

November 03, 2016

Michael Anania
NYS School for the Deaf
401 Turin St
Rome, NY 13440

RE: Project: NYSD - BLDG 15-1ST Floor
Pace Project No.: 10366456

Dear Michael Anania:

Enclosed are the analytical results for sample(s) received by the laboratory on October 14, 2016. The results relate only to the samples included in this report. Results reported herein conform to the most current, applicable TNI/NELAC standards and the laboratory's Quality Assurance Manual, where applicable, unless otherwise noted in the body of the report.

Samples, in the electronic data deliverable (EDD) that accompanied this report, were flagged yellow if they exceeded the NYSDOH 15 ppb action level.

The space designated for the sampler on the chain of custody (COC) indicates if these samples were collected by Pace Analytical or were collected by the school district and just relinquished to Pace Analytical.

If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Amanda Albrecht
amanda.albrecht@pacelabs.com
Project Manager

Enclosures



REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
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CERTIFICATIONS

Project: NYSD - BLDG 15-1ST Floor

Pace Project No.: 10366456

Minnesota Certification IDs

1700 Elm Street SE Suite 200, Minneapolis, MN 55414

Alaska Certification UST-107

525 N 8th Street, Salina, KS 67401

A2LA Certification #: 2926.01

Alaska Certification #: UST-078

Alaska Certification #MN00064

Alabama Certification #40770

Arizona Certification #: AZ-0014

Arkansas Certification #: 88-0680

California Certification #: 01155CA

Colorado Certification #Pace

Connecticut Certification #: PH-0256

EPA Region 8 Certification #: 8TMS-L

Florida/NELAP Certification #: E87605

Guam Certification #:14-008r

Georgia Certification #: 959

Georgia EPD #: Pace

Idaho Certification #: MN00064

Hawaii Certification #MN00064

Illinois Certification #: 200011

Indiana Certification#C-MN-01

Iowa Certification #: 368

Kansas Certification #: E-10167

Kentucky Dept of Envi. Protection - DW #90062

Kentucky Dept of Envi. Protection - WW #:90062

Louisiana DEQ Certification #: 3086

Louisiana DHH #: LA140001

Maine Certification #: 2013011

Maryland Certification #: 322

Michigan DEPH Certification #: 9909

Minnesota Certification #: 027-053-137

Mississippi Certification #: Pace

Montana Certification #: MT0092

Nevada Certification #: MN_00064

Nebraska Certification #: Pace

New Jersey Certification #: MN-002

New York Certification #: 11647

North Carolina Certification #: 530

North Carolina State Public Health #: 27700

North Dakota Certification #: R-036

Ohio EPA #: 4150

Ohio VAP Certification #: CL101

Oklahoma Certification #: 9507

Oregon Certification #: MN200001

Oregon Certification #: MN300001

Pennsylvania Certification #: 68-00563

Puerto Rico Certification

Saipan (CNMI) #:MP0003

South Carolina #:74003001

Texas Certification #: T104704192

Tennessee Certification #: 02818

Utah Certification #: MN000642013-4

Virginia DGS Certification #: 251

Virginia/VELAP Certification #: Pace

Washington Certification #: C486

West Virginia Certification #: 382

West Virginia DHHR #:9952C

Wisconsin Certification #: 999407970

