

April 19, 2024

Maureen Doherty
NB-Orange-Ulster BOCES
53 Gibson Road
Goshen, NY 10924

Project Location: Valley Central-ALS Maybrook
Project Number: Valley Central-ALS Maybrook
Laboratory Work Order Number: 24D1861
PWSID# NY3515618

Enclosed are results of analyses for samples received by the laboratory on April 16, 2024. If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Project Manager



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

NB-Orange-Ulster BOCES
53 Gibson Road
Goshen, NY 10924
ATTN: Maureen Doherty

REPORT DATE: 4/19/2024

PURCHASE ORDER NUMBER: A24-00300

PROJECT NUMBER: Valley Central-ALS Maybrook

ANALYTICAL SUMMARY

WORK ORDER NUMBER: 24D1861

The results of analyses performed on the following samples submitted to Pace Analytical Services, LLC - Newburgh are found in this report.

PROJECT LOCATION: Valley Central-ALS Maybrook

FIELD SAMPLE #	LAB ID:	MATRIX	SAMPLE DESCRIPTION	TEST	SUB LAB
Nurse Office Sink 9	24D1861-01	Drinking Water		EPA 200.8 Rev 5.4	
Main Office Sink 22	24D1861-02	Drinking Water		EPA 200.8 Rev 5.4	
Faculty Room Sink	24D1861-03	Drinking Water		EPA 200.8 Rev 5.4	
CUDF by 14	24D1861-04	Drinking Water		EPA 200.8 Rev 5.4	
Kitchen left Sink	24D1861-05	Drinking Water		EPA 200.8 Rev 5.4	
Kitchen Right Sink	24D1861-06	Drinking Water		EPA 200.8 Rev 5.4	
CURF by 23	24D1861-07	Drinking Water		EPA 200.8 Rev 5.4	
CUDF by 33	24D1861-08	Drinking Water		EPA 200.8 Rev 5.4	
DF by 3rd Floor 36	24D1861-09	Drinking Water		EPA 200.8 Rev 5.4	
NDF by Entrance Office	24D1861-10	Drinking Water		EPA 200.8 Rev 5.4	
CUBF by Office Entrance	24D1861-11	Drinking Water		EPA 200.8 Rev 5.4	
CYDF by 24	24D1861-12	Drinking Water		EPA 200.8 Rev 5.4	
CUBF by 24	24D1861-13	Drinking Water		EPA 200.8 Rev 5.4	
CS 11	24D1861-14	Drinking Water		EPA 200.8 Rev 5.4	
CUBF by 14	24D1861-15	Drinking Water		EPA 200.8 Rev 5.4	
DF by Nurse Office	24D1861-16	Drinking Water		EPA 200.8 Rev 5.4	

CASE NARRATIVE SUMMARY

All reported results are within defined laboratory quality control objectives unless listed below or otherwise qualified in this report.

The results of analyses reported only relate to samples submitted to the Pace Analytical Services, LLC - Newburgh for testing.
I certify that the analyses listed above, unless specifically listed as subcontracted, if any, were performed under my direction according to the approved methodologies listed in this document, and that based upon my inquiry of those individuals immediately responsible for obtaining the information, the material contained in this report is, to the best of my knowledge and belief, accurate and complete.



Felicia Morgan-Nichols
Project Manager



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location: Valley Central-ALS Maybrook

Sample Description:

Work Order: 24D1861

Date Received: 4/16/2024

Field Sample #: Nurse Office Sink 9

Sampled: 4/16/2024 06:40

Sample ID: 24D1861-01

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	MCL/SMCL		Units	Dilution	Flag/Qual	Method	Date	Date/Time	Analyst
		RL						Prepared	Analyzed	
Lead	ND	1.0	15	µg/L	1		EPA 200.8 Rev 5.4	4/17/24	4/18/24 13:13	JC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location: Valley Central-ALS Maybrook

Sample Description:

Work Order: 24D1861

Date Received: 4/16/2024

Field Sample #: Main Office Sink 22

Sampled: 4/16/2024 06:30

Sample ID: 24D1861-02

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	MCL/SMCL		Units	Dilution	Flag/Qual	Method	Date	Date/Time	Analyst
		RL						Prepared	Analyzed	
Lead	1.6	1.0	15	µg/L	1		EPA 200.8 Rev 5.4	4/17/24	4/18/24 13:15	JC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location: Valley Central-ALS Maybrook

Sample Description:

