

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: The Leaguers, Inc		License ID: 07LEA0002
Site Address (Building # and Street): 100 Linden Avenue		
Municipality: Irvington	County: Essex	
Sponsor/Sponsor Representative: Helen Grace-Fields		Phone #: 973-643-0300
Sponsor/Sponsor Representative Email: helen_grace@theleaguers.org		
Additional Contact Person:		Phone #:
Title: Director of Facilities	Email: leaguers281@aol.com	

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)	Helen Grace-Fields
Signature: <i>Helen Grace-Fields</i>	
Signature Date: March 9, 2021	

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

DRINKING WATER TESTING CHECKLIST

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

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

CHILD CARE CENTER INFORMATION

Name of Child Care Center: The Leaguers, Inc. Head Start Program		License ID: 07LEA0002	
Site Address of Center:	Building # and Street: 100 Linden Avenue	Municipality: Irvington	County: Essex
Sponsor/Sponsor Representative: Helen Grace-Fields		Phone Number: (973) 643-0300	Email: helen_grace@theleaguers.org

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

Sampling Date(s):	December 30, 2020
1. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Does the center have a signed contract with a New Jersey Certified Drinking Water Laboratory for lead & copper analysis?
2. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Is there an onsite water outlet assessment in accordance with technical guidance?
3. <input type="checkbox"/> YES <input type="checkbox"/> NO	Is there a floor plan in accordance with technical guidance?
4. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Sample Date:	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?
5. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Sample Date:	Were at least 50% of all indoor water faucets utilized by the center sampled?
6. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Does the child care center have the chain of custody and analytical reports for all drinking water outlets sampled? Please attach copies.
7. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	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?
8. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Were all samples taken after the water sat undisturbed in pipes for at least 8 hours but no more than 48 hours?
9. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Were samples collected in pre-cleaned high density polyethylene (HDPE) 250 ml wide mouth single use rigid sample containers?
10. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Were all existing aerators, screens, and filters left in place prior to and during the sampling event?
11. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Were only cold water samples collected?
12. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Did no pre-stagnant flushing take place unless the outlet deviated from normal use and documented on flushing log?
13. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Was all point of use treatment on outlets, such as filters, documented?
14. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Did any result exceed the action level for lead (.015 µg/L) or copper (1.3 µg/L)?
15. <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	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?
16. <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	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?
17. <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	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?
18. <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	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?

19. <input type="checkbox"/> YES <input checked="" 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 type="checkbox"/> NO <input checked="" 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 NJDCF?
21. <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" 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 type="checkbox"/> NO <input checked="" type="checkbox"/> N/A Sample Date:	If any drinking water outlet or potable plumbing was replaced or repaired, were additional samples collected after installation?
23. <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" 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 type="checkbox"/> NO <input checked="" type="checkbox"/> N/A Sample Date:	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 type="checkbox"/> NO <input checked="" 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 type="checkbox"/> NO <input checked="" 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 type="checkbox"/> NO <input checked="" 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?

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

Sponsor/Sponsor Representative: (PRINT)	Helen Grace-Fields
Signature:	<i>Helen Grace-Fields</i>
Signature Date:	03/09/2021

DRINKING WATER TESTING RESOURCES

List of NJ Certified Laboratories:

<https://www13.state.nj.us/DataMiner/Search/SearchByCategory?isExternal=y&getCategory=y&catName=Certified+Laboratories>

Drinking Water Outlet Inventory Form:

http://www.nj.gov/dep/watersupply/doc/SP_Attachment%20C.docx

Types of Water Outlets:

<https://www.epa.gov/dwreginfo/3ts-reducing-lead-drinking-water-testing>

Water Stagnation Vignette:

http://www.nj.gov/dep/watersupply/doc/SP_Attachment%20F.docx

Sample Collection Vignette:

<http://www.nj.gov/dep/watersupply/pdf/quickref.pdf>

Pre Stagnation Flushing Log:

http://www.nj.gov/dep/watersupply/doc/SP_Attachment%20E.docx

Filter Inventory Form:

http://www.nj.gov/dep/watersupply/doc/SP_Attachment%20D.docx

Results Letter Template:

<http://www.nj.gov/dep/watersupply/doc/resultsletter.doc>



MANDELL ENVIRONMENTAL CONSULTING

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

Limited Water Sampling Report

Project Name: The Leaguers Head Start

Project Location: 100 Linden Avenue, Irvington, NJ

Date of Sampling: December 30, 2020

Limited water sampling was performed by Mandell Environmental Consulting at The Leaguers Head Start, 100 Linden Avenue, Irvington, NJ. Water samples were collected from the water cooler and kitchen 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.

