              | If a result exceeded the action level for lead (15 µg/L) or copper (1500 µg/L) was the local health office notified of results?                                                                                                               |
| 20. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A | If any of the results exceeded the action level for lead (15 µg/L) or copper (1500 µg/L), was notification, including results and remediation measures, provided to the parent(s) of all children attending the center, the staff, and NJDCP? |
| 21. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A | Were any drinking water outlets or potable plumbing replaced or repaired as a remedy for an action level exceedance?                                                                                                                          |
| 22. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A | If any drinking water outlet or potable plumbing was replaced or repaired, were additional samples collected after installation?                                                                                                              |
| 23. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A | Was any chemical treatment unit or process installed to remedy an action level exceedance (e.g., corrosion control treatment)?                                                                                                                |
| 24. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A | If a chemical treatment unit or process was installed to remedy an action level exceedance (e.g., corrosion control treatment), were additional samples collected after the installation?                                                     |
| 25. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A | Was a mechanical process implemented to remedy an action level exceedance (e.g., flushing program)?                                                                                                                                           |
| 26. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A | If a mechanical process was implemented to remedy an action level exceedance (e.g., flushing program), were additional samples collected after the implementation?                                                                            |
| 27. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO <input type="checkbox"/> N/A | If no remedial action was taken, such as those indicated in 21 through 26 above, has the center implemented a written plan of action for use of bottled water for drinking and food preparation?                                              |

Project Name: The Leaguers Head Start  
Project Location: 999 Broad Street, Newark, NJ  
Date of Sampling: February 29, 2020

### Limited Water Sampling Report

409 MINNISINK ROAD • SUITE 102 • TOTOWA, NJ 07512 • (973) 785-7574 • FAX (973) 785-0561

**MANDELL ENVIRONMENTAL CONSULTING**



Limited water sampling was performed by Mandell Environmental Consulting at The Leaguers Head Start, 999 Broad Street, Newark, NJ. Water samples were collected from the water cooler used by the child care center. Samples were also collected from 50% of the other indoor water faucets utilized by the child care. The samples were collected prior to water being used in the building for a minimum of 8 hours and not longer than 48 hours. The samples were collected in 250 milliliter (ml) containers accordance with New Jersey Regulations.

The samples collected were submitted for analysis to Pace Analytical, 575 Broad Hollow Road, Melville, NY 11747, certification # NY158. Samples were analyzed by Graphite Furnace AA, EPA 200.9. The following table contains the results of the sampling. The maximum contaminant level (MCL) for lead in drinking water is 15 ug/L and copper 1,300 ug/L. (Laboratory Results and sampling forms Attached).

Sample Date 02/29/2020

| Sample Number | Source         | Results | Lead | Results | Units | Pos/Neg |
|---------------|----------------|---------|------|---------|-------|---------|
| L-1           | Outlet 2       | <1.0    | 4.7  | ug/L    | Neg.  |         |
| L-2           | Outlet 4       | <1.0    | 3.9  | ug/L    | Neg.  |         |
| L-3           | Water Fountain | <1.0    | 272  | ug/L    | Neg.  |         |
| L-4           | Outlet 6       | <1.0    | 5.1  | ug/L    | Neg.  |         |
| L-5           | Outlet 7       | <1.0    | 6.7  | ug/L    | Neg.  |         |
| L-6           | Outlet 9       | <1.0    | 4.2  | ug/L    | Neg.  |         |
| L-7           | Outlet 10      | <1.0    | 4.7  | ug/L    | Neg.  |         |
| L-8           | Outlet 13      | <1.0    | 3.0  | ug/L    | Neg.  |         |
| L-9           | Water Cooler   | <1.0    | 28.1 | ug/L    | Neg.  |         |

The laboratory results show that none of the samples were found to exceed the lead in drinking water action level of 15 ug/L and copper 1,300 ug/L. Sampling forms and diagram are attached.

Sampling Performed by:

Stuart Casciano  
NJ Lead Inspector/Risk Assessor  
Mandell Environmental Consulting  
409 Minnisink Road, Suite 102  
Totowa, NJ 07512

Signed:  Date: 3-20-2020





# REPORT OF LABORATORY ANALYSIS

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Enclosures

Jennifer Aracri  
jennifer.aracri@pacelabs.com  
(631) 694-3040  
Project Manager

Sincerely,

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

Dear Stuart Casciano:  
Enclosed are the analytical results for sample(s) received by the laboratory on March 06, 2020. 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.

RE: Project: THE LEAGUERS HEAD SPORT 2/29  
Pace Project No.: 70124386

Stuart Casciano  
Mandell Environmental Consulting  
409 Minnisink Road  
Suite 102  
Totowa, NJ 07512

March 19, 2020

www.pacelabs.com

Pace Analytical

Pace Analytical Services, LLC  
575 Broad Hollow Road  
Melville, NY 11747  
(631) 694-3040



Pace Analytical Services, LLC  
575 Broad Hollow Road  
Melville, NY 11747  
(631)694-3040

## CERTIFICATIONS

Project: THE LEAGUERS HEAD SPORT 2/29  
Pace Project No.: 70124386

Pace Analytical Services Long Island  
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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Melville, NY 11747  
(631) 694-3040

ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD SPORT 2/29  
Pace Project No.: 70124386