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SAMPLE SUMMARY

Project: NYSD - BLDG 15-1ST Floor
Pace Project No.: 10366456

Lab ID	Sample ID	Matrix	Date Collected	Date Received
10366456001	Room 1-8/ Cafe Ice Machine	Water	10/08/16 02:06	10/14/16 09:45
10366456002	Room 1-8/ Cafe Sprayer	Water	10/08/16 02:07	10/14/16 09:45
10366456003	Room 1-8/ Cafe Sink	Water	10/08/16 02:09	10/14/16 09:45
10366456004	Room 1-6/ Fountain	Water	10/08/16 02:10	10/14/16 09:45
10366456005	Room 1-4/ Left Sink	Water	10/08/16 02:11	10/14/16 09:45
10366456006	Room 1-4/ Right Sink	Water	10/08/16 02:12	10/14/16 09:45
10366456007	Room 1-9/ Left Sink	Water	10/08/16 02:14	10/14/16 09:45
10366456008	Room 1-9/ Right Sink	Water	10/08/16 02:15	10/14/16 09:45
10366456009	Room 1-7/ Fountain	Water	10/08/16 02:16	10/14/16 09:45
10366456010	Room 1-13/ Sink	Water	10/08/16 02:17	10/14/16 09:45
10366456011	Room 1-15/ Utility Sink	Water	10/08/16 02:07	10/14/16 09:45
10366456012	Room 1-30/ Sink	Water	10/08/16 02:23	10/14/16 09:45
10366456013	Room 1-22/ Sink	Water	10/08/16 02:21	10/14/16 09:45
10366456014	Room 1-22/ Fountain	Water	10/08/16 02:20	10/14/16 09:45
10366456015	Room 1-32/ Sink	Water	10/08/16 02:26	10/14/16 09:45
10366456016	Room 1-32/ Fountain	Water	10/08/16 02:26	10/14/16 09:45
10366456017	Hallway DF	Water	10/08/16 02:24	10/14/16 09:45
10366456018	Room 1-53/Bath/Left Sink	Water	10/08/16 02:29	10/14/16 09:45
10366456019	Room 1-53/Bath/Right Sink	Water	10/08/16 02:30	10/14/16 09:45
10366456020	Room 1-53/ KitchenSink	Water	10/08/16 02:27	10/14/16 09:45
10366456021	Room 1-34/ Sink	Water	10/08/16 02:31	10/14/16 09:45
10366456022	Room 1-39/Sink	Water	10/08/16 02:34	10/14/16 09:45
10366456023	Room 1-44/Sink	Water	10/08/16 02:36	10/14/16 09:45

REPORT OF LABORATORY ANALYSIS

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SAMPLE ANALYTE COUNT

Project: NYSD - BLDG 15-1ST Floor

Pace Project No.: 10366456

Lab ID	Sample ID	Method	Analysts	Analytes Reported	Laboratory
10366456001	Room 1-8/ Cafe Ice Machine	EPA 200.8	TT3	1	PASI-M
10366456002	Room 1-8/ Cafe Sprayer	EPA 200.8	TT3	1	PASI-M
10366456003	Room 1-8/ Cafe Sink	EPA 200.8	TT3	1	PASI-M
10366456004	Room 1-6/ Fountain	EPA 200.8	TT3	1	PASI-M
10366456005	Room 1-4/ Left Sink	EPA 200.8	TT3	1	PASI-M
10366456006	Room 1-4/ Right Sink	EPA 200.8	TT3	1	PASI-M
10366456007	Room 1-9/ Left Sink	EPA 200.8	TT3	1	PASI-M
10366456008	Room 1-9/ Right Sink	EPA 200.8	TT3	1	PASI-M
10366456009	Room 1-7/ Fountain	EPA 200.8	TT3	1	PASI-M
10366456010	Room 1-13/ Sink	EPA 200.8	TT3	1	PASI-M
10366456011	Room 1-15/ Utility Sink	EPA 200.8	TT3	1	PASI-M
10366456012	Room 1-30/ Sink	EPA 200.8	TT3	1	PASI-M
10366456013	Room 1-22/ Sink	EPA 200.8	TT3	1	PASI-M
10366456014	Room 1-22/ Fountain	EPA 200.8	TT3	1	PASI-M
10366456015	Room 1-32/ Sink	EPA 200.8	TT3	1	PASI-M
10366456016	Room 1-32/ Fountain	EPA 200.8	TT3	1	PASI-M
10366456017	Hallway DF	EPA 200.8	TT3	1	PASI-M
10366456018	Room 1-53/Bath/Left Sink	EPA 200.8	TT3	1	PASI-M
10366456019	Room 1-53/Bath/Right Sink	EPA 200.8	TT3	1	PASI-M
10366456020	Room 1-53/ KitchenSink	EPA 200.8	TT3	1	PASI-M
10366456021	Room 1-34/ Sink	EPA 200.8	TT3	1	PASI-M
10366456022	Room 1-39/Sink	EPA 200.8	TT3	1	PASI-M
10366456023	Room 1-44/Sink	EPA 200.8	TT3	1	PASI-M