Work Order: 24D1861

Date Received: 4/16/2024

Field Sample #: Faculty Room Sink

Sampled: 4/16/2024 06:42

Sample ID: 24D1861-03

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	MCL/SMCL		Units	Dilution	Flag/Qual	Method	Date	Date/Time	Analyst
		RL						Prepared	Analyzed	
Lead	ND	1.0	15	µg/L	1		EPA 200.8 Rev 5.4	4/17/24	4/18/24 13:17	JC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location: Valley Central-ALS Maybrook

Sample Description:

Work Order: 24D1861

Date Received: 4/16/2024

Field Sample #: CUDF by 14

Sampled: 4/16/2024 06:40

Sample ID: 24D1861-04

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	MCL/SMCL		Units	Dilution	Flag/Qual	Method	Date	Date/Time	Analyst
		RL						Prepared	Analyzed	
Lead	ND	1.0	15	µg/L	1		EPA 200.8 Rev 5.4	4/17/24	4/18/24 13:19	JC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location: Valley Central-ALS Maybrook

Sample Description:

Work Order: 24D1861

Date Received: 4/16/2024

Field Sample #: Kitchen left Sink

Sampled: 4/16/2024 06:43

Sample ID: 24D1861-05

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	MCL/SMCL		Units	Dilution	Flag/Qual	Method	Date	Date/Time	Analyst
		RL						Prepared	Analyzed	
Lead	1.8	1.0	15	µg/L	1		EPA 200.8 Rev 5.4	4/17/24	4/18/24 13:21	JC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location: Valley Central-ALS Maybrook

Sample Description:

Work Order: 24D1861

Date Received: 4/16/2024

Field Sample #: Kitchen Right Sink

Sampled: 4/16/2024 06:44

Sample ID: 24D1861-06

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	MCL/SMCL		Units	Dilution	Flag/Qual	Method	Date	Date/Time	Analyst
		RL						Prepared	Analyzed	
Lead	ND	1.0	15	µg/L	1		EPA 200.8 Rev 5.4	4/17/24	4/18/24 13:23	JC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location: Valley Central-ALS Maybrook

Sample Description:

Work Order: 24D1861

Date Received: 4/16/2024

Field Sample #: CURF by 23

Sampled: 4/16/2024 06:40

Sample ID: 24D1861-07

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	MCL/SMCL		Units	Dilution	Flag/Qual	Method	Date	Date/Time	Analyst
		RL						Prepared	Analyzed	
Lead	ND	1.0	15	µg/L	1		EPA 200.8 Rev 5.4	4/17/24	4/18/24 13:25	JC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location: Valley Central-ALS Maybrook

Sample Description:

Work Order: 24D1861

Date Received: 4/16/2024

Field Sample #: CUDF by 33

Sampled: 4/16/2024 06:41

Sample ID: 24D1861-08

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	MCL/SMCL		Units	Dilution	Flag/Qual	Method	Date	Date/Time	Analyst
		RL						Prepared	Analyzed	
Lead	ND	1.0	15	µg/L	1		EPA 200.8 Rev 5.4	4/17/24	4/18/24 13:31	JC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location: Valley Central-ALS Maybrook

Sample Description:

Work Order: 24D1861

Date Received: 4/16/2024

Field Sample #: DF by 3rd Floor 36

Sampled: 4/16/2024 06:34

Sample ID: 24D1861-09

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	MCL/SMCL		Units	Dilution	Flag/Qual	Method	Date	Date/Time	Analyst
		RL						Prepared	Analyzed	
Lead	ND	1.0	15	µg/L	1		EPA 200.8 Rev 5.4	4/17/24	4/18/24 13:35	JC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location: Valley Central-ALS Maybrook

Sample Description:

Work Order: 24D1861

Date Received: 4/16/2024

Field Sample #: NDF by Entrance Office

Sampled: 4/16/2024 06:32

Sample ID: 24D1861-10

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	MCL/SMCL		Units	Dilution	Flag/Qual	Method	Date	Date/Time	Analyst
		RL						Prepared	Analyzed	
Lead	ND	1.0	15	µg/L	1		EPA 200.8 Rev 5.4	4/17/24	4/18/24 13:37	JC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location: Valley Central-ALS Maybrook

Sample Description:

Work Order: 24D1861

Date Received: 4/16/2024

Field Sample #: CUBF by Office Entrance

Sampled: 4/16/2024 06:31

Sample ID: 24D1861-11

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	RL	MCL/SMCL		Units	Dilution	Flag/Qual	Method	Date	Date/Time	Analyst
									Prepared	Analyzed	
Lead	ND	1.0	15		µg/L	1		EPA 200.8 Rev 5.4	4/17/24	4/18/24 13:38	JC



