

CERTIFICATE OF ANALYSIS

E4I0032

prepared for:

Housatonic Basin Sampling & Testing

Nick Bruzzi 80 Run WAY Lee, MA 01238

Project Name: Farmington River Reg. Elem. - 1225040

Project / PO Number: 1225040-240903

Received: 09/03/2024 13:39

Reported: 09/06/2024 11:07

Report Comments

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

Reviewed and Approved By:

R. Wank

Ron Warila Director, Environmental 09/06/2024 11:07

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.

Microbac Laboratories, Inc.

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Massachusetts Department of Bacteriological Report

I. PWS INFORMATION: Refer to your DEP Coliform Sampling Plan to help complete the PWS Information and DEP Approved Sample Site Information sections below.																		
PWS ID #: 1225040 PWS Name: Farmington River Reg. Elem.								Ci	ty/Town: Otis									
II. ANALYTICAL INFORMATION: Refer to your MassDEP state lab certificate for proper Lab MA Cert.# and certified methods.																		
Prir	nary Lab M/	A Cert.#:	M-MA1146 P	rimary La	b Name: Mi	crobac Lab	oratories, In	c., Lee				Subcontracted?(Y/N): N						
Analysis Lab MA Cert.#: M-MA1146 Analysis Lab: Microbac Laboratories, Inc., Lee																		
X Original Report Resubmitted Report Confirmation Report (1)Reason for Resubmission: Resample Reanalysis Report Correction (2)Collection												ection Date of Original Sample:						
-	TC Method		E.Coli Method	rococci Meth	od	Fecal Colifor	m	HPC Meth	nod			Lab Sample Notes:						
1 9223 B (Colilert-18)-20	004 (18 192	223 B (Colilert-18)-2004 (1	8														
	DEP APP	ROVED SAM	PLE SITE INFORMATION	TOTAL	E.COLI or	CHLORINE	НРС	COLLECTION		ANALYS	SIS							
Sample Type ^{1,3}	Location Code # ¹	DEI	P Approved SAMPLE LOCAT	COLIFORM RESULT 4.5	FECAL RESULT 4.5	RESULT ² mg/L	RESULT # cfu/mL	DATE	TIME	DATE	TIME	COLLECTED BY	LAB SAMPLE ID #					
RS	002		Kitchen Hand Wash			Absent			09/03/2024	08:30	09/03/2024	15:13	Russ Hopkins	E4I0032-01				
RS	STOR	R Tap After Tank-boiler room Absent Abse							09/03/2024	08:34	09/03/2024	15:13	Russ Hopkins E4I0032-02					
¹ DEP Sample Type, Location Code#, and DEP Approved Sample Site Location must correspond to the sample information on your DEP Total Coliform Sampling Plan ² SWTR systems: HPC samples shall be taken at the same <u>distribution</u> sites and at the same time as total coliform, whenever chlorine residual is <u>not</u> detected at the sample site. ³ Sample Type: RS-Routine Distribution Sample,RO-Original Site Repeat,UR-Upstream Repeat,DR-Downstream Repeat,AR-Additional Repeat, RW-Raw Water,PT-Plant Tap,SS-Special Sample ⁴ Report as #/100mL,P (present),A (absent), or Too Numerous To Count: TNTC-I(invalid) or TNCT-P(present). ⁵ Collect appropriate number of repeat samples within 24 hours of laboratory notification for coliform-positive or invalid samples. Notify DEP of any routine or repeat E.Coli or fecal positive results by the end of the business day. <i>I certify under penalties of law that I am the person authorized to fill out this form and the information contained herein is true, accurate and complete to the best extent of my knowledge.</i> 09/06/2024																		
DEP Re	view Status	:	Accepted	Disappro	ved	Review Com	ments:											

DEP Review Status:

Review Comments:

В



Housatonic Basin Sampling and Testing

SAMPLE COLLECTION RECORD | CHAIN OF CUS1

PWS NAME: FARMINGTON RIVER REG ELEM SCHOOL						T	80 RUN WAY LEE, MA 01238																
PWS ID: 1225040																							
PWS TOWN: North Otis							Housatonic Basin Sampling & Testing										HBST P.O. # 1225040-240903)3			
PWS CLASS: NTNC									<u>5</u> a		рп	ng	& lesting							1	# of WO:		2
							FIELD RECORDED				MICRO BIOLOGY				CHE	MICAL	ANALYS	515					
ID	SAMPLE TYPE	BACTERIA DEP ID	Chem Sample ID	LOCATION DESCRIPTION	DATE/TIME	SAMPLER	Field Temp F°	Field pH	Field Turbitity (NTU)	Field UV Absorb 254	Field UV Transmit 254	ChI2 Res (Free)	BACTERIA HPC	BACTERIA 9223 P/A	BACTERIA 9223 QT								Preserved Na252o3
	[RS]	[002]		KITCHEN HAND WASH-	9/3/24 8:30 AM	Russ Hopkins							I	X							+		_
	[RS]	[STOR]		TAP AFTER TANK- BOILER RM-	9/3/24 8:34 AM	Russ Hopkins								Х									
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CUSTODY TRANSFER						l	DATE	TIME	L					l	NOT	ES			<u> </u>				
SAMPLER KUSSEL Holking / RECEIVED Jenselling 9				71	3/2.	4		1391	om							*		H#7A.N					
RECEIVED AN Bauan					3/24																		
RELINQUISHED										$f \cdot G$	f C												
	RECEIVE	D		3										-	.								
R	RELINQUISHED																						

Note: Submit via EDEP unless designated Private or otherwise noted. Email report to: Admin@HousatonicBasin.com. Lab testing shall be in compliance with all State and Federal Drinking Water and applicable regulations.