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ANALYTICAL RESULTS

Project: NYSD - BLDG 15-1ST Floor

Pace Project No.: 10366456

Sample: Room 1-8/ Cafe Ice Machine **Lab ID: 10366456001** Collected: 10/08/16 02:06 Received: 10/14/16 09:45 Matrix: Water

Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS, DW Analytical Method: EPA 200.8								
Lead	0.41	ug/L	0.10	1		10/22/16 11:35	7439-92-1	

Sample: Room 1-8/ Cafe Sprayer **Lab ID: 10366456002** Collected: 10/08/16 02:07 Received: 10/14/16 09:45 Matrix: Water

Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS, DW Analytical Method: EPA 200.8								
Lead	6.6	ug/L	0.10	1		10/22/16 11:39	7439-92-1	

Sample: Room 1-8/ Cafe Sink **Lab ID: 10366456003** Collected: 10/08/16 02:09 Received: 10/14/16 09:45 Matrix: Water

Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS, DW Analytical Method: EPA 200.8								
Lead	3.8	ug/L	0.10	1		10/22/16 11:40	7439-92-1	

Sample: Room 1-6/ Fountain **Lab ID: 10366456004** Collected: 10/08/16 02:10 Received: 10/14/16 09:45 Matrix: Water

Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS, DW Analytical Method: EPA 200.8								
Lead	143	ug/L	0.10	1		10/22/16 11:42	7439-92-1	

Sample: Room 1-4/ Left Sink **Lab ID: 10366456005** Collected: 10/08/16 02:11 Received: 10/14/16 09:45 Matrix: Water

Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS, DW Analytical Method: EPA 200.8								
Lead	17.7	ug/L	0.10	1		10/22/16 11:43	7439-92-1	

Sample: Room 1-4/ Right Sink **Lab ID: 10366456006** Collected: 10/08/16 02:12 Received: 10/14/16 09:45 Matrix: Water

Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS, DW Analytical Method: EPA 200.8								
Lead	5.1	ug/L	0.10	1		10/22/16 11:46	7439-92-1	

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ANALYTICAL RESULTS

Project: NYSD - BLDG 15-1ST Floor

Pace Project No.: 10366456

Sample: Room 1-9/ Left Sink		Lab ID: 10366456007	Collected: 10/08/16 02:14	Received: 10/14/16 09:45	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS, DW		Analytical Method: EPA 200.8						
Lead	23.0	ug/L	0.10	1		10/22/16 11:47	7439-92-1	
Sample: Room 1-9/ Right Sink		Lab ID: 10366456008	Collected: 10/08/16 02:15	Received: 10/14/16 09:45	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS, DW		Analytical Method: EPA 200.8						
Lead	27.9	ug/L	0.10	1		10/22/16 11:49	7439-92-1	
Sample: Room 1-7/ Fountain		Lab ID: 10366456009	Collected: 10/08/16 02:16	Received: 10/14/16 09:45	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS, DW		Analytical Method: EPA 200.8						
Lead	14.4	ug/L	0.10	1		10/22/16 11:50	7439-92-1	
Sample: Room 1-13/ Sink		Lab ID: 10366456010	Collected: 10/08/16 02:17	Received: 10/14/16 09:45	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS, DW		Analytical Method: EPA 200.8						
Lead	20.7	ug/L	0.10	1		10/22/16 11:51	7439-92-1	
Sample: Room 1-15/ Utility Sink		Lab ID: 10366456011	Collected: 10/08/16 02:07	Received: 10/14/16 09:45	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS, DW		Analytical Method: EPA 200.8						
Lead	9.3	ug/L	0.10	1		10/22/16 11:52	7439-92-1	
Sample: Room 1-30/ Sink		Lab ID: 10366456012	Collected: 10/08/16 02:23	Received: 10/14/16 09:45	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS, DW		Analytical Method: EPA 200.8						
Lead	4.8	ug/L	0.10	1		10/22/16 11:55	7439-92-1	