Sample: L-1 OUTLET 2  
Lab ID: 70124386001 Collected: 02/29/20 10:00 Received: 03/06/20 10:00 Matrix: Drinking Water

| Parameters                     | Results | Units | Report Limit | DF | Prepared       | Analyzed  | CAS No. | Qual |
|--------------------------------|---------|-------|--------------|----|----------------|-----------|---------|------|
| 200.8 MET ICPMS Drinking Water |         |       |              |    |                |           |         |      |
| Analytical Method: EPA 200.8   |         |       |              |    |                |           |         |      |
| Copper                         | 4.7     | ug/L  | 2.0          | 1  | 03/12/20 17:05 | 7440-50-8 |         |      |
| Lead                           | <1.0    | ug/L  | 1.0          | 1  | 03/12/20 17:05 | 7439-92-1 |         |      |

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ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD SPORT 2/29  
Pace Project No.: 70124386

|                      |         |                     |                           |                          |                        |
|----------------------|---------|---------------------|---------------------------|--------------------------|------------------------|
| Sample: L-2 OUTLET 4 |         | Lab ID: 70124386002 | Collected: 02/29/20 10:00 | Received: 03/06/20 10:00 | Matrix: Drinking Water |
| Parameters           | Results | Units               | Report Limit              | DF                       | Prepared               |
|                      |         |                     | Analyzed                  | CAS No.                  | Qual                   |

200.8 MET ICPMS Drinking Water Analytical Method: EPA 200.8

|        |      |      |     |   |                |           |
|--------|------|------|-----|---|----------------|-----------|
| Copper | 3.9  | ug/L | 2.0 | 1 | 03/12/20 17:10 | 7440-50-8 |
| Lead   | <1.0 | ug/L | 1.0 | 1 | 03/12/20 17:10 | 7439-92-1 |

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ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD SPORT 2/29

Pace Project No.: 70124386

|                                |      |                              |                           |                          |                          |
|--------------------------------|------|------------------------------|---------------------------|--------------------------|--------------------------|
| Sample: L-3 WATER FOUNTAIN     |      | Lab ID: 70124386003          | Collected: 02/29/20 10:00 | Received: 03/06/20 10:00 | Matrix: Drinking Water   |
| Parameters                     |      | Results                      | Units                     | Report Limit             | DF                       |
| 200.8 MET ICPMS Drinking Water |      | Analytical Method: EPA 200.8 |                           |                          |                          |
| Copper                         | 272  | ug/L                         | 2.0                       | 1                        | 03/12/20 17:11 7440-50-8 |
| Lead                           | <1.0 | ug/L                         | 1.0                       | 1                        | 03/12/20 17:11 7439-92-1 |

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ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD SPORT 2/29  
Pace Project No.: 70124386

Sample: L-4 OUTLET 6  
Lab ID: 70124386004  
Collected: 02/29/20 10:00  
Received: 03/06/20 10:00  
Matrix: Drinking Water

| Parameters | Results | Units | Report Limit | DF | Prepared       | Analyzed  | CAS No. | Qual |
|------------|---------|-------|--------------|----|----------------|-----------|---------|------|
| Copper     | 5.1     | ug/L  | 2.0          | 1  | 03/12/20 17:12 | 7440-50-8 |         |      |
| Lead       | <1.0    | ug/L  | 1.0          | 1  | 03/12/20 17:12 | 7439-92-1 |         |      |

200.8 MET ICPMS Drinking Water  
Analytical Method: EPA 200.8

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ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD SPORT 2/29  
Pace Project No.: 70124386

|                                |         |       |              |    |                |           |
|--------------------------------|---------|-------|--------------|----|----------------|-----------|
| Sample: L-5 OUTLET 7           |         |       |              |    |                |           |
| Lab ID: 70124386005            |         |       |              |    |                |           |
| Collected: 02/29/20 10:00      |         |       |              |    |                |           |
| Received: 03/06/20 10:00       |         |       |              |    |                |           |
| Matrix: Drinking Water         |         |       |              |    |                |           |
| Parameters                     | Results | Units | Report Limit | DF | Prepared       | Analyzed  |
| 200.8 MET ICPMs Drinking Water |         |       |              |    |                |           |
| Analytical Method: EPA 200.8   |         |       |              |    |                |           |
| Copper                         | 6.7     | ug/L  | 2.0          | 1  | 03/12/20 17:13 | 7440-50-8 |
| Lead                           | <1.0    | ug/L  | 1.0          | 1  | 03/12/20 17:13 | 7439-92-1 |

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ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD SPORT 2/29  
Pace Project No.: 70124386

|                                |      |                              |     |                           |                |                          |  |                        |  |
|--------------------------------|------|------------------------------|-----|---------------------------|----------------|--------------------------|--|------------------------|--|
| Sample: L-6 OUTLET 9           |      | Lab ID: 70124386006          |     | Collected: 02/29/20 10:00 |                | Received: 03/06/20 10:00 |  | Matrix: Drinking Water |  |
| Parameters                     |      | Results                      |     | Units                     |                | Report Limit             |  | DF                     |  |
| 200.8 MET ICPMS Drinking Water |      | Analytical Method: EPA 200.8 |     |                           |                |                          |  |                        |  |
| Copper                         | 4.2  | ug/L                         | 2.0 | 1                         | 03/12/20 17:13 | 7439-92-1                |  |                        |  |
| Lead                           | <1.0 | ug/L                         | 1.0 | 1                         | 03/12/20 17:13 | 7439-92-1                |  |                        |  |

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# ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD SPORT 2/29

