



Environmental and Laboratory Services
 90 ½ West Blackwell Street, Dover, New Jersey 07801
 (973) 989-0010 P, (973) 989-0156 F

Analytical Results

Report Issued: October 20, 2016
 Client: Montclair Water Bureau
 Address: 54 Watchung Ave.
 Montclair, NJ 07043
 PWSID#: NJ0713001

Project: Glen Ridge HS

Sample description: Drinking Water / 1st Draw / DWSC2220-1
 Sample location: 1st Floor by Main Office
 Sampled by: Client
 Sample date: 10/06/16
 Time: 05:08
 Analyst: B. Moraga

Parameter	Method	Sample Result	NJDEP Limit	Date Analyzed	Time Analyzed	Reporting Limit
Lead	SM3113B	<2 ug/L	15 ug/L	10/13/16	18:24	2 ug/L
Copper	SM3111B	0.130 mg/L	1.3 mg/L	10/11/16	12:21	0.05 mg/L

Sample description: Drinking Water / 1st Draw / DWSC2220-2
 Sample location: Hallway by Main Gym
 Sampled by: Client
 Sample date: 10/06/16
 Time: 05:55
 Analyst: B. Moraga

Parameter	Method	Sample Result	NJDEP Limit	Date Analyzed	Time Analyzed	Reporting Limit
Lead	SM3113B	<2 ug/L	15 ug/L	10/13/16	18:29	2 ug/L
Copper	SM3111B	0.186 mg/L	1.3 mg/L	10/11/16	12:21	0.05 mg/L

Sample description: Drinking Water / 1st Draw / DWSC2220-3
 Sample location: 1st Floor Cafeteria
 Sampled by: Client
 Sample date: 10/06/16
 Time: 05:05
 Analyst: B. Moraga

Parameter	Method	Sample Result	NJDEP Limit	Date Analyzed	Time Analyzed	Reporting Limit
Lead	SM3113B	<2 ug/L	15 ug/L	10/13/16	18:35	2 ug/L
Copper	SM3111B	0.118 mg/L	1.3 mg/L	10/11/16	12:22	0.05 mg/L

ug/L = micrograms per liter
 mg/L = milligrams per liter

All testing was done within the required holding time.

I certify that these samples were analyzed in accordance with procedures approved by the New Jersey Department of Environmental Protection.

Laurette Young (for SV)
Susan VanVeen, Laboratory Manager
NJ Laboratory Certification ID # 14013

October 20, 2016
Date

CHAIN OF CUSTODY / SAMPLE ANALYSIS REQUEST

Customer Name: <u>MONTECLAIR WATER</u>	report to:	Agra Environmental Services
Address: <u>54 WASHINGTON AVE</u>		90½ West Blackwell Street
County/Municipality: <u>MONTECLAIR NJ</u>		Dover, NJ 07801
Phone: <u>973-744-4600</u>		Phone: (973) 989-0010
Work:		Fax: (973) 989-0156



Matrix Abbreviations: D - Drinking Water G- Groundwater W- Wastewater S- Soil SL- Sludge P-Pool L-Lake Page 1 of 1

Project: <u>GRHS</u>	Collection	PWSID# NJ					for laboratory use only	Field Analysis	
Field ID	Lab ID:	Date	Time	Grab	Comp	Matrix	# of Bottles	Preservative	ANALYSIS REQUESTED
<u>DWSC2220</u>									
<u>1st fl by MAIN OFFICE</u>		<u>10/6/16</u>	<u>508</u>	<u>X</u>		<u>D</u>	<u>1</u>		<u>Cu Pb</u>
<u>HALLWAY BY MAIN GYM</u>		<u>7</u>	<u>555</u>	<u>X</u>		<u>D</u>			<u>+</u>
<u>1st fl CLARETIA</u>		<u>7</u>	<u>505</u>						<u>+</u>

Sampled By (name/company): <u>Tony Pereira</u>	State Forms Needed (circle one): Yes or <u>No</u>	indicate laboratory location where analysis requested was performed
	NJDEP Laboratory Certification (Dover, NJ) #14013	
	NJDEP Laboratory Certification (Marlboro, NJ) #13033	
Reporting Requirements (Check Box):	Standard <input type="checkbox"/>	NJ Reduced <input type="checkbox"/>
		Other (Specify) <input type="checkbox"/>
		Cooler Temperature Upon Receipt at lab: _____

Sample Custody Exchanges (Please use full legal signature)						Scanned _____
Relinquished By: <u>Tony Pereira</u>	Date: <u>10/6/16</u>	Time: <u>8:38</u>	Received By: <u>D. Miller</u>	Date: <u>10/6/16</u>	Time: <u>1839</u>	
Relinquished By:	Date:	Time:	Received By:	Date:	Time:	
Relinquished By:	Date:	Time:	Received By:	Date:	Time:	Date Faxed _____
Relinquished By:	Date:	Time:	Received By:	Date:	Time:	Invoice Number _____
Relinquished By:	Date:	Time:	Received By:	Date:	Time:	Is sample known to be hazardous? (circle one) Yes or No