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ANALYTICAL RESULTS

Project: NYSD - BLDG 15-1ST Floor

Pace Project No.: 10366456

Sample: Room 1-22/ Sink		Lab ID: 10366456013	Collected: 10/08/16 02:21	Received: 10/14/16 09:45	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS, DW		Analytical Method: EPA 200.8						
Lead	2.8	ug/L	0.10	1		10/22/16 11:56	7439-92-1	
Sample: Room 1-22/ Fountain		Lab ID: 10366456014	Collected: 10/08/16 02:20	Received: 10/14/16 09:45	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS, DW		Analytical Method: EPA 200.8						
Lead	3.0	ug/L	0.10	1		10/22/16 11:57	7439-92-1	
Sample: Room 1-32/ Sink		Lab ID: 10366456015	Collected: 10/08/16 02:26	Received: 10/14/16 09:45	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS, DW		Analytical Method: EPA 200.8						
Lead	3.4	ug/L	0.10	1		10/22/16 12:03	7439-92-1	
Sample: Room 1-32/ Fountain		Lab ID: 10366456016	Collected: 10/08/16 02:26	Received: 10/14/16 09:45	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS, DW		Analytical Method: EPA 200.8						
Lead	14.1	ug/L	0.10	1		10/22/16 12:04	7439-92-1	
Sample: Hallway DF		Lab ID: 10366456017	Collected: 10/08/16 02:24	Received: 10/14/16 09:45	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS, DW		Analytical Method: EPA 200.8						
Lead	50.7	ug/L	0.10	1		10/22/16 12:05	7439-92-1	
Sample: Room 1-53/Bath/Left Sink		Lab ID: 10366456018	Collected: 10/08/16 02:29	Received: 10/14/16 09:45	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS, DW		Analytical Method: EPA 200.8						
Lead	84.9	ug/L	0.10	1		10/22/16 12:06	7439-92-1	

REPORT OF LABORATORY ANALYSIS

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ANALYTICAL RESULTS

Project: NYSD - BLDG 15-1ST Floor
Pace Project No.: 10366456

Sample: Room 1-53/Bath/Right Sink		Lab ID: 10366456019	Collected: 10/08/16 02:30	Received: 10/14/16 09:45	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual

200.8 MET ICPMS, DW		Analytical Method: EPA 200.8						
Lead	83.1	ug/L	0.10	1		10/22/16 12:07	7439-92-1	

Sample: Room 1-53/ KitchenSink		Lab ID: 10366456020	Collected: 10/08/16 02:27	Received: 10/14/16 09:45	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual

200.8 MET ICPMS, DW		Analytical Method: EPA 200.8						
Lead	13.7	ug/L	0.10	1		10/22/16 12:09	7439-92-1	

Sample: Room 1-34/ Sink		Lab ID: 10366456021	Collected: 10/08/16 02:31	Received: 10/14/16 09:45	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual

200.8 MET ICPMS, DW		Analytical Method: EPA 200.8						
Lead	115	ug/L	0.10	1		10/22/16 17:41	7439-92-1	

Sample: Room 1-39/Sink		Lab ID: 10366456022	Collected: 10/08/16 02:34	Received: 10/14/16 09:45	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual

200.8 MET ICPMS, DW		Analytical Method: EPA 200.8						
Lead	30.9	ug/L	0.10	1		10/22/16 17:47	7439-92-1	

Sample: Room 1-44/Sink		Lab ID: 10366456023	Collected: 10/08/16 02:36	Received: 10/14/16 09:45	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual

200.8 MET ICPMS, DW		Analytical Method: EPA 200.8						
Lead	171	ug/L	0.10	1		10/22/16 17:48	7439-92-1	

REPORT OF LABORATORY ANALYSIS

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QUALITY CONTROL DATA

Project: NYSD - BLDG 15-1ST Floor

Pace Project No.: 10366456

QC Batch:	441881	Analysis Method:	EPA 200.8
QC Batch Method:	EPA 200.8	Analysis Description:	ICPMS Metals, Drinking Water
Associated Lab Samples:	10366456001, 10366456002, 10366456003, 10366456004, 10366456005, 10366456006, 10366456007, 10366456008, 10366456009, 10366456010, 10366456011, 10366456012, 10366456013, 10366456014, 10366456015, 10366456016, 10366456017, 10366456018, 10366456019, 10366456020		

METHOD BLANK:	2406368	Matrix:	Water
Associated Lab Samples:	10366456001, 10366456002, 10366456003, 10366456004, 10366456005, 10366456006, 10366456007, 10366456008, 10366456009, 10366456010, 10366456011, 10366456012, 10366456013, 10366456014, 10366456015, 10366456016, 10366456017, 10366456018, 10366456019, 10366456020		

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Lead	ug/L	ND	0.10	10/22/16 11:32	

LABORATORY CONTROL SAMPLE:	2406369					
Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Lead	ug/L	100	112	112	85-115	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE:	2412635		2412636									
Parameter	Units	10366456001 Result	MS Spike Conc.	MSD Spike Conc.	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Qual
Lead	ug/L	0.41	100	100	101	100	100	100	70-130	0	20	

MATRIX SPIKE SAMPLE:	2412637											
Parameter	Units	10366456011 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers					
Lead	ug/L	9.3	100	109	100	70-130						

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

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QUALITY CONTROL DATA

Project: NYSD - BLDG 15-1ST Floor

Pace Project No.: 10366456

QC Batch: 441882 Analysis Method: EPA 200.8
QC Batch Method: EPA 200.8 Analysis Description: ICPMS Metals, Drinking Water
Associated Lab Samples: 10366456021, 10366456022, 10366456023

METHOD BLANK: 2406371 Matrix: Water

Associated Lab Samples: 10366456021, 10366456022, 10366456023

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Lead	ug/L	ND	0.10	10/22/16 17:02	

LABORATORY CONTROL SAMPLE: 2406372

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Lead	ug/L	100	95.3	95	85-115	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 2412753 2412754

Parameter	Units	10366451001		MSD		MS		MSD		% Rec Limits	RPD	Max RPD	Qual
		Result	Spike Conc.	Spike Conc.	Result	Result	% Rec	% Rec					
Lead	ug/L	4.9	100	100	106	109	101	104	70-130	3	20		

MATRIX SPIKE SAMPLE: 2412755

Parameter	Units	10366451011 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Lead	ug/L	19.6	100	117	97	70-130	

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QUALIFIERS

Project: NYSD - BLDG 15-1ST Floor

Pace Project No.: 10366456

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit.

S - Surrogate

1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAC Institute.