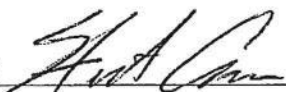
The samples collected were submitted for analysis to Pace Analytical, 575 Broad Hollow Road, Melville, NY 11747, certification # NY158. Samples were analyzed by Graphite Furnace AA, EPA 200.9. The following table contains the results of the sampling. The maximum contaminant level (MCL) for lead in drinking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

Sample Date 12/30/2020

Sample Number	Source	Results Lead	Results Copper	Units	Pos/Neg
N-1	Outlet 1	<1.0	271	ug/L	Neg.
N-2	Outlet 2	1.8	189	ug/L	Neg.
N-3	Outlet 5	<1.0	327	ug/L	Neg.
N-4	Outlet 7	1.9	234	ug/L	Neg.
N-5	Kitchen	<1.0	324	ug/L	Neg.
N-6	Portable Sink	12.6	259	ug/L	Neg.
N-7	Water Cooler 1	<1.0	<2.0	ug/L	Neg.
N-8	Water Cooler 2	<1.0	<2.0	ug/L	Neg.
N-9	Water Cooler 3	<1.0	<2.0	ug/L	Neg.
N-10	Water Cooler 4	<1.0	<2.0	ug/L	Neg.
N-11	Water Cooler 5	<1.0	<2.0	ug/L	Neg.
N-12	Water Cooler 6	<1.0	<2.0	ug/L	Neg.
N-13	Water Cooler 7	<1.0	<2.0	ug/L	Neg.
N-14	Water Cooler 8	<1.0	<2.0	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: 2-10-2021

February 08, 2021

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

RE: Project: THE LEAGUERS HEAD START 12/30
Pace Project No.: 70161051

Dear Stuart Casciano:

Enclosed are the analytical results for sample(s) received by the laboratory on January 30, 2021. The results relate only to the samples included in this report. Results reported herein conform to the applicable TNI/NELAC Standards and the laboratory's Quality Manual, where applicable, unless otherwise noted in the body of the report.

The test results provided in this final report were generated by each of the following laboratories within the Pace Network:

- Pace Analytical Services - Melville

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

Sincerely,



Kimberley M. Mack
kimberley.mack@pacelabs.com
(631)694-3040
Project Manager

Enclosures



REPORT OF LABORATORY ANALYSIS

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CERTIFICATIONS

Project: THE LEAGUERS HEAD START 12/30
Pace Project No.: 70161051

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

REPORT OF LABORATORY ANALYSIS

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ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD START 12/30

Pace Project No.: 70161051

Sample: N-1 OUTLET 1		Lab ID: 70161051001	Collected: 12/30/20 00:00	Received: 01/30/21 10:10	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 Pace Analytical Services - Melville						
Copper	271	ug/L	2.0	1		02/04/21 15:39	7440-50-8	
Lead	<1.0	ug/L	1.0	1		02/04/21 15:39	7439-92-1	

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ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD START 12/30

Pace Project No.: 70161051

Sample: N-2 OUTLET 2		Lab ID: 70161051002	Collected: 12/30/20 00:00	Received: 01/30/21 10:10	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 Pace Analytical Services - Melville						
Copper	189	ug/L	2.0	1		02/04/21 15:40	7440-50-8	
Lead	1.8	ug/L	1.0	1		02/04/21 15:40	7439-92-1	

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ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD START 12/30

Pace Project No.: 70161051

Sample: N-3 OUTLET 5		Lab ID: 70161051003	Collected: 12/30/20 00:00	Received: 01/30/21 10:10	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 Pace Analytical Services - Melville						
Copper	327	ug/L	2.0	1		02/04/21 15:42	7440-50-8	
Lead	<1.0	ug/L	1.0	1		02/04/21 15:42	7439-92-1	

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

ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD START 12/30

Pace Project No.: 70161051

Sample: N-4 OUTLET 7		Lab ID: 70161051004	Collected: 12/30/20 00:00	Received: 01/30/21 10:10	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 Pace Analytical Services - Melville						
Copper	234	ug/L	2.0	1		02/04/21 15:47	7440-50-8	M1
Lead	1.9	ug/L	1.0	1		02/04/21 15:47	7439-92-1	

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Date: 02/08/2021 05:14 PM

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ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD START 12/30

Pace Project No.: 70161051

Sample: N-5 KITCHEN		Lab ID: 70161051005	Collected: 12/30/20 00:00	Received: 01/30/21 10:10	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 Pace Analytical Services - Melville						
Copper	324	ug/L	2.0	1		02/04/21 15:55	7440-50-8	
Lead	<1.0	ug/L	1.0	1		02/04/21 15:55	7439-92-1	

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

ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD START 12/30

Pace Project No.: 70161051

Sample: N-6 PORTABLE SINK		Lab ID: 70161051006	Collected: 12/30/20 00:00	Received: 01/30/21 10:10	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 Pace Analytical Services - Melville						
Copper	259	ug/L	2.0	1		02/04/21 15:57	7440-50-8	
Lead	12.6	ug/L	1.0	1		02/04/21 15:57	7439-92-1	

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Date: 02/08/2021 05:14 PM

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ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD START 12/30