Project Location: Valley Central-ALS Maybrook

Sample Description:

Work Order: 24D1861

Date Received: 4/16/2024

Field Sample #: CYDF by 24

Sampled: 4/16/2024 06:34

Sample ID: 24D1861-12

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	MCL/SMCL		Units	Dilution	Flag/Qual	Method	Date	Date/Time	Analyst
		RL						Prepared	Analyzed	
Lead	ND	1.0	15	µg/L	1		EPA 200.8 Rev 5.4	4/17/24	4/18/24 13:40	JC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location: Valley Central-ALS Maybrook

Sample Description:

Work Order: 24D1861

Date Received: 4/16/2024

Field Sample #: CUBF by 24

Sampled: 4/16/2024 06:33

Sample ID: 24D1861-13

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	MCL/SMCL		Units	Dilution	Flag/Qual	Method	Date	Date/Time	Analyst
		RL						Prepared	Analyzed	
Lead	ND	1.0	15	µg/L	1		EPA 200.8 Rev 5.4	4/17/24	4/18/24 13:42	JC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location: Valley Central-ALS Maybrook

Sample Description:

Work Order: 24D1861

Date Received: 4/16/2024

Field Sample #: CS 11

Sampled: 4/16/2024 06:43

Sample ID: 24D1861-14

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	RL	MCL/SMCL		Units	Dilution	Flag/Qual	Method	Date	Date/Time	Analyst
									Prepared	Analyzed	
Lead	ND	1.0	15		µg/L	1		EPA 200.8 Rev 5.4	4/17/24	4/18/24 13:44	JC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location: Valley Central-ALS Maybrook

Sample Description:

Work Order: 24D1861

Date Received: 4/16/2024

Field Sample #: CUBF by 14

Sampled: 4/16/2024 06:38

Sample ID: 24D1861-15

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	MCL/SMCL		Units	Dilution	Flag/Qual	Method	Date	Date/Time	Analyst
		RL						Prepared	Analyzed	
Lead	ND	1.0	15	µg/L	1		EPA 200.8 Rev 5.4	4/17/24	4/18/24 13:46	JC



315 Fullerton Avenue * Newburgh, NY 12550 * TEL. (845) 562-0890

Project Location: Valley Central-ALS Maybrook

Sample Description:

Work Order: 24D1861

Date Received: 4/16/2024

Field Sample #: DF by Nurse Office

Sampled: 4/16/2024 06:42

Sample ID: 24D1861-16

Sample Matrix: Drinking Water

Metals Analyses (Total)

Analyte	Results	MCL/SMCL		Units	Dilution	Flag/Qual	Method	Date	Date/Time	Analyst
		RL						Prepared	Analyzed	
Lead	ND	1.0	15	µg/L	1		EPA 200.8 Rev 5.4	4/17/24	4/18/24 13:48	JC

FLAG/QUALIFIER SUMMARY

*	QC result is outside of established limits.
†	Wide recovery limits established for difficult compound.
‡	Wide RPD limits established for difficult compound.
#	Data exceeded client recommended or regulatory level
ND	Not Detected
RL	Reporting Limit is at the level of quantitation (LOQ)
DL	Detection Limit is the lower limit of detection determined by the MDL study
MCL	Maximum Contaminant Level

Percent recoveries and relative percent differences (RPDs) are determined by the software using values in the calculation which have not been rounded.

No results have been blank subtracted unless specified in the case narrative section.

CERTIFICATIONS

Certified Analyses included in this Report

Analyte	Certifications
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EPA 200.8 Rev 5.4 in Drinking Water

Lead	NB-CT,NB-NJ,NB-NY
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Pace Analytical Services, LCC operates under the following certifications and accreditations:

Code	Description	Number	Expires
NB-CT	Connecticut Department of Public Health	PH-0823	09/30/2024
NB-NJ	New Jersey DEP	NY015 NELAP	06/30/2024
NB-NY	New York State Department of Health	10142 NELAP	03/31/2025

Pace Location Requested (City/State): **Orange-Ulster BOCES**
Chain-of-Custody Analytical Request Document
Chain-of-Custody is a LEGAL DOCUMENT - Complete all relevant fields