LABORATORIES

PASI-M Pace Analytical Services - Minneapolis

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QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: NYS - BLDG 15-1ST Floor

Pace Project No.: 10366456

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
10366456001	Room 1-8/ Cafe Ice Machine	EPA 200.8	441881		
10366456002	Room 1-8/ Cafe Sprayer	EPA 200.8	441881		
10366456003	Room 1-8/ Cafe Sink	EPA 200.8	441881		
10366456004	Room 1-6/ Fountain	EPA 200.8	441881		
10366456005	Room 1-4/ Left Sink	EPA 200.8	441881		
10366456006	Room 1-4/ Right Sink	EPA 200.8	441881		
10366456007	Room 1-9/ Left Sink	EPA 200.8	441881		
10366456008	Room 1-9/ Right Sink	EPA 200.8	441881		
10366456009	Room 1-7/ Fountain	EPA 200.8	441881		
10366456010	Room 1-13/ Sink	EPA 200.8	441881		
10366456011	Room 1-15/ Utility Sink	EPA 200.8	441881		
10366456012	Room 1-30/ Sink	EPA 200.8	441881		
10366456013	Room 1-22/ Sink	EPA 200.8	441881		
10366456014	Room 1-22/ Fountain	EPA 200.8	441881		
10366456015	Room 1-32/ Sink	EPA 200.8	441881		
10366456016	Room 1-32/ Fountain	EPA 200.8	441881		
10366456017	Hallway DF	EPA 200.8	441881		
10366456018	Room 1-53/Bath/Left Sink	EPA 200.8	441881		
10366456019	Room 1-53/Bath/Right Sink	EPA 200.8	441881		
10366456020	Room 1-53/ KitchenSink	EPA 200.8	441881		
10366456021	Room 1-34/ Sink	EPA 200.8	441882		
10366456022	Room 1-39/Sink	EPA 200.8	441882		
10366456023	Room 1-44/Sink	EPA 200.8	441882		

REPORT OF LABORATORY ANALYSIS

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CHAIN-OF-CUSTODY / Analytical Request Document

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.

10366456

Page: 1 of 2

Section A	Section B	Section C	REGULATORY AGENCY
Required Client Information: Company: NYS School for the Deaf Address: 104 Turin Rd Rome, NY Email To: michael.ananiano@nysed.gov Phone: _____ Fax: _____ Requested Due Date/TAT:	Required Project Information: Report To: _____ Copy To: _____ Purchase Order No.: _____ Project Name: BLDG 15-1ST FLOOR Project Number: _____	Invoice Information: Attention: _____ Company Name: _____ Address: _____ Pace Quote Reference: _____ Pace Project Manager: _____ Pace Profile #: _____	<input type="checkbox"/> NPDES <input type="checkbox"/> GROUND WATER <input checked="" type="checkbox"/> DRINKING WATER <input type="checkbox"/> UST <input type="checkbox"/> RCRA <input type="checkbox"/> OTHER _____ SITE LOCATION: <input type="checkbox"/> GA <input type="checkbox"/> IL <input type="checkbox"/> IN <input type="checkbox"/> MI <input type="checkbox"/> NC <input type="checkbox"/> OH <input type="checkbox"/> SC <input type="checkbox"/> WI <input type="checkbox"/> OTHER_NY _____ Filtered (Y/N)

ITEM #	Section D Required Client Information SAMPLE ID (A-Z, 0-9 / .) Sample IDs MUST BE UNIQUE	Valid Matrix Codes		MATRIX CODE	SAMPLE TYPE G=GRAB C=COMP	COLLECTED				SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives										Requested Analyte	Residual Chlorine (Y/N)	Pace Project No. Lab ID.
		MATRIX	CODE			COMPOSITE START		COMPOSITE END/GRAB				Unpreserved	H2SO4	HNO3	HCl	NaOH	Na2S2O3	Methanol	Na2BO4					
		DRINKING WATER WATER WASTE WATER PRODUCT SOIL/SOLID OIL WIPE AIR OTHER TISSUE	DW WT WW PW SL FL WF AS OT TI			DATE	TIME	DATE	TIME															
		DATE	TIME			DATE	TIME																	
1	ROOM 1-8/CAFE ICE MACHINE	DW	G			10/8	2:06											X					W1	
2	ROOM 1-8/CAFE SPRAYER						2:07											X						W2
3	ROOM 1-8/CAFE SINK						2:09											X						W3
4	ROOM 1-6/ FOUNTAIN						2:10											X						W4
5	ROOM 1-4/ LEFT SINK						2:11											X						W5
6	ROOM 1-4/ RIGHT SINK						2:12											X						W6
7	ROOM 1-9/ LEFT SINK						2:14											X						W7
8	ROOM 1-9/ RIGHT SINK						2:15											X						W8
9	ROOM 1-7/ FOUNTAIN						2:16											X						W9
10	ROOM 1-13/ SINK						2:17											X						W10
11	ROOM 1-15 /LATELBY SINK						2:07											X						W11
12	ROOM 1-30/ SINK						2:23											X						W12