Pace Project No.: 70161051

Sample: N-7 WATER COOLER 1		Lab ID: 70161051007	Collected: 12/30/20 00:00	Received: 01/30/21 10:10	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 Pace Analytical Services - Melville						
Copper	<2.0	ug/L	2.0	1		02/04/21 15:59	7440-50-8	
Lead	<1.0	ug/L	1.0	1		02/04/21 15:59	7439-92-1	

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ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD START 12/30

Pace Project No.: 70161051

Sample: N-8 WATER COOLER 2		Lab ID: 70161051008	Collected: 12/30/20 00:00	Received: 01/30/21 10:10	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 Pace Analytical Services - Melville						
Copper	<2.0	ug/L	2.0	1		02/04/21 16:00	7440-50-8	
Lead	<1.0	ug/L	1.0	1		02/04/21 16:00	7439-92-1	

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ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD START 12/30
Pace Project No.: 70161051

Sample: N-9 WATER COOLER 3		Lab ID: 70161051009	Collected: 12/30/20 00:00	Received: 01/30/21 10:10	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 Pace Analytical Services - Melville						
Copper	<2.0	ug/L	2.0	1		02/04/21 16:02	7440-50-8	
Lead	<1.0	ug/L	1.0	1		02/04/21 16:02	7439-92-1	

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ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD START 12/30

Pace Project No.: 70161051

Sample: N-10 WATER COOLER 4		Lab ID: 70161051010	Collected: 12/30/20 00:00	Received: 01/30/21 10:10	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 Pace Analytical Services - Melville						
Copper	<2.0	ug/L	2.0	1		02/04/21 16:03	7440-50-8	
Lead	<1.0	ug/L	1.0	1		02/04/21 16:03	7439-92-1	

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ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD START 12/30

Pace Project No.: 70161051

Sample: N-11 WATER COOLER 5		Lab ID: 70161051011	Collected: 12/30/20 00:00	Received: 01/30/21 10:10	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 Pace Analytical Services - Melville						
Copper	<2.0	ug/L	2.0	1		02/04/21 16:05	7440-50-8	
Lead	<1.0	ug/L	1.0	1		02/04/21 16:05	7439-92-1	

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ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD START 12/30

Pace Project No.: 70161051

Sample: N-12 WATER COOLER 6		Lab ID: 70161051012	Collected: 12/30/20 00:00	Received: 01/30/21 10:10	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 Pace Analytical Services - Melville						
Copper	<2.0	ug/L	2.0	1		02/04/21 16:07	7440-50-8	
Lead	<1.0	ug/L	1.0	1		02/04/21 16:07	7439-92-1	

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ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD START 12/30

Pace Project No.: 70161051

Sample: N-13 WATER COOLER 7		Lab ID: 70161051013	Collected: 12/30/20 00:00	Received: 01/30/21 10:10	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 Pace Analytical Services - Melville						
Copper	<2.0	ug/L	2.0	1		02/04/21 16:11	7440-50-8	
Lead	<1.0	ug/L	1.0	1		02/04/21 16:11	7439-92-1	

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ANALYTICAL RESULTS

Project: THE LEAGUERS HEAD START 12/30

Pace Project No.: 70161051

Sample: N-14 WATER COOLER 8		Lab ID: 70161051014	Collected: 12/30/20 00:00	Received: 01/30/21 10:10	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 Pace Analytical Services - Melville						
Copper	<2.0	ug/L	2.0	1		02/04/21 16:13	7440-50-8	
Lead	<1.0	ug/L	1.0	1		02/04/21 16:13	7439-92-1	

REPORT OF LABORATORY ANALYSIS

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QUALITY CONTROL DATA

Project: THE LEAGUERS HEAD START 12/30

Pace Project No.: 70161051

QC Batch:	195304	Analysis Method:	EPA 200.8
QC Batch Method:	EPA 200.8	Analysis Description:	200.8 MET No Prep Drinking Water
		Laboratory:	Pace Analytical Services - Melville

Associated Lab Samples: 70161051001, 70161051002, 70161051003

METHOD BLANK: 958504 Matrix: Water

Associated Lab Samples: 70161051001, 70161051002, 70161051003

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Copper	ug/L	<2.0	2.0	02/04/21 14:53	
Lead	ug/L	<1.0	1.0	02/04/21 14:53	

LABORATORY CONTROL SAMPLE: 958505

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Copper	ug/L	50	51.4	103	85-115	
Lead	ug/L	50	51.7	103	85-115	

MATRIX SPIKE SAMPLE: 958508

Parameter	Units	70160415001 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Copper	ug/L	16.9	2	18.0	58	70-130 M1	
Lead	ug/L	1.7	2	3.8	104	70-130	

MATRIX SPIKE SAMPLE: 958510

Parameter	Units	70160710010 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Copper	ug/L	0.0023 mg/L	2	4.4	105	70-130	
Lead	ug/L	<1.0	2	2.3	114	70-130	