Pace Project No.: 70124386

|                                |         |                     |                           |                          |                        |           |         |      |
|--------------------------------|---------|---------------------|---------------------------|--------------------------|------------------------|-----------|---------|------|
| Sample: L-7 OUTLET 10          |         | Lab ID: 70124386007 | Collected: 02/29/20 10:00 | Received: 03/06/20 10:00 | Matrix: Drinking Water |           |         |      |
| Parameters                     | Results | Units               | Report Limit              | DF                       | Prepared               | Analyzed  | CAS No. | Qual |
| 200.8 MET ICPMS Drinking Water |         |                     |                           |                          |                        |           |         |      |
| Analytical Method: EPA 200.8   |         |                     |                           |                          |                        |           |         |      |
| Copper                         | 4.7     | ug/L                | 2.0                       | 1                        | 03/12/20 17:14         | 7440-50-8 |         |      |
| Lead                           | <1.0    | ug/L                | 1.0                       | 1                        | 03/12/20 17:14         | 7439-92-1 |         |      |

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ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD SPORT 2/29

Pace Project No.: 70124386

|                       |         |                     |                           |                          |                        |
|-----------------------|---------|---------------------|---------------------------|--------------------------|------------------------|
| Sample: L-8 OUTLET 13 |         | Lab ID: 70124386008 | Collected: 02/29/20 10:00 | Received: 03/06/20 10:00 | Matrix: Drinking Water |
| Parameters            | Results | Units               | Report Limit              | DF                       | Prepared               |
|                       |         |                     | Analyzed                  | CAS No.                  | Qual                   |

200.8 MET ICPMS Drinking Water

Analytical Method: EPA 200.8

|        |      |      |     |   |                |           |
|--------|------|------|-----|---|----------------|-----------|
| Copper | 3.0  | ug/L | 2.0 | 1 | 03/12/20 17:15 | 7440-50-8 |
| Lead   | <1.0 | ug/L | 1.0 | 1 | 03/12/20 17:15 | 7439-92-1 |

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ANALYTICAL RESULTS

|                                |         |                              |              |                            |                        |
|--------------------------------|---------|------------------------------|--------------|----------------------------|------------------------|
| Project:                       |         | THE LEAGUERS HEAD SPORT 2/29 |              | Pace Project No.: 70124386 |                        |
| Sample: L-9 WATER COOLER       |         | Lab ID: 70124386009          | Collected:   | Received: 03/06/20 10:00   | Matrix: Drinking Water |
| Parameters                     | Results | Units                        | Report Limit | DF                         | Prepared               |
| 200.8 MET ICPMS Drinking Water |         |                              |              |                            | Analyzed               |
| Lead                           | <1.0    | ug/L                         | 1.0          | 1                          | 03/18/20 18:55         |
|                                |         | Analytical Method: EPA 200.8 |              | 7439-92-1                  |                        |

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Date: 03/19/2020 01:36 PM



Pace Analytical Services, LLC  
575 Broad Hollow Road  
Melville, NY 11747  
(631)694-3040

## QUALITY CONTROL DATA

Project: THE LEAGUERS HEAD SPORT 2/29

Pace Project No.: 70124386

|                      |                            |                                                                                                                                |                                                                                                                                |
|----------------------|----------------------------|--------------------------------------------------------------------------------------------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------|
| QC Batch: 152841     | Analysis Method: EPA 200.8 | Analysis Description: 200.8 MET No Prep Drinking Water                                                                         | Associated Lab Samples: 70124386001, 70124386002, 70124386003, 70124386004, 70124386005, 70124386006, 70124386007, 70124386008 |
| METHOD BLANK: 734253 | Matrix: Water              | Associated Lab Samples: 70124386001, 70124386002, 70124386003, 70124386004, 70124386005, 70124386006, 70124386007, 70124386008 |                                                                                                                                |

| Parameter | Units | Blank Result | Reporting Limit | Analyzed       | Qualifiers |
|-----------|-------|--------------|-----------------|----------------|------------|
| Copper    | ug/L  | <2.0         | 2.0             | 03/12/20 17:03 |            |
| Lead      | ug/L  | <1.0         | 1.0             | 03/12/20 17:03 |            |

### LABORATORY CONTROL SAMPLE: 734254

| Parameter | Units | Spike Conc. | LCS Result | % Rec | Limits | Qualifiers |
|-----------|-------|-------------|------------|-------|--------|------------|
| Copper    | ug/L  | 50          | 50.9       | 102   | 85-115 |            |
| Lead      | ug/L  | 50          | 50.0       | 100   | 85-115 |            |

### MATRIX SPIKE SAMPLE: 734256

| Parameter | Units | Result | Spike Conc. | MS Result | MS % Rec | Limits | Qualifiers |
|-----------|-------|--------|-------------|-----------|----------|--------|------------|
| Copper    | ug/L  | <1.0   | 4.7         | 50        | 57.9     | 106    |            |
| Lead      | ug/L  | <1.0   | 4           | 50        | 5.0      | 119    |            |

### MATRIX SPIKE SAMPLE: 734258

| Parameter | Units | Result | Spike Conc. | MS Result | MS % Rec | Limits | Qualifiers |
|-----------|-------|--------|-------------|-----------|----------|--------|------------|
| Copper    | ug/L  | 54.9   | 50          | 101       | 92       | 70-130 |            |
| Lead      | ug/L  | 1.7    | 4           | 6.4       | 118      | 70-130 |            |

### SAMPLE DUPLICATE: 734255

| Parameter | Units | Result | Dup Result | RPD | Qualifiers |
|-----------|-------|--------|------------|-----|------------|
| Copper    | ug/L  | <1.0   | 4.7        | 5.2 | 11         |
| Lead      | ug/L  | <1.0   | 5.2        | 1.0 |            |

### SAMPLE DUPLICATE: 734257

| Parameter | Units | Result | Dup Result | RPD | Qualifiers |
|-----------|-------|--------|------------|-----|------------|
| Copper    | ug/L  | 54.9   | 51.9       | 6   |            |
| Lead      | ug/L  | 1.7    | 1.7        | 2   |            |

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.