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS				
							Temp in °C	Received on Ice	Custody Sealed Cooler	Samples Intact	
	James Murphy PACE	10/13/16	18:30	EVLPace	10/14/16	9:45	78	Y/N	Y/N	Y/N	Y/N

SAMPLER NAME AND SIGNATURE
 PRINT Name of SAMPLER: James Murphy - PACE Analytical
 SIGNATURE of SAMPLER: *James Murphy* DATE Signed (MM / DD / YY): 10/2/16



CHAIN-OF-CUSTODY / Analytical Request Document

The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields must be completed accurately.

Section A

Required Client Information:

Company: NYS School for the Deaf
 Address: 104 Turin Rd
 Rome, NY
 Email To: michael.ananiano@nysed.gov
 Phone: _____ Fax: _____
 Requested Due Date/TAT: _____

Section B

Required Project Information:

Report To: _____
 Copy To: _____
 Purchase Order No.: _____
 Project Name: BLDG 15-1ST FLOOR
 Project Number: _____

Section C

Invoice Information:

Attention: _____
 Company Name: _____
 Address: _____
 Pace Quote Reference: _____
 Pace Project Manager: _____
 Pace Profile #: _____

REGULATORY AGENCY

NPDES GROUND WATER DRINKING WATER
 UST RCRA OTHER _____

SITE LOCATION

GA IL IN MI NC
 OH SC WI OTHER_NY _____

Filtered (Y/N) _____

ITEM #	Section D Required Client Information SAMPLE ID (A-Z, 0-9 / -) Sample IDs MUST BE UNIQUE	Valid Matrix Codes		MATRIX CODE	SAMPLE TYPE G=GRAB C=COMP	COLLECTED				SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives							Requested Anal	Filtered (Y/N)	Residual Chlorine (Y/N)	Pace Project No. Lab I.D.			
		MATRIX	CODE			COMPOSITE START		COMPOSITE END/GRAB				Unpreserved	H ₂ SO ₄	HNO ₃	HCl	NaOH	Na ₂ S ₂ O ₃	Methanol					Na ₂ SO ₄		
		DRINKING WATER WASTE WATER PRODUCT SOLUTION OIL WPE AIR OTHER TISSUE	DW WF WW P S A R O T S			DATE	TIME	DATE	TIME																
1	Room 1-22/SINK	DW	G			10/8	2:21			1		1											013		
2	Room 1-22/ FOUNTAIN						2:20			1		1												014	
3	Room 1-32/SINK						2:26			1		1												015	
4	Room 1-32/ FOUNTAIN						2:26			1		1												016	
5	HALLWAY DF.						2:24			1		1												017	
6	Room 1-53/BATH/LEFT SINK						2:29			1		1												018	
7	Room 1-53/BATH/RIGHT SINK						2:30			1		1												019	
8	Room 1-53/KITCHEN SINK						2:27			1		1												020	
9	Room 1-34/SINK						2:31			1		1												021	
10	Room 1-39/SINK						2:34			1		1												022	
11	Room 1-44/SINK						2:36			1		1												023	
12										1		1													