SAMPLE DUPLICATE: 958507

Parameter	Units	70160415001 Result	Dup Result	RPD	Qualifiers
Copper	ug/L	16.9	16.5	2	
Lead	ug/L	1.7	1.7	4	

SAMPLE DUPLICATE: 958509

Parameter	Units	70160710010 Result	Dup Result	RPD	Qualifiers
Copper	ug/L	0.0023 mg/L	2.4	0	
Lead	ug/L	<1.0	<1.0		

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

REPORT OF LABORATORY ANALYSIS

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QUALITY CONTROL DATA

Project: THE LEAGUERS HEAD START 12/30
Pace Project No.: 70161051

QC Batch: 195305 Analysis Method: EPA 200.8
QC Batch Method: EPA 200.8 Analysis Description: 200.8 MET No Prep Drinking Water
Laboratory: Pace Analytical Services - Melville
Associated Lab Samples: 70161051004, 70161051005, 70161051006, 70161051007, 70161051008, 70161051009, 70161051010, 70161051011, 70161051012, 70161051013, 70161051014

METHOD BLANK: 958513 Matrix: Water
Associated Lab Samples: 70161051004, 70161051005, 70161051006, 70161051007, 70161051008, 70161051009, 70161051010, 70161051011, 70161051012, 70161051013, 70161051014

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Copper	ug/L	<2.0	2.0	02/04/21 15:44	
Lead	ug/L	<1.0	1.0	02/04/21 15:44	

LABORATORY CONTROL SAMPLE: 958514

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Copper	ug/L	50	50.1	100	85-115	
Lead	ug/L	50	51.8	104	85-115	

MATRIX SPIKE SAMPLE: 958516

Parameter	Units	70161051004 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Copper	ug/L	234	2	228	-322	70-130 M1	
Lead	ug/L	1.9	2	4.1	107	70-130	

MATRIX SPIKE SAMPLE: 958518

Parameter	Units	70161051014 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Copper	ug/L	<2.0	2	2.1	104	70-130	
Lead	ug/L	<1.0	2	2.2	112	70-130	

SAMPLE DUPLICATE: 958515

Parameter	Units	70161051004 Result	Dup Result	RPD	Qualifiers
Copper	ug/L	234	235	0	
Lead	ug/L	1.9	1.9	2	

SAMPLE DUPLICATE: 958517

Parameter	Units	70161051014 Result	Dup Result	RPD	Qualifiers
Copper	ug/L	<2.0	<2.0		

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

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QUALITY CONTROL DATA

Project: THE LEAGUERS HEAD START 12/30
Pace Project No.: 70161051

SAMPLE DUPLICATE: 958517

Parameter	Units	70161051014 Result	Dup Result	RPD	Qualifiers
Lead	ug/L	<1.0	<1.0		

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

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QUALIFIERS

Project: THE LEAGUERS HEAD START 12/30
Pace Project No.: 70161051

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.
ND - Not Detected at or above adjusted reporting limit.
TNTC - Too Numerous To Count
J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.
MDL - Adjusted Method Detection Limit.
PQL - Practical Quantitation Limit.
RL - Reporting Limit - The lowest concentration value that meets project requirements for quantitative data with known precision and bias for a specific analyte in a specific matrix.
S - Surrogate
1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.
Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.
LCS(D) - Laboratory Control Sample (Duplicate)
MS(D) - Matrix Spike (Duplicate)
DUP - Sample Duplicate
RPD - Relative Percent Difference
NC - Not Calculable.
SG - Silica Gel - Clean-Up
U - Indicates the compound was analyzed for, but not detected.
N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.
Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.
TNI - The NELAC Institute.

SAMPLE QUALIFIERS

Sample: 70161051001
[1] 100 LINDEN AVE., IRVINGTON, NJ
Sample: 70161051002
[1] 100 LINDEN AVE., IRVINGTON, NJ
Sample: 70161051003
[1] 100 LINDEN AVE., IRVINGTON, NJ
Sample: 70161051004
[1] 100 LINDEN AVE., IRVINGTON, NJ
Sample: 70161051005
[1] 100 LINDEN AVE., IRVINGTON, NJ
Sample: 70161051006
[1] 100 LINDEN AVE., IRVINGTON, NJ
Sample: 70161051007
[1] 100 LINDEN AVE., IRVINGTON, NJ
Sample: 70161051008
[1] 100 LINDEN AVE., IRVINGTON, NJ
Sample: 70161051009
[1] 100 LINDEN AVE., IRVINGTON, NJ

REPORT OF LABORATORY ANALYSIS

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QUALIFIERS

Project: THE LEAGUERS HEAD START 12/30
Pace Project No.: 70161051

SAMPLE QUALIFIERS

Sample: 70161051010

[1] 100 LINDEN AVE., IRVINGTON, NJ

Sample: 70161051011

[1] 100 LINDEN AVE., IRVINGTON, NJ

Sample: 70161051012

[1] 100 LINDEN AVE., IRVINGTON, NJ

Sample: 70161051013

[1] 100 LINDEN AVE., IRVINGTON, NJ

Sample: 70161051014

[1] 100 LINDEN AVE., IRVINGTON, NJ

ANALYTE QUALIFIERS

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

REPORT OF LABORATORY ANALYSIS

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QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: THE LEAGUERS HEAD START 12/30
Pace Project No.: 70161051

