

CERTIFICATE OF ANALYSIS

E4J0009

prepared for:

Housatonic Basin Sampling & Testing

Nick Bruzzi 80 Run WAY Lee, MA 01238

Project Name: Farmington River Reg. Elem. - 1225040

Project / PO Number: 1225040-241001

Received: 10/01/2024 11:16

Reported: 10/03/2024 09:53

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 10/03/2024 09:53

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	#: 122504	40	PWS Name: Far	mington Ri	ver Reg. Ele	m.		C	Class: COM NT									
II. ANALY	II. ANALYTICAL INFORMATION: Refer to your MassDEP state lab certificate for proper Lab MA Cert.# and certified methods.																	
Prii	mary Lab M	A Cert.#: [M-MA1146	Primary La	b Name: Mi	crobac Lab	oratories, In	c., Lee			Subcontracted?(Y/N): N							
Ana	lysis Lab M/	A Cert.#: [M-MA1146	Analy														
X Origin	al Report	Resubmitte	d Report Confirmati	on Report	(1)	Reason for Resu	esample	Reanalysis	Report Co	orrection	(2)Coll	ction Date of Original Sample:						
	TC Method		E.Coli Method	Ente	rococci Metho	bd	Fecal Colifor	m	HPC Meth			Lab Sample Notes:						
1 9223 B (Colilert-18)-20	004 (18 192	223 B (Colilert-18)-2004															
DEP APPROVED SAMPLE SITE INFORMATION TOTAL E.COLI or							CHLORINE	НРС	COLLECT	ION	ANALYS	SIS						
Sample Type ^{1,3}	Location Code # ¹				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	Absent			10/01/2024	07:45	10/01/2024	14:56	Russ Hopkins	E4J0009-01				
RS	STOR	DR Tap After Tank-boiler room Absent Abs							10/01/2024	07:55	10/01/2024	14:56	Russ Hopkins	E4J0009-02				
 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> <i>Laboratory Authorized Signature and Date:</i> 																		
DEP Re	view Status	:	Accepted	Disappro	ved	Review Com	ments:											

DEP Review Status:

Review Comments:

В



Housatonic Basin Sampling and Testing

PWS NAME:			FARMINGTON RIVER REG ELEM SCHOOL																		80 RUN WAY							
	PWS ID: 1225040																			LEE, MA 01238 (413)248-4622								
ł	PWS TOWN: North Otis							Housatonic Basin Sampling & Testing										HBST P.O. #			1225040-241001							
F	PWS CLASS: NTNC]	Sa	ım	рп	ng	<u>&</u>	16	951	tin	g						# of \	NO:		3		
SAMPLE INFORMATION						FIELD RECORDED						MICRO		CHEMIC														
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	Nitrate										Preserved Na2S2o3		
	[RS]	[002]		KITCHEN HAND WASH-	10/1/24 7:45 AM	Russ Hopkins		-		<u> </u>				X		ļļ.		_	ļ					—				
	[RS]	[STOR]		TAP AFTER TANK- BOILER RM-	10/1/24 7:55 AM	Russ Hopkins	1						-	X														
			[10001]	POE WELL-01G-	10/1/24 7:50 AM	Russ Hopkins										*	10	1.24	I CF	2								
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CUSTODY TRANSFER							· · · · ·	DATE	/TIME			NOT																
SAMPLER RUSSEIL HONGINS 10/						1/20:	1/2024 11:16 an 10.8°C																					
	RECEIV	ED	Ľ	Hundry					1.126 116 10.8																			
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RECEIVED															<u></u>													
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.

SAMPLE COLLECTION RECORD | CHAI

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