



Microbac Laboratories, Inc., Sayre Division

CERTIFICATE OF ANALYSIS

S6K0254

Elmira City School District

Project Name: Admin Building

Mike Dunn
733 Benjamin Street
Elmira, NY 14901

Project / PO Number: N/A
Received: 11/10/2016 14:10
Reported: 12/21/2016 19:01

Analytical Testing Parameters

Client Sample ID: Admin F11
Lab Sample ID: S6K0254-01
Sample Type: Grab

Collected By: DI-Client
Collection Date: 10/27/16
Collection Time: 05:00

Analyses Subcontracted to: Microbac Laboratories, Inc. Dayville (NY 11549)

200.8- ICP-MS	Result	MCL	PQL	Units	Note	Prepared	Analyzed
Method: 200.8							
Lead	<0.001	0.015	0.001	mg/L		12/08/16 1442	12/13/16 1148

Analytical Testing Parameters

Client Sample ID: 1st Flr MRRS1
Lab Sample ID: S6K0254-02
Sample Type: Grab

Collected By: DI-Client
Collection Date: 10/27/16
Collection Time: 05:01

Analyses Subcontracted to: Microbac Laboratories, Inc. Dayville (NY 11549)

200.8- ICP-MS	Result	MCL	PQL	Units	Note	Prepared	Analyzed
Method: 200.8							
Lead	<0.001	0.015	0.001	mg/L		12/08/16 1442	12/13/16 1152

Analytical Testing Parameters

Client Sample ID: 2nd Flr MRRS1
Lab Sample ID: S6K0254-03
Sample Type: Grab

Collected By: DI-Client
Collection Date: 10/27/16
Collection Time: 05:02

Analyses Subcontracted to: Microbac Laboratories, Inc. Dayville (NY 11549)

200.8- ICP-MS	Result	MCL	PQL	Units	Note	Prepared	Analyzed
Method: 200.8							
Lead	0.0023	0.015	0.001	mg/L		12/08/16 1442	12/13/16 1155



Microbac Laboratories, Inc., Sayre Division

CERTIFICATE OF ANALYSIS

S6K0254

Analytical Testing Parameters

Client Sample ID: 2nd Flr WRRS1
Lab Sample ID: S6K0254-04
Sample Type: Grab

Collected By: DI-Client
Collection Date: 10/27/16
Collection Time: 05:03

Analyses Subcontracted to: Microbac Laboratories, Inc. Dayville (NY 11549)

Table with 8 columns: 200.8- ICP-MS, Result, MCL, PQL, Units, Note, Prepared, Analyzed. Row 1: Method: 200.8, Lead, 0.0022, 0.015, 0.001, mg/L, 12/08/16 1442, 12/13/16 1159

Analytical Testing Parameters

Client Sample ID: 2nd Flr F12
Lab Sample ID: S6K0254-05
Sample Type: Grab

Collected By: DI-Client
Collection Date: 10/27/16
Collection Time: 05:04

Analyses Subcontracted to: Microbac Laboratories, Inc. Dayville (NY 11549)

Table with 8 columns: 200.8- ICP-MS, Result, MCL, PQL, Units, Note, Prepared, Analyzed. Row 1: Method: 200.8, Lead, <0.001, 0.015, 0.001, mg/L, 12/08/16 1442, 12/13/16 1203

Analytical Testing Parameters

Client Sample ID: 1st Flr WRRS1
Lab Sample ID: S6K0254-06
Sample Type: Grab

Collected By: DI-Client
Collection Date: 10/27/16
Collection Time: 05:05

Analyses Subcontracted to: Microbac Laboratories, Inc. Dayville (NY 11549)

Table with 8 columns: 200.8- ICP-MS, Result, MCL, PQL, Units, Note, Prepared, Analyzed. Row 1: Method: 200.8, Lead, <0.001, 0.015, 0.001, mg/L, 12/08/16 1442, 12/13/16 1214



Microbac Laboratories, Inc., Sayre Division

CERTIFICATE OF ANALYSIS

S6K0254

Analytical Testing Parameters

Client Sample ID: 2nd Fir WRRS2
Lab Sample ID: S6K0254-07
Sample Type: Grab

Collected By: DI-Client
Collection Date: 10/27/16
Collection Time: 05:06

Analyses Subcontracted to: Microbac Laboratories, Inc. Dayville (NY 11549)

Table with 8 columns: 200.8- ICP-MS, Result, MCL, PQL, Units, Note, Prepared, Analyzed. Row 1: Method: 200.8, Lead, 0.0011, 0.015, 0.001, mg/L, 12/08/16 1442, 12/13/16 1218

Laboratory

SAY: Microbac Laboratories, Inc., Sayre Division

Definitions

AL: Action Level
RL: Reporting Limit
G: Result fails applicable NYS drinking water standards

Cooler Receipt Log

Cooler ID: Default Cooler Temp: °C

Cooler Inspection Checklist

Table with 4 columns: Item, Yes, Item, Yes. Rows: Custody Seals Intact and/or No Evidence of Tampering, COC/Labels Agree, Received on Ice (or not required)

Project Requested Certification(s)

Microbac Laboratories, Inc. Dayville (NY 11549)
NY Lab ID No: 11549

New York State Department of Health

Report Comments

Samples were received in proper condition and the reported results conform to applicable accreditation standard unless otherwise noted.

