

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: <i>Community School in Nutley</i>		License ID: <i>07 Com 007</i>	
Site Address of Center: <i>100 Vincent Place</i>	Building # and Street: <i>100 Vincent Place</i>	Municipality: <i>Nutley</i>	County: <i>Essex</i>
Sponsor/Sponsor Representative: <i>Juan Skorupski</i>		Phone Number: <i>(973) 661-0789</i>	Email: <i>juan.skorupski@jerizon.net</i>

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

Sampling Date(s):	
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 checked="" type="checkbox"/> YES <input type="checkbox"/> NO	Is there a floor plan in accordance with technical guidance?
4. <input type="checkbox"/> YES <input checked="" 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 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 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 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 checked="" 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 checked="" 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)	Joan Skorupski
Signature:	<i>Joan Skorupski</i>
Signature Date:	10/17/23

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/quickrcf.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>

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

DRINKING WATER TESTING STATEMENT OF ASSURANCE

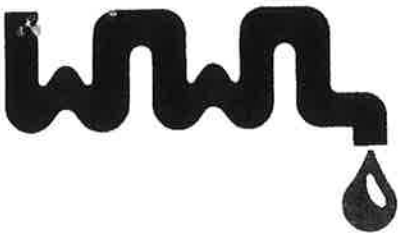
• PROGRAMS IN OPERATING PUBLIC SCHOOLS ARE NOT REQUIRED TO COMPLETE THIS FORM •

Name of Child Care Center: <i>Community School in Nutley</i>		License ID: <i>07COM007</i>
Site Address (Building # and Street): <i>100 Vincent Place</i>		
Municipality: <i>Nutley</i>	County: <i>Essex</i>	
Sponsor/Sponsor Representative: <i>Joan Skorupski</i>		Phone #: <i>973 661-0789</i>
Sponsor/Sponsor Representative Email: <i>joanskorupski@verizon.net</i>		
Additional Contact Person: <i>Nancy Kennedy</i>		Phone #: <i>973 661-0789</i>
Title: <i>Director</i>	Email: <i>joanskorupski@verizon.net</i>	

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)	<i>Joan Skorupski</i>
Signature:	<i>Joan Skorupski</i>
Signature Date:	<i>10/5/23</i>



**W.A.T.E.R. WORKS
LABORATORY INC.**

360 Glenwood Ave., East Orange, NJ 07017
(973) 678-3787 FAX (973) 678-6779

Client: Community School Nutley
100 Vincent Pl
Nutley, NJ

Project: 100 Vincent Pl
Nutley, New Jersey

Analysis: See Chain of Custody

Client ID: See Chain of Custody

WWL ID #: 309568 through 309572

Date Received: September 21, 2023

Report Date: October 16, 2023

Michele Gizzi
QA/QC Officer

NJDEP LABORATORY ID # 07673

W.W.L.'S TOTAL LIABILITY FOR ANY WORK PERFORMED IS LIMITED TO THE COST OF SERVICES RENDERED.

ANALYTICAL REPORT

PREPARED FOR

Attn: Ms. Camille Retana
WATER Works Laboratory Inc
360 Glenwood Ave
East Orange, New Jersey 07017

Generated 10/15/2023 5:57:55 PM

JOB DESCRIPTION

Community (309568)

JOB NUMBER

460-289191-1

Eurofins Edison

Job Notes

This report may not be reproduced except in full, and with written approval from the laboratory. The results relate only to the samples tested. For questions please contact the Project Manager at the e-mail address or telephone number listed on this page.

The test results in this report relate only to the samples as received by the laboratory and will meet all requirements of the methodology, with any exceptions noted. This report shall not be reproduced except in full, without the express written approval of the laboratory. All questions should be directed to the Eurofins Environment Testing Northeast, LLC Project Manager.

Authorization



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10/15/2023 5:57:55 PM

Authorized for release by
Julie Gilmore, Project Manager I
Julie.Gilmore@et.eurofinsus.com
(484)685-0865

Case Narrative

Client: WATER Works Laboratory Inc
Project/Site: Community (309568)

Job ID: 460-289191-1

Job ID: 460-289191-1

Laboratory: Eurofins Edison

Narrative

Job Narrative 460-289191-1

Analytical test results meet all requirements of the associated regulatory program listed on the Accreditation/Certification Summary Page unless otherwise noted under the individual analysis. Data qualifiers are applied to indicate exceptions. Noncompliant quality control (QC) is further explained in narrative comments.