## REPORT OF LABORATORY ANALYSIS

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# QUALITY CONTROL DATA

Project: THE LEAGUERS HEAD SPORT 2/29

Pace Project No.: 70124386

QC Batch: 153716  
QC Batch Method: EPA 200.8  
Analysis Method: EPA 200.8  
Analysis Description: 200.8 MET No Prep Drinking Water

Associated Lab Samples: 70124386009

METHOD BLANK: 739517

Associated Lab Samples: 70124386009

Matrix: Water

| Lead | Parameter | Units | Blank Result | Reporting Limit | Analyzed       | Qualifiers |
|------|-----------|-------|--------------|-----------------|----------------|------------|
| Lead | Parameter | ug/L  | <1.0         | 1.0             | 03/18/20 18:44 | Qualifiers |

| Lead | Parameter | Units | Spike Conc. | LCS Result | % Rec | Limits | Qualifiers |
|------|-----------|-------|-------------|------------|-------|--------|------------|
| Lead | Parameter | ug/L  | 50          | 51.8       | 104   | 85-115 | Qualifiers |

| MATRIX SPIKE SAMPLE: 739520 | Parameter | Units | Spike Conc. | MS Result | % Rec | Limits | Qualifiers |
|-----------------------------|-----------|-------|-------------|-----------|-------|--------|------------|
| MATRIX SPIKE SAMPLE: 739520 | Parameter | ug/L  | 30353655025 | 4.5       | 106   | 70-130 | Qualifiers |

| MATRIX SPIKE SAMPLE: 739522 | Parameter | Units | Spike Conc. | MS Result | % Rec | Limits | Qualifiers |
|-----------------------------|-----------|-------|-------------|-----------|-------|--------|------------|
| MATRIX SPIKE SAMPLE: 739522 | Parameter | ug/L  | 70125039004 | 4.2       | 100   | 70-130 | Qualifiers |

| SAMPLE DUPLICATE: 739519 | Parameter | Units | Spike Conc. | MS Result | % Rec | Limits | Qualifiers |
|--------------------------|-----------|-------|-------------|-----------|-------|--------|------------|
| SAMPLE DUPLICATE: 739519 | Parameter | ug/L  | 30353655025 | ND        | 106   | 70-130 | Qualifiers |

| SAMPLE DUPLICATE: 739521 | Parameter | Units | Spike Conc. | MS Result | % Rec | Limits | Qualifiers |
|--------------------------|-----------|-------|-------------|-----------|-------|--------|------------|
| SAMPLE DUPLICATE: 739521 | Parameter | ug/L  | 70125039004 | ND        | 100   | 70-130 | Qualifiers |

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: THE LEAGUERS HEAD SPORT 2/29  
Pace Project No.: 70124386

## 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  $TN_{ii}$  accredited. Contact your Pace PM for the current list of accredited analytes.  
TNI - The NELAC Institute.

## REPORT OF LABORATORY ANALYSIS

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QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: THE LEAGUERS HEAD SPORT 2/29  
Pace Project No.: 70124386

| Lab ID      | Sample ID          | QC Batch Method | QC Batch | Analytical Method | Analytical Batch |
|-------------|--------------------|-----------------|----------|-------------------|------------------|
| 70124386001 | L-1 OUTLET 2       | EPA 200.8       | 152841   |                   |                  |
| 70124386002 | L-2 OUTLET 4       | EPA 200.8       | 152841   |                   |                  |
| 70124386003 | L-3 WATER FOUNTAIN | EPA 200.8       | 152841   |                   |                  |
| 70124386004 | L-4 OUTLET 6       | EPA 200.8       | 152841   |                   |                  |
| 70124386005 | L-5 OUTLET 7       | EPA 200.8       | 152841   |                   |                  |
| 70124386006 | L-6 OUTLET 9       | EPA 200.8       | 152841   |                   |                  |
| 70124386007 | L-7 OUTLET 10      | EPA 200.8       | 152841   |                   |                  |
| 70124386008 | L-8 OUTLET 13      | EPA 200.8       | 152841   |                   |                  |
| 70124386009 | L-9 WATER COOLER   | EPA 200.8       | 153716   |                   |                  |

REPORT OF LABORATORY ANALYSIS

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CHAIN-OF-CUSTODY  
The Chain-of-Custody is a LEGAL  
MO#: 70124386



70124386

Section A  
Required Client Information:

Section B  
Required Project Information:

Section C  
Invoice Information:

Page: 1 of 1  
2054211

|                                       |  |                                      |  |                            |  |                                                                                                                         |  |
|---------------------------------------|--|--------------------------------------|--|----------------------------|--|-------------------------------------------------------------------------------------------------------------------------|--|
| Company: MANDEL ENVIRONMENTAL         |  | Report To: MANDEL ENV.               |  | Company Name: MANDEL ENV.  |  | REGULATORY AGENCY                                                                                                       |  |
| Address: 409 MANUEL BLVD              |  | Copy To:                             |  | Address: 3415              |  | NPDES <input type="checkbox"/> GROUND WATER <input checked="" type="checkbox"/> DRINKING WATER <input type="checkbox"/> |  |
| E-mail To: MANDEL ENVIRONMENTAL       |  | Purchase Order No.:                  |  | Address:                   |  | UST <input type="checkbox"/> RCRA <input type="checkbox"/> OTHER <input type="checkbox"/>                               |  |
| Phone: 703-785-7374 Fax: 703-785-7374 |  | Project Name: THE LEAVES HERD STREET |  | Reference: Project Manager |  | Site Location                                                                                                           |  |
| Requested Date: 5 DAY                 |  | Project Number: 999 BRAD STREET      |  | Paco Profile #:            |  | STATE: NJ                                                                                                               |  |

| ITEM # | Matrix Codes<br>(see valid codes to left) | SAMPLE TYPE<br>(G-GRAB C-COMP) | COLLECTED |          | SAMPLE TEMP AT COLLECTION | # OF CONTAINERS | Preservatives |      |             |                                |                  |     |      |                                               |          |       | Analysis Test | Requested Analysis Filtered (Y/N) | Residual Chlorine (Y/N) | Face Project No./ Lab I.D. |
|--------|-------------------------------------------|--------------------------------|-----------|----------|---------------------------|-----------------|---------------|------|-------------|--------------------------------|------------------|-----|------|-----------------------------------------------|----------|-------|---------------|-----------------------------------|-------------------------|----------------------------|
|        |                                           |                                | DATE      | TIME     |                           |                 | DATE          | TIME | Unpreserved | H <sub>2</sub> SO <sub>4</sub> | HNO <sub>3</sub> | HCl | NaOH | Na <sub>2</sub> S <sub>2</sub> O <sub>3</sub> | Methanol | Other |               |                                   |                         |                            |
| 1      | L-1 OUTLET 2                              | G                              | 2-27-20   | 10:00 AM | 1                         | 1               |               |      |             |                                |                  |     |      |                                               |          |       |               |                                   |                         |                            |
| 2      | L-2 OUTLET 4                              | G                              |           |          |                           |                 |               |      |             |                                |                  |     |      |                                               |          |       |               |                                   |                         |                            |
| 3      | L-3 WATER FOUNTAIN                        | G                              |           |          |                           |                 |               |      |             |                                |                  |     |      |                                               |          |       |               |                                   |                         |                            |
| 4      | L-4 OUTLET 6                              | G                              |           |          |                           |                 |               |      |             |                                |                  |     |      |                                               |          |       |               |                                   |                         |                            |
| 5      | L-5 OUTLET 7                              | G                              |           |          |                           |                 |               |      |             |                                |                  |     |      |                                               |          |       |               |                                   |                         |                            |
| 6      | L-6 OUTLET 9                              | G                              |           |          |                           |                 |               |      |             |                                |                  |     |      |                                               |          |       |               |                                   |                         |                            |
| 7      | L-7 OUTLET 10                             | G                              |           |          |                           |                 |               |      |             |                                |                  |     |      |                                               |          |       |               |                                   |                         |                            |
| 8      | L-8 OUTLET 13                             | G                              |           |          |                           |                 |               |      |             |                                |                  |     |      |                                               |          |       |               |                                   |                         |                            |
| 9      |                                           |                                |           |          |                           |                 |               |      |             |                                |                  |     |      |                                               |          |       |               |                                   |                         |                            |
| 10     |                                           |                                |           |          |                           |                 |               |      |             |                                |                  |     |      |                                               |          |       |               |                                   |                         |                            |
| 11     |                                           |                                |           |          |                           |                 |               |      |             |                                |                  |     |      |                                               |          |       |               |                                   |                         |                            |
| 12     |                                           |                                |           |          |                           |                 |               |      |             |                                |                  |     |      |                                               |          |       |               |                                   |                         |                            |

| RELIQUISHED BY / AFFILIATION | DATE  | TIME  | ACCEPTED BY / AFFILIATION | DATE  | TIME | SAMPLE CONDITIONS |
|------------------------------|-------|-------|---------------------------|-------|------|-------------------|
| 3415                         | 2410  | 10:30 | 2410                      | 10:30 |      |                   |
| 2410                         | 10:30 |       | 2410                      | 10:30 |      |                   |

|                            |              |            |                       |                             |                      |
|----------------------------|--------------|------------|-----------------------|-----------------------------|----------------------|
| SAMPLER NAME AND SIGNATURE |              | Temp in °C | Received on Ice (Y/N) | Custody Sealed Cooler (Y/N) | Samples Intact (Y/N) |
| PRINT Name of SAMPLER:     | SURAT CHANDR |            |                       |                             |                      |
| SIGNATURE of SAMPLER:      | 3-4-2020     |            |                       |                             |                      |

# Sample Condition Upon Receipt

Pace Analytical

Client Name:

Pro

MO#: 70124386

Due Date: 03/20/20

CLIENT: MEC

PM: JSA

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

Tracking #: 7779 4499 375C

Custody Seal on Cooler/Box Present: ☐ Yes ☐ No

Packing Material: ☐ Bubble Wrap ☐ Ziploc ☐ None ☐ Other

Thermometer Used: ☒ 4091

Cooler Temperature Corrected (°C): 5.0

Date and Initials of person examining contents: JSA 3/6/20

Temp should be above freezing to 6.0°C

USDA Regulated Soil ( ☐ N/A, water sample)