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS			
	<i>Jimmy Pace</i>	10/13/16	18:30	<i>ETL Pace</i>	10/16/16	9:45	178	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
								<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>


SAMPLER NAME AND SIGNATURE

PRINT Name of SAMPLER: James Murphy - PACE Analytical

SIGNATURE of SAMPLER: *Jimmy Pace* DATE Signed (MM/DD/YY): 10/8/16

Temp in °C _____
 Received on Ice _____
 Custody Sealed Cooler _____
 Samples Intact _____

Sample Condition Upon Receipt
Client Name: Pace NY
Project #: _____
Courier: Fed Ex UPS USPS Client
 Commercial Pace Speedee Other: _____
Tracking Number: 77467348416

WO# : 10366456

10366456

Custody Seal on Cooler/Box Present? Yes No **Seals Intact?** Yes No **Optional:** Proj. Due Date: _____ Proj. Name: _____
Packing Material: Bubble Wrap Bubble Bags None Other: _____ **Temp Blank?** Yes No
Thermometer Used: 151401163 151401164 B88A912167504 B88A0143310098 **Type of Ice:** Wet Blue None Samples on ice, cooling process has begun
Cooler Temp Read (°C): 17.6 **Cooler Temp Corrected (°C):** 17.8 **Biological Tissue Frozen?** Yes No N/A
Temp should be above freezing to 6°C **Correction Factor:** +0.2 **Date and Initials of Person Examining Contents:** EW K/Kelle
USDA Regulated Soil N/A, water sample
 Did samples originate in a quarantine zone within the United States: AL, AR, AZ, CA, FL, GA, ID, LA, MS, NC, NM, NY, OK, OR, SC, TN, TX or VA (check maps)? Yes No Did samples originate from a foreign source (internationally, including Hawaii and Puerto Rico)? Yes No
If Yes to either question, fill out a Regulated Soil Checklist (F-MN-Q-338) and include with SCUR/COC paperwork.

	COMMENTS:
Chain of Custody Present? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	1.
Chain of Custody Filled Out? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2.
Chain of Custody Relinquished? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	3.
Sampler Name and/or Signature on COC? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	4.
Samples Arrived within Hold Time? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	5.
Short Hold Time Analysis (<72 hr)? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	6.
Rush Turn Around Time Requested? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	7.
Sufficient Volume? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8.
Correct Containers Used? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	9.
-Pace 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	10.
Filtered Volume Received for Dissolved Tests? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11. Note if sediment is visible in the dissolved container
Sample Labels Match COC? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	12.
-Includes Date/Time/ID/Analysis Matrix: <u>WT</u>	
All containers needing acid/base preservation have been checked? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	13. <input checked="" type="checkbox"/> HNO ₃ <input type="checkbox"/> H ₂ SO ₄ <input type="checkbox"/> NaOH <input type="checkbox"/> HCl
All containers needing preservation are found to be in compliance with EPA recommendation? (HNO ₃ , H ₂ SO ₄ , HCl<2; NaOH >9 Sulfide, NaOH >12 Cyanide) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Sample # <u>1-23</u>
Exceptions: VOA, Coliform, TOC, Oil and Grease, DRO/8015 (water) DOC <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	Initial when completed: _____ Lot # of added preservative: _____
Headspace in VOA Vials (>6mm)? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	14.
Trip Blank Present? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	15.
Trip Blank Custody Seals Present? <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Pace Trip Blank Lot # (if purchased): _____	

CLIENT NOTIFICATION/RESOLUTION **Field Data Required?** Yes No
Person Contacted: _____ **Date/Time:** _____
Comments/Resolution: temp ok

Project Manager Review: Awanda J Albrecht **Date:** 10/19/16

Note: Whenever there is a discrepancy affecting North Carolina compliance samples, a copy of this form will be sent to the North Carolina DEHNR Certification Office (i.e. out of hold, incorrect preservative, out of temp, incorrect containers).