Matrix QC may not be reported if insufficient sample or site-specific QC samples were not submitted. In these situations, to demonstrate precision and accuracy at a batch level, a LCS/LCSD may be performed, unless otherwise specified in the method. Surrogate and/or isotope dilution analyte recoveries (if applicable) which are outside of the QC window are confirmed unless attributed to a dilution or otherwise noted in the narrative.

Regulated compliance samples (e.g. SDWA, NPDES) must comply with the associated agency requirements/permits.

Receipt

The samples were received on 9/22/2023 11:10 AM. Unless otherwise noted below, the samples arrived in good condition, and, where required, properly preserved and on ice. The temperatures of the 2 coolers at receipt time were 0.4°C and 0.8°C

Metals

No additional analytical or quality issues were noted, other than those described above or in the Definitions/ Glossary page.

Sample Summary

Client: WATER Works Laboratory Inc
Project/Site: Community (309568)

Job ID: 460-289191-1

Lab Sample ID	Client Sample ID	Matrix	Collected	Received
460-289191-1	309568 (A2A)	Water	09/21/23 07:00	09/22/23 11:10
460-289191-2	309569 (A8)	Water	09/21/23 07:05	09/22/23 11:10
460-289191-3	309570 (A9)	Water	09/21/23 07:10	09/22/23 11:10
460-289191-4	309571 (Boys)	Water	09/21/23 07:15	09/22/23 11:10
460-289191-5	309572 (Girls)	Water	09/21/23 07:20	09/22/23 11:10

Client Sample Results

Client: WATER Works Laboratory Inc
Project/Site: Community (309568)

Job ID: 460-289191-1

Client Sample ID: 309568 (A2A)

Date Collected: 09/21/23 07:00

Date Received: 09/22/23 11:10

Lab Sample ID: 460-289191-1

Matrix: Water

Method: 200.8 - Metals (ICP/MS)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Analyzed	Dil Fac	Analyst
Lead	0.25	U	2.0	0.25	ug/L		10/13/23 12:58	1	YZH
Copper	8.2		2.5	1.7	ug/L		10/13/23 12:58	1	YZH

Client Sample ID: 309569 (A8)

Date Collected: 09/21/23 07:05

Date Received: 09/22/23 11:10

Lab Sample ID: 460-289191-2

Matrix: Water

Method: 200.8 - Metals (ICP/MS)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Analyzed	Dil Fac	Analyst
Lead	0.25	U	2.0	0.25	ug/L		10/13/23 13:00	1	YZH
Copper	19.0		2.5	1.7	ug/L		10/13/23 13:00	1	YZH

Client Sample ID: 309570 (A9)

Date Collected: 09/21/23 07:10

Date Received: 09/22/23 11:10

Lab Sample ID: 460-289191-3

Matrix: Water

Method: 200.8 - Metals (ICP/MS)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Analyzed	Dil Fac	Analyst
Lead	0.25	U	2.0	0.25	ug/L		10/13/23 13:04	1	YZH
Copper	30.3		2.5	1.7	ug/L		10/13/23 13:04	1	YZH

Client Sample ID: 309571 (Boys)

Date Collected: 09/21/23 07:15

Date Received: 09/22/23 11:10

Lab Sample ID: 460-289191-4

Matrix: Water

Method: 200.8 - Metals (ICP/MS)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Analyzed	Dil Fac	Analyst
Lead	0.51	J	2.0	0.25	ug/L		10/13/23 13:05	1	YZH
Copper	36.0		2.5	1.7	ug/L		10/13/23 13:05	1	YZH

Client Sample ID: 309572 (Girls)

Date Collected: 09/21/23 07:20

Date Received: 09/22/23 11:10

Lab Sample ID: 460-289191-5

Matrix: Water

Method: 200.8 - Metals (ICP/MS)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Analyzed	Dil Fac	Analyst
Lead	0.25	U	2.0	0.25	ug/L		10/13/23 13:06	1	YZH
Copper	22.5		2.5	1.7	ug/L		10/13/23 13:06	1	YZH

Accreditation/Certification and Definitions Summary

Client: WATER Works Laboratory Inc
 Project/Site: Community (309568)

Job ID: 460-289191-1

Laboratory: Eurofins Edison

The accreditations/certifications listed below are applicable to this report.

Authority	Program	Identification Number	Expiration Date
New Jersey	NELAP	12028	06-30-24

Qualifiers

Metals

Qualifier	Qualifier Description
J	Result is less than the RL but greater than or equal to the MDL and the concentration is an approximate value.
U	Indicates the analyte was analyzed for but not detected.