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

COMMENTS:

|    |                                                                                                                                                                                       |                                         |                             |
|----|---------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------|-----------------------------|
| 1  | Chain of Custody Present:                                                                                                                                                             | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 2  | Chain of Custody Filled Out:                                                                                                                                                          | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 3  | Chain of Custody Relinquished:                                                                                                                                                        | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 4  | Sampler Name & Signature on COC:                                                                                                                                                      | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 5  | Samples Arrived within Hold Time:                                                                                                                                                     | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 6  | Short Hold Time Analysis (<72hr):                                                                                                                                                     | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 7  | Rush Turn Around Time Requested:                                                                                                                                                      | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 8  | Sufficient Volume: (Triple volume provided for MS/MSD)                                                                                                                                | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 9  | Correct Containers Used:                                                                                                                                                              | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 10 | Pace Containers Used:                                                                                                                                                                 | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 11 | Containers Intact:                                                                                                                                                                    | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 12 | Filtered volume received for Dissolved tests                                                                                                                                          | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 13 | Sample Labels match COC:                                                                                                                                                              | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 14 | Includes date/time/ID/Analysis Matrix SL (M) OIL                                                                                                                                      | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 15 | All containers needing preservation have been checked                                                                                                                                 | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 16 | pH paper Lot #                                                                                                                                                                        | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 17 | All containers needing preservation are found to be in compliance with EPA recommendation? (HNO <sub>3</sub> , H <sub>2</sub> SO <sub>4</sub> , HCl, NaOH>9 Sulfide, NaOH>12 Cyanide) | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 18 | Exceptions: VOA, Coliform, TOC/DOC, Oil and Grease, DRO/RO15 (water), Per Method, VOA pH is checked after analysis                                                                    | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 19 | Samples checked for decontamination:                                                                                                                                                  | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 20 | Ki starch test strips Lot #                                                                                                                                                           | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 21 | Residual chlorine strips Lot #                                                                                                                                                        | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 22 | Headspace in VOA Vials (>6mm):                                                                                                                                                        | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 23 | Trip Blank Present:                                                                                                                                                                   | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 24 | Trip Blank Custody Seals Present:                                                                                                                                                     | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |
| 25 | Pace Trip Blank Lot # (if applicable):                                                                                                                                                | <input checked="" type="checkbox"/> Yes | <input type="checkbox"/> No |

Field Data Required?

Y I N

Date/Time:

3/10/20 12:30

Client Notification/Resolution:

Person Contacted:

SNAG Casiano

Comments/Resolution:

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

F-LI-C-002-rev.02



# CHAIN-OF-CUSTODY / Analytical Request Document

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

| Section A: Required Client Information    |                            |                                                                                                                 |                                          | Section B: Required Project Information     |           |      |                           | Section C: Invoicing Information     |               |      |             | Page: 1 of 1                                                                                                                       |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
|-------------------------------------------|----------------------------|-----------------------------------------------------------------------------------------------------------------|------------------------------------------|---------------------------------------------|-----------|------|---------------------------|--------------------------------------|---------------|------|-------------|------------------------------------------------------------------------------------------------------------------------------------|------------------|--------|------|---------------|-------------------------|-----------------------------------------------|----------|-------|--|------|--|-------------------|--|
| Company: <b>MANDELL ENVIRONMENTAL</b>     |                            |                                                                                                                 |                                          | Report To: <b>MANDELL ENV.</b>              |           |      |                           | Attention: <b>MANDELL ENV.</b>       |               |      |             | 2054211                                                                                                                            |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| Address: <b>409 MUSKIE RD</b>             |                            |                                                                                                                 |                                          | Copy To: <b>MANDELL ENV.</b>                |           |      |                           | Company Name: <b>MANDELL ENV.</b>    |               |      |             | Regulatory Agency: <b>NPDES</b>                                                                                                    |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| City: <b>ROCHESTER, NY 14609</b>          |                            |                                                                                                                 |                                          | Purchase Order No.: <b>999 BROAD STREET</b> |           |      |                           | Address: <b>3415</b>                 |               |      |             | NPDES <input checked="" type="checkbox"/> GROUND WATER <input checked="" type="checkbox"/> DRINKING WATER <input type="checkbox"/> |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| Email: <b>MANDELL@ENVIRONMENTALNY.COM</b> |                            |                                                                                                                 |                                          | Project Name: <b>THE LEAVES HEAD SHOP</b>   |           |      |                           | Reference: <b>FACE</b>               |               |      |             | UST <input type="checkbox"/> RCRA <input type="checkbox"/> OTHER <input type="checkbox"/>                                          |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| Phone: <b>716-337-3774</b>                |                            |                                                                                                                 |                                          | Project Number: <b>999 BROAD STREET</b>     |           |      |                           | Face Project Manager: <b>MANDELL</b> |               |      |             | Site Location: <b>NY</b>                                                                                                           |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| Requested Due Date: <b>5 DAY</b>          |                            |                                                                                                                 |                                          | Project Number: <b>999 BROAD STREET</b>     |           |      |                           | Face Profile: <b>NY</b>              |               |      |             |                                                                                                                                    |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| Section D: Required Client Information    |                            |                                                                                                                 |                                          |                                             |           |      |                           |                                      |               |      |             | Requested Analysis Filtered (Y/N)                                                                                                  |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| ITEM #                                    | SAMPLE ID<br>(A-Z, 0-9, /) | Matrix Codes<br>Drinking Water<br>Waste Water<br>Product<br>Soil/Solid<br>Oil<br>Wipe<br>Air<br>Tissue<br>Other | MATRIX CODE<br>(see valid codes to left) | SAMPLE TYPE<br>(S-GRAB C-COMP)              | COLLECTED |      | SAMPLE TEMP AT COLLECTION | # OF CONTAINERS                      | Preservatives |      |             |                                                                                                                                    |                  |        |      | Analysis Test | Residual Chlorine (Y/N) |                                               |          |       |  |      |  |                   |  |
|                                           |                            |                                                                                                                 |                                          |                                             | DATE      | TIME |                           |                                      | DATE          | TIME | Unpreserved | H <sub>2</sub> SO <sub>4</sub>                                                                                                     | HNO <sub>3</sub> | HCl    | NaOH |               |                         | Na <sub>2</sub> S <sub>2</sub> O <sub>3</sub> | Methanol | Other |  |      |  |                   |  |
| 1                                         | L-1                        | OUTLET 2                                                                                                        |                                          |                                             |           |      |                           |                                      |               |      |             |                                                                                                                                    |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| 2                                         | L-2                        | OUTLET 4                                                                                                        |                                          |                                             |           |      |                           |                                      |               |      |             |                                                                                                                                    |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| 3                                         | L-3                        | WATER FOUNTAIN                                                                                                  |                                          |                                             |           |      |                           |                                      |               |      |             |                                                                                                                                    |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| 4                                         | L-4                        | OUTLET 6                                                                                                        |                                          |                                             |           |      |                           |                                      |               |      |             |                                                                                                                                    |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| 5                                         | L-5                        | OUTLET 7                                                                                                        |                                          |                                             |           |      |                           |                                      |               |      |             |                                                                                                                                    |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| 6                                         | L-6                        | OUTLET 9                                                                                                        |                                          |                                             |           |      |                           |                                      |               |      |             |                                                                                                                                    |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| 7                                         | L-7                        | OUTLET 10                                                                                                       |                                          |                                             |           |      |                           |                                      |               |      |             |                                                                                                                                    |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| 8                                         | L-8                        | OUTLET 13                                                                                                       |                                          |                                             |           |      |                           |                                      |               |      |             |                                                                                                                                    |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| 9                                         | L-9                        | WATER COOLER                                                                                                    |                                          |                                             |           |      |                           |                                      |               |      |             |                                                                                                                                    |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| 10                                        |                            |                                                                                                                 |                                          |                                             |           |      |                           |                                      |               |      |             |                                                                                                                                    |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| 11                                        |                            |                                                                                                                 |                                          |                                             |           |      |                           |                                      |               |      |             |                                                                                                                                    |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| 12                                        |                            |                                                                                                                 |                                          |                                             |           |      |                           |                                      |               |      |             |                                                                                                                                    |                  |        |      |               |                         |                                               |          |       |  |      |  |                   |  |
| ADDITIONAL COMMENTS                       |                            |                                                                                                                 |                                          |                                             |           |      |                           |                                      |               |      |             | RELINQUISHED BY / AFFILIATION                                                                                                      |                  | DATE   |      | TIME          |                         | ACCEPTED BY / AFFILIATION                     |          | DATE  |  | TIME |  | SAMPLE CONDITIONS |  |
|                                           |                            |                                                                                                                 |                                          |                                             |           |      |                           |                                      |               |      |             | 3/4/20                                                                                                                             |                  | 3/4/20 |      |               |                         |                                               |          |       |  |      |  |                   |  |

