



## Laboratory Report

Plattsburgh, City WPCP 201111  
53 Green Street  
Plattsburgh, NY 12901  
Atten: William Ellsworth

PROJECT: Cplatt ECMP, FCMF, ENT  
WORK ORDER: 1706-14435  
DATE RECEIVED: June 30, 2017  
DATE REPORTED: July 03, 2017  
SAMPLER: W. Ellsworth

Enclosed please find the results of the analyses performed for the samples referenced on the attached chain of custody located at the end of this report.

The column labeled Lab/Tech in the accompanying report denotes the laboratory facility where the testing was performed and the technician who conducted the assay. A "W" designates the Williston, VT lab under NELAC certification ELAP 11263; "R" designates the Lebanon, NH facility under certification NH 2037 and "N" the Plattsburgh, NY lab under certification ELAP 11892. "Sub" indicates the testing was performed by a subcontracted laboratory. The accreditation status of the subcontracted lab is referenced in the corresponding NELAC and Qual fields.

This NELAC column also denotes the accreditation status of each laboratory for each reported parameter. "A" indicates the referenced laboratory is NELAC accredited for the parameter reported. "N" indicates the laboratory is not accredited. "U" indicates that NELAC does not offer accreditation for that parameter in that specific matrix. Test results denoted with an "A" meet all National Environmental Laboratory Accreditation Program requirements except where denoted by pertinent data qualifiers. Test results are representative of the samples as they were received at the laboratory.

Endyne, Inc. warrants, to the best of its knowledge and belief, the accuracy of the analytical test results contained in this report, but makes no other warranty, expressed or implied, especially no warranties of merchantability or fitness for a particular purpose.

Reviewed by:

Christina A Lafountain  
Laboratory Director Plattsburgh, NY

**Laboratory Report**

CLIENT: Plattsburgh, City WPCP  
 PROJECT: Cplatt ECMP, FCMF, ENT

WORK ORDER: **1706-14435**  
 DATE RECEIVED: 6/30/17

001	Site: WPCP Effluent	Date Sampled: 6/30/17	Time: 8:40
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<u>Parameter</u>	<u>Result</u>	<u>Units</u>	<u>RL</u>	<u>PQL</u>	<u>Method</u>	<u>Analysis Date/Time</u>	<u>Lab/Tech</u>	<u>NELAC</u>	<u>Qual.</u>
Total Coliform	6294	MPN/100mL	1	1	SM 9223 Quantitray	6/30/17 15:50	N MD	A	
Fecal Coliform	450	CFU/100mL	1	20	SM 9222D	6/30/17 16:40	N AAS	A	
E. coli	594	MPN/100mL	1	10	SM 9223B Colilert	6/30/17 15:50	N MD	A	
Enterococcus	135	MPN/100mL	1	1	Enterolert	6/30/17 16:14	N MD	A	

E

Date: 03 Jul 17

To: Endyne, Inc.  
 315 New York Road  
 Plattsburgh, NY 12903  
 Phone 518-563-1720, FAX 518-563-0052  
 Account number 201111

## CHAIN OF CUSTODY RECORD

SAMPLER'S NAME&gt;&gt;

W. Ellsworth

CLIENT: CITY OF PLATTSBURGH-WPCP  
 CLIENT CONTACT: BILL ELLSWORTH  
 CLIENT PHONE 518-536-7476

(PLEASE PRINT)

Lab. Services Contact: Chris LaFountain

PROJECT LOCATION:&gt;&gt; CITY OF PLATTSBURGH

PURCHASE ORDER # 24

TURNAROUND TIME REQUESTED: NORMAL

SMPL #	SAMPLEID	Sample Date	Time	Matrix	Type	#	Pres.	Detection Limit PPB	ANALYSES
001	Wpcp Effluent	6/30/17	840	WATER	Grab	1	4&10	SeeBelow	Fecal Coliform
001	Wpcp Effluent	↓	840	WATER	Grab	1	4&10	SeeBelow	E coli
No Sample	Wpcp Effluent	↓		WATER	Grab	1	4&10	SeeBelow	Fecal Coliform
001	Wpcp Effluent	↓	840	WATER	Grab	1	4&10	SeeBelow	Enterococcus

SAMPLED BY: (SIGNATURE)

Date

Time

RECEIVED BY: (SIGNATURE)

DATE/TIME

&gt;&gt; W. Ellsworth

6/30/17 840

/ /

RELINQUISHED BY: (SIGNATURE)

&gt;&gt; W. Ellsworth

6/30/17 1054

RECEIVED BY: (SIGNATURE)

Ryan Price 1054 6/30/17

DISPATCHED BY: (SIGNATURE)

Ryan Price

6/30/17 1110

RECEIVED FOR LABORATORY BY:

&gt;&gt; [Signature]

Date

Time

30 Jun 17 11:12

## PRESERVATIVES

1. HCL
2. HNO3
3. NAOH
4. NAS203
5. ZN ACET
6. ASCORBIC
7. H2SO4
8. FILTERED
9. N (NOT PRESERVED)
10. OTHER Iced\_

## SAMPLE CONDITION:

1. SAMPLES INTACT? Yes/No
2. CUSTODY SEALS INTACT? Yes/No
3. PRESERVED PROPERLY? Yes/No
4. COC Received with Samples? Yes/No
5. Samples were properly iced? Yes/No
6. Temperature received: 7.3

For the above Analyses listing these are the  
**DETECTION LIMIT REQUIREMENTS:**

Setup sufficient Sample Volumes such that a &gt; is never reported

METHOD OF SHIPMENT:

Hand Delivered DATE:&gt;&gt;

NOTES/COMMENTS:

PP may be used as an abbreviation for Priority Pollutants

Flow 13 mgd, Cl<sub>2</sub> R = 0.8

SEND A COPY OF THIS COC, COMPLETED, BACK TO OUR LAB

COCENDYNE.XLS

Revised

5/16/2016

Location: WPCP Fecal Coliform (2)



Revised  
 5/16/2016

1706-14435



1706-14435

Plattsburgh, City WPCP  
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Weds