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
70161051001	N-1 OUTLET 1	EPA 200.8	195304		
70161051002	N-2 OUTLET 2	EPA 200.8	195304		
70161051003	N-3 OUTLET 5	EPA 200.8	195304		
70161051004	N-4 OUTLET 7	EPA 200.8	195305		
70161051005	N-5 KITCHEN	EPA 200.8	195305		
70161051006	N-6 PORTABLE SINK	EPA 200.8	195305		
70161051007	N-7 WATER COOLER 1	EPA 200.8	195305		
70161051008	N-8 WATER COOLER 2	EPA 200.8	195305		
70161051009	N-9 WATER COOLER 3	EPA 200.8	195305		
70161051010	N-10 WATER COOLER 4	EPA 200.8	195305		
70161051011	N-11 WATER COOLER 5	EPA 200.8	195305		
70161051012	N-12 WATER COOLER 6	EPA 200.8	195305		
70161051013	N-13 WATER COOLER 7	EPA 200.8	195305		
70161051014	N-14 WATER COOLER 8	EPA 200.8	195305		

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WO#: 70161051



70161051

CHAIN-OF-CUSTODY / Analytical Request Document

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

Section C Invoice Information: Attention: MANDRELL ENVU. Company Name: MANDRELL ENVU. Address: SAME Place/Quota Reference: SAME Place/Project Manager: SAME Place/Field St: SAME		Page: 1 of 2 2054211																																																																																																																																																		
Section D Required Client Information: Report To: MANDRELL ENVU. Copy To: MANDRELL ENVU. Purchase Order No.: 100 UNDAV 100 UNDAV Project Name: THE LAGUPOS ROAD STREET Project Number: 100 UNDAV 100 UNDAV		REGULATORY AGENCY: <input checked="" type="checkbox"/> NPDES <input checked="" type="checkbox"/> GROUND WATER <input checked="" type="checkbox"/> DRINKING WATER <input type="checkbox"/> UST <input type="checkbox"/> RORA <input type="checkbox"/> OTHER Site Location: UT STATE: UT																																																																																																																																																		
Section E Requested Analysis Filtered (Y/N)																																																																																																																																																				
<table border="1"> <thead> <tr> <th rowspan="2">ITEM #</th> <th rowspan="2">Matrix Codes WASTEWATER / CODE</th> <th rowspan="2">COLLECTED</th> <th rowspan="2">DATE</th> <th rowspan="2">TIME</th> <th rowspan="2">DATE</th> <th rowspan="2">TIME</th> <th rowspan="2">ACCEPTED BY / AFFILIATION</th> <th rowspan="2">DATE</th> <th rowspan="2">TIME</th> <th rowspan="2">SAMPLE CONDITIONS</th> </tr> <tr> <th>DATE</th> <th>TIME</th> </tr> </thead> <tbody> <tr> <td>1</td> <td>N-1 OUTLET 1</td> <td>COMPOSITE START</td> <td>12-30-2020</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>2</td> <td>N-2 OUTLET 2</td> <td>COMPOSITE END/GRAB</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>3</td> <td>N-3 OUTLET 3</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>4</td> <td>N-4 OUTLET 4</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>5</td> <td>N-5 OUTLET 5</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>6</td> <td>N-6 PORTABLE SINK</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>7</td> <td>N-7 WASTEWATER 1</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>8</td> <td>N-8 WASTEWATER 2</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>9</td> <td>N-9 WASTEWATER 3</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>10</td> <td>N-10 WASTEWATER 4</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>11</td> <td>N-11 WASTEWATER 5</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> <tr> <td>12</td> <td>N-12 WASTEWATER 6</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </tbody> </table>				ITEM #	Matrix Codes WASTEWATER / CODE	COLLECTED	DATE	TIME	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS	DATE	TIME	1	N-1 OUTLET 1	COMPOSITE START	12-30-2020								2	N-2 OUTLET 2	COMPOSITE END/GRAB									3	N-3 OUTLET 3										4	N-4 OUTLET 4										5	N-5 OUTLET 5										6	N-6 PORTABLE SINK										7	N-7 WASTEWATER 1										8	N-8 WASTEWATER 2										9	N-9 WASTEWATER 3										10	N-10 WASTEWATER 4										11	N-11 WASTEWATER 5										12	N-12 WASTEWATER 6									
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Section F ADDITIONAL COMMENTS: RELINQUISHED BY / AFFILIATION: MANDRELL ENVU. DATE: 12-30-2020 TIME: 5:00 PM ACCEPTED BY / AFFILIATION: MANDRELL ENVU. DATE: 12-30-2020 TIME: 5:00 PM SAMPLE CONDITIONS: 1-18-2021																																																																																																																																																				
Section G SIGNATURES: SAMPLER NAME AND SIGNATURE: MANDRELL ENVU. PRINT NAME OF SAMPLER: MANDRELL ENVU. SIGNATURE OF SAMPLER: MANDRELL ENVU. DATE SIGNED (MM/DD/YYYY): 1-18-2021																																																																																																																																																				
Section H RECEIVED BY / AFFILIATION: MANDRELL ENVU. DATE: 1-18-2021 TIME: 10:10 SAMPLE CONDITIONS: 1-18-2021																																																																																																																																																				