Glossary

Abbreviation	These commonly used abbreviations may or may not be present in this report.
μ	Listed under the "D" column to designate that the result is reported on a dry weight basis
%R	Percent Recovery
1C	Result is from the primary column on a dual-column method.
2C	Result is from the confirmation column on a dual-column method.
CFL	Contains Free Liquid
CFU	Colony Forming Unit
CNF	Contains No Free Liquid
DER	Duplicate Error Ratio (normalized absolute difference)
Dil Fac	Dilution Factor
DL	Detection Limit (DoD/DOE)
DL, RA, RE, IN	Indicates a Dilution, Re-analysis, Re-extraction, or additional Initial metals/anion analysis of the sample
DLC	Decision Level Concentration (Radiochemistry)
EDL	Estimated Detection Limit (Dioxin)
LOD	Limit of Detection (DoD/DOE)
LOQ	Limit of Quantitation (DoD/DOE)
MCL	EPA recommended "Maximum Contaminant Level"
MDA	Minimum Detectable Activity (Radiochemistry)
MDC	Minimum Detectable Concentration (Radiochemistry)
MDL	Method Detection Limit
ML	Minimum Level (Dioxin)
MPN	Most Probable Number
MQL	Method Quantitation Limit
MRL	Method Reporting Limit
NC	Not Calculated
ND	Not Detected at the reporting limit (or MDL or EDL if shown)
NEG	Negative / Absent
POS	Positive / Present
PQL	Practical Quantitation Limit
PRES	Presumptive
QC	Quality Control
RER	Relative Error Ratio (Radiochemistry)
RL	Reporting Limit or Requested Limit (Radiochemistry)
RPD	Relative Percent Difference, a measure of the relative difference between two points
SDL	Sample Detection Limit
SDL	Sample Detection Limit
SDL	Sample Detection Limit
TEF	Toxicity Equivalent Factor (Dioxin)
TEQ	Toxicity Equivalent Quotient (Dioxin)

Accreditation/Certification and Definitions Summary

Client: WATER Works Laboratory Inc
Project/Site: Community (309568)

Job ID: 460-289191-1

Glossary (Continued)

Abbreviation **These commonly used abbreviations may or may not be present in this report.**

TNTC Too Numerous To Count

Method Summary

Client: WATER Works Laboratory Inc
Project/Site: Community (309568)

Job ID: 460-289191-1

Method	Method Description	Protocol	Laboratory
200.8	Metals (ICP/MS)	EPA	EET EDI
200	Preparation, Metals	EPA	EET EDI

Protocol References:

EPA = US Environmental Protection Agency

Laboratory References:

EET EDI = Eurofins Edison, 777 New Durham Road, Edison, NJ 08817, TEL (732)549-3900

Chain of Custody Record

693420



Environment Testing America

TAL-9210

Address: _____

Regulatory Program: DW NPDES RCRA Other: LI

Project Manager: Patricia Bissell Site Contact: _____

Company Name: Waterworks Client Contact: _____

Address: 360 Glenwood Ave.

City/State/Zip: E. Orange, NJ 07017

Phone: 973-670-3777

Fax: _____

Project Name: Community

Site: 309569

P.O.#: _____

Sample Identification	Sample Date	Sample Time	Sample Type (C=Comp, G=Grab)	Matrix	# of Cont.	Filtered Sample (Y/N)	Perform MS/MSD (Y/N)
309569 (A2A)	9/23/20	700	G	DW	1		X
309569 (A8)	705				1		X
309570 (A9)	710				1		X
309571 (Boys)	715				1		X
309572 (Girls)	720				1		X

9 of 10

Sample Specific Notes:

1

2

3

4

5

460-289191 Chain of Custody

Barcode

Sample Disposal (A fee may be assessed if samples are retained longer than 1 month)

Return to Client Disposal by Lab Archive for _____ Months

Special Instructions/QC Requirements & Comments:

Preservation Used: 1= Ice, 2= HCI, 3= H2SO4, 4=HNO3, 5=NaOH; 6= Other.

Possible Hazard Identification: Please List any EPA Waste Codes for the sample in the

Comments Section if the lab is to dispose of the sample.

