

August 18, 2017

Mr. Rafael Torres
PARS Environmental
500 Horizon Drive
Trenton, NJ 08691

Certificate of Analysis

| | | | |
|-----------------|---|---------------|-------------------------------------|
| Project Name: | School Drinking Water Lead Testing | Workorder: | 2254154 |
| Purchase Order: | | Workorder ID: | TES-Triangle Elem Schl-Remed |

Dear Mr. Torres:

Enclosed are the analytical results for samples received by the laboratory on Monday, August 14, 2017.

The ALS Environmental laboratory in Middletown, Pennsylvania is a National Environmental Laboratory Accreditation Program (NELAP) accredited laboratory and as such, certifies that all applicable test results meet the requirements of NELAP.

If you have any questions regarding this certificate of analysis, please contact Mrs. Vicki A. Forney (Project Coordinator) at (717) 944-5541.

Analyses were performed according to our laboratory's NELAP-approved quality assurance program and any applicable state requirements. The test results meet requirements of the current NELAP standards or state requirements, where applicable. For a specific list of accredited analytes, refer to the certifications section of the ALS website at www.alsglobal.com/en/Our-Services/Life-Sciences/Environmental/Downloads.

This laboratory report may not be reproduced, except in full, without the written approval of ALS Environmental.

ALS Spring City: 10 Riverside Drive, Spring City, PA 19475 610-948-4903

This page is included as part of the Analytical Report and must be retained as a permanent record thereof.

Mrs. Vicki A. Forney
Project Coordinator

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SAMPLE SUMMARY

Workorder: 2254154 TES-Triangle Elem Schl-Remed

| Lab ID | Sample ID | Matrix | Date Collected | Date Received | Collected By |
|------------|---------------|----------------|-----------------|-----------------|---------------------|
| 2254154001 | Field Blank | Drinking Water | 8/13/2017 00:00 | 8/14/2017 18:45 | Collected by Client |
| 2254154002 | TES-1-MO-TF-R | Drinking Water | 8/13/2017 07:51 | 8/14/2017 18:45 | Collected by Client |

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SAMPLE SUMMARY

Workorder: 2254154 TES-Triangle Elem Schl-Remed

Notes

- Samples collected by ALS personnel are done so in accordance with the procedures set forth in the ALS Field Sampling Plan (20 - Field Services Sampling Plan).
- All Waste Water analyses comply with methodology requirements of 40 CFR Part 136.
- All Drinking Water analyses comply with methodology requirements of 40 CFR Part 141.
- Unless otherwise noted, all quantitative results for soils are reported on a dry weight basis.
- The Chain of Custody document is included as part of this report.
- All Library Search analytes should be regarded as tentative identifications based on the presumptive evidence of the mass spectra. Concentrations reported are estimated values.
- Parameters identified as "analyze immediately" require analysis within 15 minutes of collection. Any "analyze immediately" parameters not listed under the header "Field Parameters" are performed in the laboratory and are therefore analyzed out of hold time.
- Method references listed on this report beginning with the prefix "S" followed by a method number (such as S2310B-97) refer to methods from "Standard Methods for the Examination of Water and Wastewater".
- For microbiological analyses, the "Prepared" value is the date/time into the incubator and the "Analyzed" value is the date/time out the incubator.

Standard Acronyms/Flags

| | |
|--------|--|
| J | Indicates an estimated value between the Method Detection Limit (MDL) and the Practical Quantitation Limit (PQL) for the analyte |
| U | Indicates that the analyte was Not Detected (ND) |
| N | Indicates presumptive evidence of the presence of a compound |
| MDL | Method Detection Limit |
| PQL | Practical Quantitation Limit |
| RDL | Reporting Detection Limit |
| ND | Not Detected - indicates that the analyte was Not Detected at the RDL |
| Cntr | Analysis was performed using this container |
| RegLmt | Regulatory Limit |
| LCS | Laboratory Control Sample |
| MS | Matrix Spike |
| MSD | Matrix Spike Duplicate |
| DUP | Sample Duplicate |
| %Rec | Percent Recovery |
| RPD | Relative Percent Difference |
| LOD | DoD Limit of Detection |
| LOQ | DoD Limit of Quantitation |
| DL | DoD Detection Limit |
| I | Indicates reported value is greater than or equal to the Method Detection Limit (MDL) but less than the Report Detection Limit (RDL) |
| (S) | Surrogate Compound |
| NC | Not Calculated |
| * | Result outside of QC limits |