ORIGINAL

Important Note: By signing this form you are accepting Face's NET 30 day payment terms and agreeing to late charges of 1.5% per month for any invoices not paid within 30 days.

# Attachment C - Drinking Water Outlet Inventory

(Complete for each school)

Name of School: THE LABOURS ROAD SMIT Address: 999 BROAD STREET

NEWARK NJ

Grade Levels: \_\_\_\_\_ Year School Constructed: \_\_\_\_\_ Renovated/Additions: \_\_\_\_\_

Individual school project officer Name/Signature: \_\_\_\_\_

Date Completed: \_\_\_\_\_

| #  | Type | Location    | Code | Operational <sup>2</sup><br>(Y/N) | Signs of<br>Corrosion <sup>3</sup><br>(Y/N) | Filter <sup>4</sup><br>(Y/N) | Brass<br>Fittings,<br>Faucets<br>or<br>valves?<br>(Y/N) | Aerator/<br>Screen<br>(Y/N) | Motion<br>Activated<br>(Y/N) | Chiller<br>(Y/N) | Water Cooler |       | Cc |
|----|------|-------------|------|-----------------------------------|---------------------------------------------|------------------------------|---------------------------------------------------------|-----------------------------|------------------------------|------------------|--------------|-------|----|
|    |      |             |      |                                   |                                             |                              |                                                         |                             |                              |                  | Make         | Model |    |
| 1  | W/F  | DRINK       |      | Y                                 | N                                           | N                            | N                                                       | Y                           | N                            | N                |              |       |    |
| 2  |      | Room 3      |      |                                   |                                             |                              |                                                         |                             |                              |                  |              |       |    |
| 3  |      | Room 3 Bath |      |                                   |                                             |                              |                                                         |                             |                              |                  |              |       |    |
| 4  |      | Room 3 Bath |      |                                   |                                             |                              |                                                         |                             |                              |                  |              |       |    |
| 5  |      | Room 3      |      |                                   |                                             |                              |                                                         |                             |                              |                  |              |       |    |
| 6  |      | Bathroom    |      |                                   |                                             |                              |                                                         |                             |                              |                  |              |       |    |
| 7  |      | "           |      |                                   |                                             |                              |                                                         |                             |                              |                  |              |       |    |
| 8  |      | Lounger     |      |                                   |                                             |                              |                                                         |                             |                              |                  |              |       |    |
| 9  |      | "           |      |                                   |                                             |                              |                                                         |                             |                              |                  |              |       |    |
| 10 |      | Room 4      |      |                                   |                                             |                              |                                                         |                             |                              |                  |              |       |    |
| 11 |      | Room 4 Bath |      |                                   |                                             |                              |                                                         |                             |                              |                  |              |       |    |

IUF - INDOOR WATER FAUCET, W/F - WASTE FOUNTAIN, IUC - WASTE COOLER

<sup>1</sup> Number outlets starting at the closest outlet to the Point of Entry (POE).  
<sup>2</sup> Document if permanently or temporarily out of service on the Attachment B- Plumbing Profile.  
<sup>3</sup> Signs of corrosion detected, such as but not limited to frequent leaks, rust-colored water, or stained fixtures, dishes, or laundry.  
<sup>4</sup> Document on Attachment D- Filter Inventory.