Company Name: Orange-Ulster BOCES
 Street Address: 53 Gibson Road
 Goshen, NY 10924
 Contact/Report To: Maireen Doherty
 Phone #: 945-781-4887
 E-Mail: Maireen.Doherty@oubooces.org
 CC E-Mail: Halina.Redner@oubooces.org

Project Name: **ALS Maplevale**
 Valley Central
 Site Collection Info/Facility ID (as applicable):
 Invoice to: Halina Redner
 Invoice E-mail: halina.redner@oubooces.org
 Purchase Order # (if applicable): A24-00300
 Quote #:

Time zone collected: AK PR MT CT ER
 County / State origin of sample(s): Orange County / New York
 Reportable: Yes No

Data Deliverables: Level II Level III Level IV
 Regulatory Program (PW, RCRA, etc.) as applicable: DOH
 Rush (Pre-approval required): Same Day 1 Day 2 Day 3 Day Other STD
 Date Results Requested: _____

* Metals Codes (insert in Matrix box below): Drinking Water (DW), Ground Water (GW), Wastewater (WW), Product (P), Sediment (SS), Oil (O), Vapor (V), Surface Water (SW), Sediment (SS), Sludge (S), Culk (C), Leachate (L), Bioacid (BS), Other (O)
 Matrix: DW G
 Date Results Requested: _____
 Analysis: Field Filtered (if applicable): Yes No

Customer Sample ID	Matrix *	Comp / Grab	Composite Start Date	Time	Collected or Composite End Date	Time	# Cont.	Residual Chlorine Result	Units
Muss Office Sink 9	DW	G			4/16/24	6:40	X		
Main Office Sink 22					4/16/24	6:30	X		
Faculty Room Sink					6:42		X		
CUOE by 14					6:40		X		
Kitchen Left Sink					6:43		X		
Kitchen Right Sink					6:44		X		
CURF by 23					6:40		X		
CUDE by 33					6:41		X		
DF by 3rd Floor 36					6:34		X		
CUDE by Entrance Office					6:32		X		

Additional Instructions from **Pace**:
 Collected By: **Aminda Zampini**
 Printed Name: _____
 Signature: _____

Relinquished by/Company (Signature)	Date/Time	Received by/Company (Signature)	Date/Time
<i>[Signature]</i>	4/16/24 10:24	<i>[Signature]</i>	4/16/24 10:24
<i>[Signature]</i>	4/16/24 15:30	<i>[Signature]</i>	4/16/24 15:30
<i>[Signature]</i>	4/16/24 15:30	<i>[Signature]</i>	4/16/24 15:30



LAB USE ONLY - Active Workorder Login Label Here
 Scan QR Code for Instructions
24D1861

Specify Container Size **	Identify Container Preservative Type **	Analysis Requested
3		
2		

Customer Remarks / Special Conditions / Possible Hazards:
Lead Testing



Date/Time	Correction Factor (CF)	Obs. Temp. (Cp)	Corrected Temp. (Cp)	Concentration
4/16/24 10:24				
4/16/24 15:30				
4/16/24 15:30				

Chain-of-Custody is a LEGAL DOCUMENT - Complete all relevant fields

Company Name: Orange-Ulster BOCES
 Street Address:
 53 Gibson Road
 Goshen, NY 10924

Contact/Report To: Maureen Doherty
 Phone #: 845-781-4887
 E-Mail: Maureen.Doherty@oubooces.org
 CC E-Mail: Halina.Redner@oubooces.org

Invoice to: Halina Redner
 Invoice E-mail:
 halina.redner@oubooces.org
 Purchase Order # (if applicable): A24-00300
 Quote #:

Customer Project #: **ALS Maybase**
 Project Name:
 Valley Central
 Site Collection Info/Facility ID (as applicable):

Time Zone Collected: AK PT MT CT ER
 Data Deliverables: Regulatory Program (DW, RCRA, etc.) as applicable: DOH

County / State origin of sample(s): Orange County / New York
 Reportable: Yes No

Rush (Pre-approval required):
 Level II Level III Level IV
 EGUIS
 Date Results: Same Day 1 Day 2 Day 3 Day Other: STD
 Requested: Other: _____

DW PWSID # or WW Permit # as applicable: NY3515618
 Field Filtered (if applicable): Yes No
 Analysis: _____

* Matrix Codes (insert in Matrix box below): Drinking Water (DW), Ground Water (GW), Wastewater (WW), Product (P), Solid (S), Oil (O), Wipe (W), Issue (I), Bioassay (B), Vapor (V), Surface Water (SW), Sediment (SD), Sludge (SL), Cask (CK), Leachate (L), Biosolid (BS), Other (O1)

