

CERTIFICATE OF ANALYSIS

NY Lab ID 11534

Project Name:	Bolton Central School Distri	Workorder:	C015509
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Mike Graney
Bolton Central School District
26 Horicon Avenue
Bolton Landing, NY 12814

Project Name and Number: **Bolton Central School District**

May 16, 2016

Dear Mike Graney,

This report relates only to the sample(s) as received by the laboratory. Laboratory reports may not be reproduced, except in full, without the written approval of the laboratory.

The issuance of the final Certificate of Analysis takes precedence over any previous Preliminary Report. Caution is advised for the utilization of preliminary data included in reports labeled as "Preliminary Report" and should not be used for regulatory purposes. A laboratory signature is provided on final reports only.

If you have any questions in reference to this laboratory report, please contact your CNA Environmental project coordinator or laboratory manager listed at the bottom of this report at (518) 884-0800.

Note: This coverage page is included as part of the Analytical Report and must be retained as a permanent record thereof.



Laboratory Manager

CNA Environmental, LLC



The results in this report apply to the samples analyzed in accordance with the chain of custody document. This analytical report must be reproduced in its entirety.

Krzysztof Trafalski For Sara Bogardus, Field Coordinator

Client:

Bolton Central School District
26 Horicon Avenue
Bolton Landing, NY 12814

Project:

Bolton Central School District

CNA Environmental, LLC received the sample(s) associated with this batch in compliance with NYSDOH guidelines. The requested analysis methods and results are detailed in the following data summary reports. Any exceptions to method procedures are listed in the comments section below.

To meet the New York Sanitary Code for Public Drinking Water, Total Coliform must be absent or <1; all other analytes must be less than or equal to the MCL.

Metals:

Sample(s) meet the NYSDOH MCL criteria for Lead.

Exceptions: Sample 29 First Draw does NOT meet the NYSDOH MCL criteria for Lead (MCL = 0.015 mg/L). Conversely, Sample 29 Follow Up (flushed for 30 seconds) meets the NYSDOH MCL criteria for Lead.

CNA Sample Reference

Please note school floor plans have been attached at the end of this report showing exact sampling locations for this project. Moreover, references to direction ("Left", "Right", etc.) are listed from the perspective of "looking at" the referred to location. A summary is listed below.

First Floor:

- Sample 01: Sink, Nurse Room 105
- Sample 02: Sink, Nurse Room 105, Toilet
- Sample 03: Sink, Classroom 102
- Sample 04: Sink, Classroom 100
- Sample 05: Water Cooler, Hallway adjacent to Office Room 112 and Classroom 106
- Sample 06: Sink, Cafeteria Room 115 Kitchen, Prep Station
- Sample 07: Sink, Cafeteria Kitchen Room 115, Dishwash Station Left
- Sample 08: Sink, Cafeteria Kitchen Room 115, Dishwash Station Center
- Sample 09: Sink, Cafeteria Kitchen, Dishwash Station Right
- Sample 10: Water Cooler, Cafeteria Room 115 Right
- Sample 11: Water Cooler, Cafeteria Room 115 Left
- Sample 12: Sink, Janitoria Room 125

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Krzysztof Trafalski For Sara Bogardus, Field Coordinator

Sample 13: Water Cooler, Hallway adjacent to Boy's/Girls Toilet

Third Floor:

Sample 14: Water Cooler, Hallway across from Classroom 332 and Classroom 334

Second Floor:

Sample 15: Water Cooler, Hallway adjacent to Stairs and Vocal Music Room 248

Sample 16: Sink, Classroom 247 Left

Sample 17: Sink, Classroom 247 Right

Sample 18: Sink, Classroom 229 Left

Sample 19: Sink, Classroom 229 Right

Sample 20: Sink, Classroom 216 Toilet

Sample 21: Water Cooler, Hallway adjacent to Classroom 216 Left

Sample 22: Sink, Staff Room 212

Sample 23: Water Cooler, Hallway adjacent to Classroom 216 Right

Sample 24: Sink, Classroom 206

Sample 25: Sink, Classroom 204

Sample 26: Sink, Classroom 202

Sample 27: Sink, Classroom 203

Sample 28: Sink, Classroom 200

Sample 29: Sink, Classroom 201

CNA Environmental, LLC



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Krzysztof Trafalski For Sara Bogardus, Field Coordinator