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Carrier: ☒ Fed Ex ☐ UPS ☐ USPS ☐ Client ☐ Commercial ☐ Pace ☐ Other

Packing #: 7127 7135 0584

Study Seal on Cooler/Box Present: ☐ Yes ☒ No Seals intact: ☐ Yes ☒ No

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

Thermometer Used: TH091

Correction Factor: -0.2

Cooler Temperature (°C): 1.6

Cooler Temperature Corrected (°C): 1.4

Temp should be above freezing to 6.0°C

DA Regulated Soil (☒ N/A, water sample)

Date and Initials of person examining contents: KIN 1/30/21

Do samples originate in a quarantine zone within the United States: AL, AR, CA, FL, GA, ID, LA, MS, NC,

Did samples originate from a foreign source

IL, NY, OK, OR, SC, TN, TX, or VA (check map)? ☐ Yes ☒ No

including Hawaii and Puerto Rico)? ☐ Yes ☒ No

For '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.
Port Hold Time Analysis (<72hr):	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		6.
24hr Turn Around Time Requested:	<input type="checkbox"/> Yes	<input checked="" type="checkbox"/> No		7.
Sufficient Volume: (Triple volume provided for)	<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		10.
Containers Intact:	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No		11.
Filtered volume received for Dissolved tests	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A	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, Matrix: SL <input checked="" type="checkbox"/> WT <input type="checkbox"/> OIL				
Containers needing preservation have been checked?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	13.
paper Lot # 16025466				
Containers needing preservation are found to be compliance with method recommendation?	<input checked="" type="checkbox"/> Yes	<input type="checkbox"/> No	<input type="checkbox"/> N/A	Sample #
NO ₃ , H ₂ SO ₄ , HCl, NaOH > 9 Sulfide, > 12 Cyanide)				
ceptions: VOA, Coliform, TOC/DOC, Oil and Grease, 10/8015 (water).				
or 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.
starch test strips Lot #				
Individual chlorine strips Lot #				
14500 CN samples checked for sulfide?	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A	15.
Acetate Strips Lot #				
Headspace in VOA Vials (>6mm):	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A	16.
ip Blank Present:	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A	17.
ip Blank Custody Seals Present	<input type="checkbox"/> Yes	<input type="checkbox"/> No	<input checked="" type="checkbox"/> N/A	
Ice Trip Blank Lot # (if applicable):				

Client Notification/ Resolution:

Field Data Required?

Y / N

Person Contacted:

Date/Time:

Comments/ Resolution:

Attachment C - Drinking Water Outlet Inventory

(Complete for each school)

Name of School: The Labovols Head School Address: 100 Linden Ave, Livingston NJ

Grade Levels: _____ Year School Constructed: _____ Renovated/Additions: _____

Individual school project officer Name/Signature: _____

Date Completed: _____

#	Type	Location	Code	Operational ² (Y/N)	Signs of Corrosion ³ (Y/N)	Filter ⁴ (Y/N)	Brass Fittings, Faucets or valves? (Y/N)	Aerator/ Screen (Y/N)	Motion Activated (Y/N)	Chiller (Y/N)	Water Cooler	Co
1	IWF	FAC. BATH		Y	N	N	N	Y	N	N		
2		BATH 1										
3		"										
4		BATH 2										
5		"										
6		2nd BATH										
7	✓	"										
8	TP	KITCHEN						N		Y		
9	WC	ROOM 105								Y	ALPINE 70016	
10	WC	" 103								Y	"	
11	WC	" 104		✓	✓	✓	✓	✓	✓	Y	"	
IWF INDOOR WATER FAUCET												
WC - WATER COOLER												
FP FROST PROOF												

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

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

³ Signs of corrosion detected, such as but not limited to frequent leaks, rust-colored water, or stained fixtures, dishes, or laundry.

⁴ Document on Attachment D- Filter Inventory.

(Complete for each school)

52415

Renovated/Additions:

Date Completed:

Twf Indeen Water Fault WL - WATER COLLOR

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

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

⁴ Document on Attachment D- Filter Inventory.

