



Environmental and Laboratory Services

90 1/2 West Blackwell St., Dover, New Jersey 07801

(973) 989-0010 P; (973) 989-0156 F

Analytical Results

Date: August 29, 2017

Client: Rockaway Valley School
Address: 11 Valley Road
Boonton, NJ 07005

Sample description: Drinking Water / 1st Draw / DWS6240-1
Sample location: Room 06 Kitchen
Sampled by: D. Pineda
Sample date: 08/18/17
Time: 08:17
Analyst: B. Moraga

Parameter	Method	Sample Result	NJDEP Limit	Date Analyzed	Time Analyzed	Dilution Factor	Reporting Limit
Lead	SM3113B	<2.00 µg/L	15 µg/L	08/21/17	19:04	1	2.00 µg/L

Sample description: Drinking Water / 1st Draw / DWS6240-2
Sample location: Room 02
Sampled by: D. Pineda
Sample date: 08/18/17
Time: 08:25
Analyst: B. Moraga

Parameter	Method	Sample Result	NJDEP Limit	Date Analyzed	Time Analyzed	Dilution Factor	Reporting Limit
Lead	SM3113B	6.17 µg/L	15 µg/L	08/21/17	19:11	1	2.00 µg/L

Sample description: Drinking Water / 1st Draw / DWS6240-3
Sample location: Field Blank
Sampled by: D. Pineda
Sample date: 08/18/17
Time: 08:16
Analyst: B. Moraga

Parameter	Method	Sample Result	NJDEP Limit	Date Analyzed	Time Analyzed	Dilution Factor	Reporting Limit
Lead	SM3113B	<2.00 µg/L	15 µg/L	08/21/17	19:17	1	2.00 µg/L

µg/L = micrograms 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.

Susan Van Veen (For SV)
Susan Van Veen, Lab Manager
NJ Laboratory Certification ID # 14013

August 29, 2017
Date

CHAIN OF CUSTODY / SAMPLE ANALYSIS REQUEST

Asc./HCl Vials p
HCl Vials pH
Na₂SO₄ Cl₂
HNO₃ 25.0 pH
H₂SO₄ mL pH
NaOH
unpreserved
other
other

Customer Name: Rockaway Valley School - Boonton Twp
Address: 11 Valley Road
Boonton, NJ 07005
County/Municipality: Boonton Twp, Morris City
Phone: (973) 334-4162 x 325 : Dave Blake
Work Fax: (973) 334-0035

Report To: John Murray
jurray@rvsnj.org

Agra Environmental Services
90 1/2 West Blackwell Street
Dover, NJ 07801
Phone: (973) 989-0010
Fax: (973) 989-0156

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

Project: UNSCAHO **PWSID#:** NJ 1401300 **for laboratory use only**

Field ID	Lab ID	Date	Time	Grab	Comp	Matrix	# of Bottles	Preservative	ANALYSIS REQUESTED
Field-Blank	8-18-17	08:17	D	X	1	HNO3	Pb 1st draw	2.461L	8/21/19 1904
Field-Blank	8-18-17	08:25	D	X	1	HNO3	Pb 1st draw	6.174L	1 1911
Field-Blank	8-18-17	08:16	D	X	1	HNO3	Pb 1st draw	Pb in excess < 2.461L	8/21/19 1919 34
			D	X	1	HNO3	Pb 1st draw		
			D	X	1	HNO3	Pb 1st draw		
			D	X	1	HNO3	Pb 1st draw		
			D	X	1	HNO3	Pb 1st draw		
			D	X	1	HNO3	Pb 1st draw		
			D	X	1	HNO3	Pb 1st draw		
			D	X	1	HNO3	Pb 1st draw		
			D	X	1	HNO3	Pb 1st draw		
			D	X	1	HNO3	Pb 1st draw		

Sampled By (name/company): Daniel Funder/Agra

State Forms Needed (circle one): Yes or No

NJDEP Laboratory Certification (Dover, NJ) #14013

NJDEP Laboratory Certification (Marlboro, NJ) #13033

indicate laboratory location where analysis requested was performed

Cooler Temperature Upon Receipt at lab: 14.5°C

Reporting Requirements (Check Box):

Standard

NJ Reduced

Other (Specify)

Sample Custody Exchanges (Please use full legal signature)

Relinquished By: [Signature] Date: 8-18-17 Time: 12:23 Received By: [Signature] Date: 8/18/17 Time: 12:43

Relinquished By: [Signature] Date: _____ Time: _____ Received By: _____ Date: _____ Time: _____

Relinquished By: _____ Date: _____ Time: _____ Received By: _____ Date: _____ Time: _____

Relinquished By: _____ Date: _____ Time: _____ Received By: _____ Date: _____ Time: _____

Scanned: _____

Date Faxed: _____ Invoice Number: _____

Is sample known to be hazardous? (circle one) NO