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ANALYTICAL RESULTS

Workorder: 2254154 TES-Triangle Elem Schl-Remed

Lab ID: **2254154001** Date Collected: 8/13/2017 00:00 Matrix: Drinking Water
 Sample ID: **Field Blank** Date Received: 8/14/2017 18:45

| Parameters | Results | Flag | Units | RDL | Method | Prepared By | Analyzed By | Cntr |
|---------------|---------|------|-------|-----|-----------|------------------|------------------|------|
| METALS | | | | | | | | |
| Lead, Total | ND | | ug/L | 2.0 | EPA 200.8 | 8/17/17 14:19 MO | 8/17/17 15:14 MO | A1 |

Vicki Forney
 Mrs. Vicki A. Forney
 Project Coordinator

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ANALYTICAL RESULTS

Workorder: 2254154 TES-Triangle Elem Schl-Remed

Lab ID: **2254154002** Date Collected: 8/13/2017 07:51 Matrix: Drinking Water
 Sample ID: **TES-1-MO-TF-R** Date Received: 8/14/2017 18:45

| Parameters | Results | Flag | Units | RDL | Method | Prepared By | Analyzed By | Cntr |
|---------------|---------|------|-------|-----|-----------|------------------|------------------|------|
| METALS | | | | | | | | |
| Lead, Total | 17.7 | | ug/L | 2.0 | EPA 200.8 | 8/17/17 14:19 MO | 8/17/17 15:16 MO | A1 |



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34 Dogwood Lane
Middletown, PA 17057
P. 717-944-5541
F. 717-944-1430

**CHAIN OF CUSTODY/
REQUEST FOR ANALYSIS**
ALL SHADED AREAS MUST BE COMPLETED BY THE CLIENT/
SAMPLER. INSTRUCTIONS ON THE BACK.

COC #: _____
ALS QU _____



Receipt Information (complete by Lab)

Container Type: BP
Container Size: 250mL
Preservative: HNO3

Cooler Temp: 92 Therm ID: 309 Initial: [Handwritten]

No. of Coolers: Y N

Custody Seals Present? (if present) Seals Intact? [Handwritten]

Received on Ice? [Handwritten]

COC Labels Complete/Accurate? [Handwritten]

Cont. in Good Cond.? [Handwritten]

Correct Containers? [Handwritten]

Correct Sample Volumes? [Handwritten]

Correct Preservation? [Handwritten]

Headspace/Volatiles? [Handwritten]

Courier/Tracking #: _____ Sample/COC Comments: _____

ANALYSES/METHOD REQUESTED

| Container Type | BP | Matrix | Enter Number of Containers Per Sample or Field Results Below. |
|----------------|----|------------------|---|
| 250mL | | EPA 200.8 (Lead) | |
| HNO3 | | DW All | |

Client Name: PARS Environmental
Address: 500 Horizon Drive, Suite 540
Contact: Firoz Jan
Phone#: 609-890-7277
Project Name#: TES- Triangle Elementary School Remediation
Bill To: Firoz Jan, PARS Environmental

TAT Normal-Standard TAT is 10-12 business days.
 Rush-Subject to ALS approval and surcharges.
Date Required: 8/17/17-72 hrs Approved By: F.J
Email? Y Fjan@parsenviro.com, and
Fax? Y No: rtorres@parsenviro.com

Sample Description/Location (as it will appear on the lab report) Sample Date Time

| Project Comments: | LOGGED BY (signature): | | REVIEWED BY (signature): | | Date | Time | Received By / Company Name |
|---------------------|------------------------|---------|--------------------------|---------|-------|-------------|----------------------------|
| | Date | Time | Date | Time | | | |
| 1 Trip to PARS Env. | [Signature] | 8/14/17 | [Signature] | 8/14/17 | 15:30 | [Signature] | |
| 3 Trip to PARS Env. | [Signature] | 8/14 | [Signature] | 8/14 | 15:15 | [Signature] | |
| 5 Trip to PARS Env. | [Signature] | 8-14 | [Signature] | 8-14 | 19:45 | [Signature] | |
| 7 Trip to PARS Env. | [Signature] | | [Signature] | | 18:45 | [Signature] | |
| 9 Trip to PARS Env. | [Signature] | | [Signature] | | 10 | [Signature] | |

ALS Field Services: Pickup Labor
 Composite Sampling Rental Equipment
 Other: _____

Special Processing: USACE Navy
State Samples Collected In: NY NJ PA NC

Sample Disposal: Lab Special

Reportable to PADEP? Yes
PWSID # _____
EDDS: Formal Type: _____





Facility Name:

TRIANGLE ES

Date:

8/13/17

| Sample # | Sample ID | Sample Time | Comments |
|----------|---------------|-------------|----------|
| 1 | Field Blank | 7:51 | |
| | TES-1-MO-TF-R | | |
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Signature of Sampler:

Greg Lee

Sample ID Guide:

Bldg ID - Flr - Rm - Direction - Type (- Faucet #)

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