Attachment D - Filter Inventory (Complete for each school)

Name of School: The Logans Road School Grade Levels: 1-5

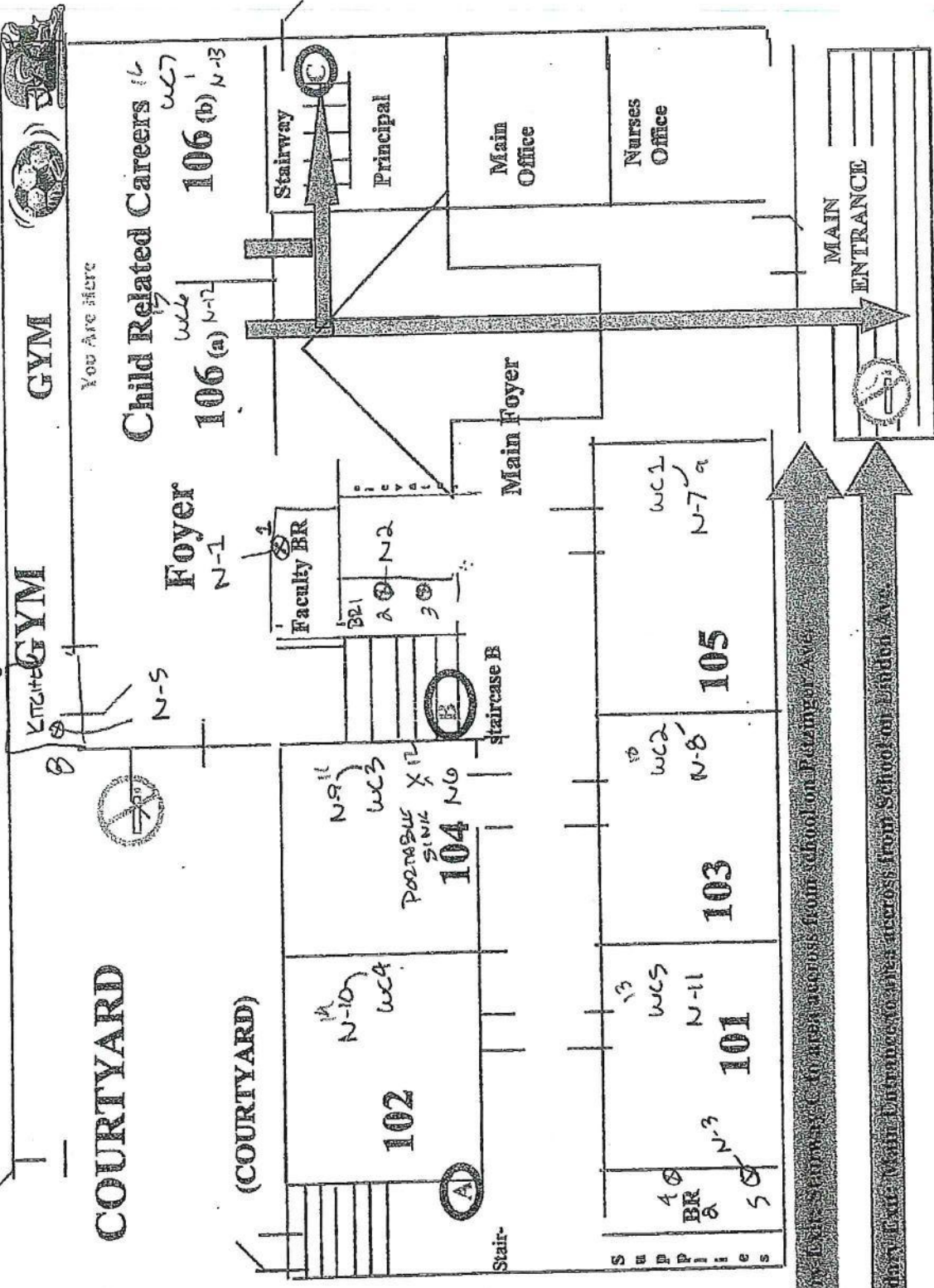
Address: 100 LINDEN AVE, IRVINGTON NJ

Individual School Project Officer Signature: _____ Date: _____

[illegible]

P E T Z I N G E R A A V E.

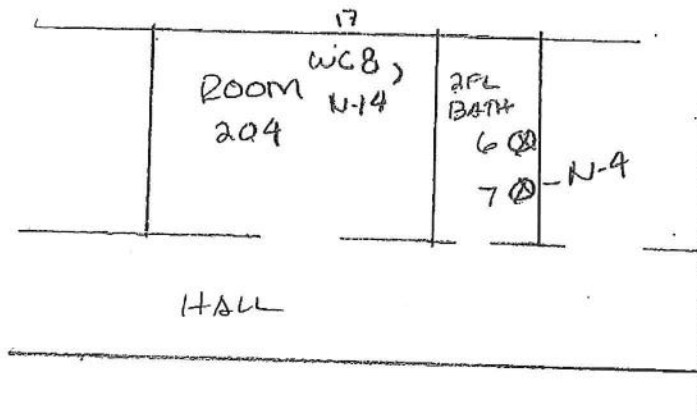
Myrtle Avenue



Linden Avenue Exit

FIRE EXIT PLAN - FIRST FLOOR

L I N D E N A V E.