Reviewed and Approved By:

Andrew Canale For Renee Lantz
Project Manager
12/21/2016 19:01

Go Green: Contact Renee Lantz to set up email reporting and invoicing options.

The data and information on this, and other accompanying documents, represents only the sample(s) analyzed. This report is incomplete unless all pages indicated in the footnote are present and an authorized signature is included. For any feedback concerning our services, please contact Renee Lantz, Project Manager at renee.lantz@microbac.com. You may also contact Michael Fifield, Managing Director at michael.fifield@microbac.com or Robert Crookston, President at robert.crookston@microbac.com.

Microbac Laboratories, Inc.

CHAIN OF CUSTODY

3821 Buck Drive
 Cortland NY 13045
 Phone: (607)753-3403 Fax: (607)753-3415
 NY #10795, EPA #NY00935

Samples must be returned on ice

MNY Workorder #

Client Information		Billing/Invoices		Analytix Requested		Receiving Info (Lab Use Only)																																									
Name: <u>Elmira City Schools</u>	Address: <u>Elmira City Schools</u>	Quote ID: _____	Date Req: _____	Ice: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Container Material: _____	Sample Temp: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Accepted? YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>																																								
Address: <u>Admin. Building</u>	Address: <u>733 Benjamin St</u>	Carbon Copy: <input checked="" type="checkbox"/> <u>dunsogna@getboes.org</u>	Project: <u>Lead In DW</u>	Cooler: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Container Size: _____	Cooler Seal: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Dropoff: C <input type="checkbox"/> W <input type="checkbox"/>																																								
Contact: <u>Michael Dunn</u>	Contact: <u>Michael Dunn</u>	Email Results: <input checked="" type="checkbox"/> <u>mdunn@elmira-cityschools.com</u>	PO#: _____	Sample Temp: _____	Preservative: _____	Pickup: YES <input type="checkbox"/> NO <input checked="" type="checkbox"/>	Comments: _____																																								
Phone: <u>607 735 3980</u>	Phone: <u>607 735 3980</u>	Fax Results: Yes <input type="checkbox"/> No <input checked="" type="checkbox"/>		Number of Containers for Analytix Requested	Comme	Dropoff: _____																																									
Project: <u>Lead In DW</u>	Project: <u>Lead In DW</u>																																														
<table border="1" style="width: 100%; border-collapse: collapse;"> <thead> <tr> <th colspan="2">Sample Information</th> <th colspan="2">Matrix</th> </tr> <tr> <th>Description/Location</th> <th>Date</th> <th>Time</th> <th>Initial</th> </tr> </thead> <tr> <td>1 Admin F11</td> <td>10-27-16</td> <td>0500</td> <td>DI</td> </tr> <tr> <td>2 1st FLR WRR S1</td> <td>10-27-16</td> <td>0501</td> <td>DI</td> </tr> <tr> <td>3 2nd FLR WRR S1</td> <td>10-27-16</td> <td>0502</td> <td>DI</td> </tr> <tr> <td>4 2nd FLR WRR S1</td> <td>10-27-16</td> <td>0503</td> <td>DI</td> </tr> <tr> <td>5 2nd FLR F12</td> <td>10-27-16</td> <td>0504</td> <td>DI</td> </tr> <tr> <td>6 1st FLR WRR S1</td> <td>10-27-16</td> <td>0505</td> <td>DI</td> </tr> <tr> <td>7 2nd FLR WRR S2</td> <td>10-27-16</td> <td>0506</td> <td>DI</td> </tr> <tr> <td>8</td> <td></td> <td></td> <td></td> </tr> </table>		Sample Information		Matrix		Description/Location	Date	Time	Initial	1 Admin F11	10-27-16	0500	DI	2 1 st FLR WRR S1	10-27-16	0501	DI	3 2 nd FLR WRR S1	10-27-16	0502	DI	4 2 nd FLR WRR S1	10-27-16	0503	DI	5 2 nd FLR F12	10-27-16	0504	DI	6 1 st FLR WRR S1	10-27-16	0505	DI	7 2 nd FLR WRR S2	10-27-16	0506	DI	8				<p>200.000 Plastic 250 Nitric</p>		<p>Lead In DW</p>		<p>200.000 Plastic 250 Nitric</p>	
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<p>Print Name and Company: <u>Dominic Fagnano, ECSD</u></p>		<p>Print Name and Company: <u>Don</u></p>		<p>Date/Time: _____</p>		<p>Date/Time: _____</p>																																									
<p>Signature: _____</p>		<p>Signature: _____</p>		<p>Date/Time: _____</p>		<p>Date/Time: _____</p>																																									
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Elmira City School District/Maintenance

Microbac Laboratories (MNO) may be unable to perform a portion of the requested testing in which case we will subcontract the analysis to another accredited laboratory. By signing this document you are attesting that you have been informed by MNO of the intent to subcontract and are in agreement with this action.