(Complete for each school)

Address: 999 BROAD STREET

NEUHAIZ  
Wf

Date Completed:

IWF - INDOOR WATER POLO, Wf - WATER FOULING, WC - WATER COOLING

<sup>1</sup> Number outlets starting at the closest outlet to the Point of Entry (POE).

<sup>2</sup> Document if permanently or temporarily out of service on the Attachment B- Plumbing Profile.

Signs of corrosion detected, such as but not limited to frequent leaks, rust-colored water, or stained fixtures, dishes, or laundry.

<sup>4</sup> Document on Attachment D-Filter Inventory.



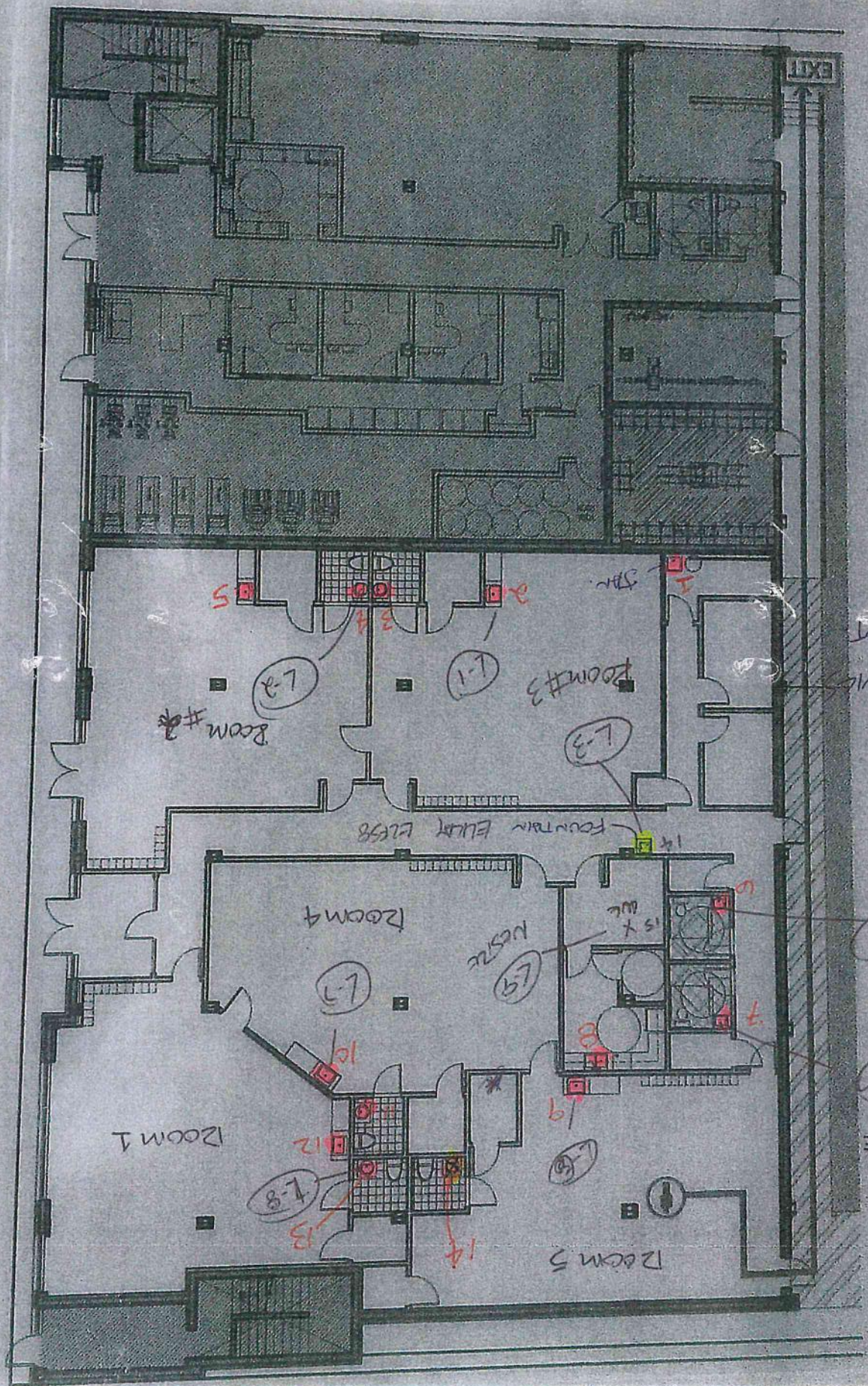
(INSERT SCHOOL DISTRICT NAME) Sampling Plan

Address: 999 Board Street New York NY

Individual School Project Officer Signature: \_\_\_\_\_  
Date: \_\_\_\_\_

[illegible]





14 SIMS  
1 ROOM

YOU ARE HERE  
VACUATION  
ROUTE  
FLOOR