2FL

100 LINDEN AVE
IRVINGTON NJ

Mandell Lead Inspectors, Inc

dba

**MANDELL ENVIRONMENTAL
CONSULTING**

409 Minniskink Road, Suite 102, Totowa, NJ 07512
T: 973-785-7574* F: 973-785-0561
mandelllead@verizon.net* www.mandellenvironmental.com

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

DRINKING WATER TESTING CHECKLIST

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

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

CHILD CARE CENTER INFORMATION

Name of Child Care Center: THE LEADERS HEAD START		License ID:	
Site Address of Center: 100 LINDEN AVE	Building # and Street:	Municipality: EDWINGTON	County: ESSEX
Sponsor/Sponsor Representative:		Phone Number:	Email:

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

Sampling Date(s):	12-30-2020
1. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Does the center have a signed contract with a New Jersey Certified Drinking Water Laboratory for lead & copper analysis? MANDEL ENVIRONMENTAL COLLEGE SAMPLES
2. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Is there an onsite water outlet assessment in accordance with technical guidance?
3. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Is there a floor plan in accordance with technical guidance?
4. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Sample Date:	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?
5. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO Sample Date:	Were at least 50% of all indoor water faucets utilized by the center sampled?
6. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Does the child care center have the chain of custody and analytical reports for all drinking water outlets sampled? Please attach copies.
7. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	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?
8. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Were all samples taken after the water sat undisturbed in pipes for at least 8 hours but no more than 48 hours?
9. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Were samples collected in pre-cleaned high density polyethylene (HDPE) 250 ml wide mouth single use rigid sample containers?
10. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Were all existing aerators, screens, and filters left in place prior to and during the sampling event?
11. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Were only cold water samples collected?
12. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Did no pre-stagnant flushing take place unless the outlet deviated from normal use and documented on flushing log?
13. <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Was all point of use treatment on outlets, such as filters, documented?
14. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	Did any result exceed the action level for lead (15 µg/L) or copper (1300 µg/L)?
15. <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	If a result exceeded the action level for lead (15 µg/L) or copper (1300 µg/L) was use of all drinking water outlets immediately discontinued?
16. <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	If a result exceeded the action level for lead (15 µg/L) or copper (1300 µg/L) was bottled water provided for drinking and food preparation?
17. <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	If a result exceeded the action level for lead (15 µg/L) or copper (1300 µg/L) were signs posted to indicate that the outlets are not to be used for drinking or food preparation?

18. <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	Did all drinking water outlets with a result that exceeded the action level for lead (15 µg/L) or copper (1300 µg/L) have a follow-up flush sample conducted?
19. <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO	If a result exceeded the action level for lead (15 µg/L) or copper (1300 µg/L) was the local health office notified of results?
20. <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" type="checkbox"/> N/A	If any of the results exceeded the action level for lead (15 µg/L) or copper (1300 µg/L), was notification, including results and remediation measures, provided to the parent(s) of all children attending the center, the staff, and NJDCF?
21. <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" 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 type="checkbox"/> NO <input checked="" type="checkbox"/> N/A Sample Date:	If any drinking water outlet or potable plumbing was replaced or repaired, were additional samples collected after installation?
23. <input type="checkbox"/> YES <input type="checkbox"/> NO <input checked="" 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 type="checkbox"/> NO <input checked="" type="checkbox"/> N/A Sample Date:	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 type="checkbox"/> NO <input checked="" 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 type="checkbox"/> NO <input checked="" 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 type="checkbox"/> NO <input checked="" 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?

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

Sponsor/Sponsor Representative: (PRINT)	
Signature:	
Signature Date:	

DRINKING WATER TESTING RESOURCES

Schools - Lead Sampling Information

<http://www.nj.gov/dep/watersupply/schools.htm>

Lead Sampling in Schools Technical Guidance FAQs

<http://www.nj.gov/dep/watersupply/pdf/leadfaq.pdf>

3Ts for Reducing Lead in Drinking Water: Testing

<https://www.epa.gov/dwreginfo/3ts-reducing-lead-drinking-water-testing>

Quick Reference Guide Sampling For Lead in Drinking Water in Schools:

<http://www.nj.gov/dep/watersupply/pdf/quickref.pdf>

List of NJ Certified Laboratories:

<https://www13.state.nj.us/DataMiner/Search/SearchByCategory?isExternal=y&getCategory=y&catName=Certified+Laboratories>

Drinking Water Outlet Inventory Form:

http://www.nj.gov/dep/watersupply/doc/SP_Attachment%20C.docx

Sampling Water Use Certification:

http://www.nj.gov/dep/watersupply/doc/SP_Attachment%20F.docx

Filter Inventory Form:

http://www.nj.gov/dep/watersupply/doc/SP_Attachment%20D.docx

Results Letter Template:

<http://www.nj.gov/dep/watersupply/doc/resultsletter.doc>