Customer Sample ID	Matrix *	Comp / Grab	Composite Start Date	Time	Collected or Composite End Date	Time	# Cont.	Residual Chlorine Result	Units
11	CURF by Office	Entire	DWG		4/16/24	6:31			
12	CURF by 24					6:34			
13	CURF by 24					6:33			
14	CS 11					6:43			
15	CURF by 14					6:38			
16	DF by Nurse Office					6:42			


Additional Instructions from Pace®: _____

Relinquished By/Company: (Signature)	Date/Time:	Received By/Company: (Signature)	Date/Time:
<i>[Signature]</i>	4/16/24 10:24	<i>[Signature]</i>	
<i>[Signature]</i>		<i>[Signature]</i>	
<i>[Signature]</i>		<i>[Signature]</i>	
<i>[Signature]</i>		<i>[Signature]</i>	

LAB USE ONLY - Affix Workorder/Lab Label Here

24D1861

Scan QR Code for instructions



Specify Container Size:**
 (4) 125ml, (5) 100ml, (6) 60ml, (7) Encore,
 (8) Teradex, (9) 50ml, (10) Other

Identify Container Preservative Type***
 Analysis Requested

* Container Size: (1) 1L, (2) 500ml, (3) 250ml,
 (4) 125ml, (5) 100ml, (6) 60ml, (7) Encore,
 (8) Teradex, (9) 50ml, (10) Other
 *** Preservative Types: (1) None, (2) HNO3, (3) H2SO4,
 (4) HCl, (5) NaOH, (6) Zn Acetate, (7) NaHSO4, (8) sul-
 fhydric, (9) Acetic Acid, (10) MeOH, (11) Other

Customer Remarks / Special Conditions / Possible Hazards:	# Containers	Thermometer ID:	Correction Factor (CF):	Obs. Temp. (C):	Corrected Temp. (C):	Connected Temp. (C):	Lab Use Only
Lead Testing							Action/Client ID: Table #: Profile / Template: Prod. # / Bottle Ord. ID: Sample Comment: Preservation non-conformance identified for sample.

Relinquished By/Company: (Signature)	Date/Time:	Received By/Company: (Signature)	Date/Time:
<i>[Signature]</i>	4/16/24 10:24	<i>[Signature]</i>	
<i>[Signature]</i>		<i>[Signature]</i>	
<i>[Signature]</i>		<i>[Signature]</i>	

Submitting a sample via this chain of custody constitutes acknowledgment and acceptance of the Pace® Terms and Conditions found at <https://www.pacelabs.com/resource-library/resource/pace-terms-and-conditions/>

Page: 2 of 2

ENV-FRM-CORQ-0019_V02_110123 ©

Sample Condition Upon Receipt Form (SCUR)

Project # 24 D1861

Client: DuBois VC ALS Maybrook

Date and Initials of person:
 Examining contents: _____
 Label: _____
 Deliver to location: Bloomington
 pH: _____

Thermometer Used: — Date: 4/14/24 Time: 10:24 Initials: JB

State of Origin: NY

Cooler #1 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual)

Samples on ice, cooling process has begun

Courier: Fed Ex UPS USPS Client Commercial Pace

Shipping Method: First Overnight Priority Overnight Standard Overnight Ground
 Other _____

Tracking # _____

Custody Seal on Cooler/Box Present: Yes No Seals intact: Yes No Ice: Wet Blue Melted None

Packing Material: Bubble Wrap Bubble Bags None Other _____
 Samples were collected by Pace employee Yes No N/A

		Comments:
Chain of Custody Present	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Chain of Custody Filled Out	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Relinquished Signature on COC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Sampler Name and Signature on COC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Samples Arrived within Hold Time	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Rush TAT requested on COC	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Sufficient Volume	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Correct Containers Used	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Sample Labels match COC (sample IDs & date/time of collection)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
All containers needing acid/base preservation have been checked.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Preservation Information: Preservative: _____
All Containers needing preservation are found to be in compliance with EPA recommendation: Exceptions: Vials, Microbiology, O&G, Metals	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Lot #/Trace #: _____ Date: _____ Time: _____ Initials: _____
Headspace in VOA Vials? (>6mm):	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Trip Blank Present:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	

Additional Login Comments:

Client notification/ Resolution Date/Time:
 Person Contacted: _____
 Comments/Resolution: _____