Non-Hazard Flammable Skin Irritant Poison B Unknown

Cooler Temp. (°C): Obs'd: _____ Therm ID No.: _____

Company: WLL Received by: RL Date/Time: 9-22-23 11:10

Company: ETA Received by: ETA Date/Time: 9/22/23 11:00

Company: _____ Received by: _____ Date/Time: _____

Company: _____ Received by: _____ Date/Time: _____

Company: _____ Received by: _____ Date/Time: _____

Company: _____ Received by: _____ Date/Time: _____

Company: _____ Received by: _____ Date/Time: _____

Company: _____ Received by: _____ Date/Time: _____

Company: _____ Received by: _____ Date/Time: _____

Company: _____ Received by: _____ Date/Time: _____

Company: _____ Received by: _____ Date/Time: _____

Company: _____ Received by: _____ Date/Time: _____

Company: _____ Received by: _____ Date/Time: _____

ETA 9/22/23 11:00

9/22/2023

9/22/2023

9/22/2023

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9/22/2023

9/22/2023

Eurofins TestAmerica Edison
Receipt Temperature and pH Log

Job Number: 289191

IR Gun # 2

Number of Coolers: 2

Cooler Temperatures

MAY BE CONNECTED		MAY BE CONNECTED		MAY BE CONNECTED	
Cooler #1	Cooler #2	Cooler #3	Cooler #4	Cooler #5	Cooler #6
<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>
<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>
<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>	<u>0.0</u>

TALS Sample Number	Ammonia (pH<2)	Nitrate Nitrite (pH<2)	Metals (pH<2)	Hardness (pH<2)	Pest (pH 5-9)	EPH or QAM (pH<2)	Phenols Sulfide (pH<2)	TKN (pH<2)	TOC (pH<2)	Total Cyanide (pH>12)	Total Phos (pH<2)	Other
<u>1</u>			<u>22</u>									
<u>2</u>			<u>22</u>									
<u>3</u>			<u>22</u>									
<u>4</u>			<u>22</u>									
<u>5</u>			<u>22</u>									

If pH adjustments are required record the information below:

Sample No(s) adjusted: _____

Preservative Name/Conc.: _____

Volume of Preservative used (ml): _____

Lot # of Preservative(s): _____

Expiration Date: _____

The appropriate Project Manager and Department Manager should be notified about the samples which were pH adjusted.

Samples for Metal analysis which are out of compliance must be acidified at least 24 hours prior to analysis.

Initials: AL

Date: 9/22/23



W.A.T.E.R. WORKS LABORATORY, INC.

CHAIN OF CUSTODY FORM

360 GLENWOOD AVE. EAST ORANGE, NJ 07017
Phone: 973 678-3787 Fax: 973 678-6779
NJDEP Certification # 07673

CLIENT ADDRESS:

Comm. U.T. School in Nutley
100 Vincent Pl
Nutley NJ

SITE ADDRESS:

Same

CLIENT Field ID #	DATE COLL.	TIME COLL.	G R A D E	M A T R I X see note	# OF CONTAINERS										Field Measurements	ANALYSIS REQUESTED	LAB USE WWL Sample #
					T	U	B	H	N	A	S	H	O	O			
A2A	9/21/03	700	4	DW	1	1	1	1	1	1	1	1	1	1	1	1	309568
A8		705	4		1	1	1	1	1	1	1	1	1	1	1	1	309569
A9		710	4		1	1	1	1	1	1	1	1	1	1	1	1	309570
Boys Room		715	4		1	1	1	1	1	1	1	1	1	1	1	1	309571
Girls Room		720	4		1	1	1	1	1	1	1	1	1	1	1	1	309572

WWL ID #	Pd CC
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REPORT FORMAT STANDARD NJ REDUCED FULL EDD

SAMPLES REC'D IN GOOD COND: YES NO

COOLER TEMP @ LAB 4.0 °C

SAMPLED BY NAME/COMPANY: DATE: TIME: FIELD PARAM ANALYZED BY SIGNATURE: DATE: TIME:

RELINQUISHED BY: RECEIVED BY:

RELINQD AT LAB BY: *Joan Skarupski* 9/21/03 135 RECEIVED BY: *Joan Skarupski* 9/21/03 135

RUSH TURNAROUND-TIMES MUST BE APPROVED BY LAB

Result turnaround time: Standard or RUSH

PRIOR TO SAMPLE ARRIVAL, RUSH SURCHARGES WILL APPLY. If RUSH Enter NEED BY DATE: / /

REMARKS: JOAN SKARUPSKI e Verizon net

LAB USE ONLY			
Preservatives:	# of Cont.	Bott Type	Analysis Req
HNO3	5	250 ml	metals
HCL			
HCL Vials			
H2SO4			
NaOH			
Sterile/Na2S2O3			