Total Metals

Date Received: 04/26/16 14:13

Sample ID#	Analysis	Method	Results	RL	Units	MCL	Sample Point	Sampled	Analyzed	Notes
C015509-01	Lead, First Draw	SM21 3113B	0.002	0.002	mg/L	0.015	Sample 01	4/26/16 10:30	4/29/16 16:25	S1
C015509-02	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 02	4/26/16 10:32	4/29/16 16:25	S1, U
C015509-03	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 03	4/26/16 10:33	4/29/16 16:25	S1, U
C015509-04	Lead, First Draw	SM21 3113B	0.005	0.002	mg/L	0.015	Sample 04	4/26/16 10:35	4/29/16 16:25	S1
C015509-05	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 05	4/26/16 10:38	4/29/16 16:25	S1, U
C015509-06	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 06	4/26/16 10:40	4/29/16 16:25	S1, U
C015509-07	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 07	4/26/16 10:42	4/29/16 16:25	S1, U
C015509-08	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 08	4/26/16 10:43	4/29/16 16:25	S1, U
C015509-09	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 09	4/26/16 10:44	4/29/16 16:25	S1, U
C015509-10	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 10	4/26/16 10:47	4/29/16 16:25	S1, U
C015509-11	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 11	4/26/16 10:48	4/29/16 16:25	S1, U
C015509-12	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 12	4/26/16 10:49	4/29/16 16:25	S1, U
C015509-13	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 13	4/26/16 10:50	4/29/16 16:25	S1, U
C015509-14	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 14	4/26/16 11:10	4/29/16 16:25	S1, U
C015509-15	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 15	4/26/16 11:12	4/29/16 16:25	S1, U
C015509-16	Lead, First Draw	SM21 3113B	0.002	0.002	mg/L	0.015	Sample 16	4/26/16 11:15	4/30/16 12:15	S1
C015509-17	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 17	4/26/16 11:16	4/30/16 12:15	S1, U
C015509-18	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 18	4/26/16 11:17	4/30/16 12:15	S1, U
C015509-19	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 19	4/26/16 11:20	4/30/16 12:15	S1, U
C015509-20	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 20	4/26/16 11:23	4/30/16 12:15	S1, U
C015509-21	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 21	4/26/16 11:24	4/30/16 12:15	S1, U
C015509-22	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 22	4/26/16 11:25	4/30/16 12:15	S1, U
C015509-23	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 23	4/26/16 11:27	4/30/16 12:15	S1, U
C015509-24	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 24	4/26/16 11:30	4/30/16 12:15	S1, U
C015509-25	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 25	4/26/16 11:34	4/30/16 12:15	S1, U
C015509-26	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 26	4/26/16 11:36	4/30/16 12:15	S1, U
C015509-27	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 27	4/26/16 11:39	4/30/16 12:15	S1, U
C015509-28	Lead, First Draw	SM21 3113B	ND	0.002	mg/L	0.015	Sample 28	4/26/16 11:41	4/30/16 12:15	S1, U
C015509-29	Lead, First Draw	SM21 3113B	0.064	0.002	mg/L	0.015	Sample 29	4/26/16 11:42	5/2/16 15:22	S1

CNA Environmental, LLC

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Krzysztof Trafalski For Sara Bogardus, Field Coordinator

Total Metals

Date Received: 04/26/16 14:13

Sample ID#	Analysis	Method	Results	RL	Units	MCL	Sample Point	Sampled	Analyzed	Notes
C015509-30	Lead	SM21 3113B	ND	0.002	mg/L	0.015	Sample 29 Follow Up	4/26/16 11:42	5/2/16 15:22	S1

CNA Environmental, LLC



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Krzysztof Trafalski For Sara Bogardus, Field Coordinator

Notes and Definitions

U	Compound not detected
S1	Sample(s) collected per Field Sampling SOP
DET	Analyte DETECTED
ND	Analyte NOT DETECTED at or above the Reporting Limit (RL)
NR	Not Reported
dry	Sample results reported on a dry weight basis
RPD	Relative Percent Difference
<	Less than reporting limit
≤	Less than or equal to reporting limit
>	Greater than reporting limit
≥	Greater than or equal to reporting limit
MDL	Method Detection Limit
RL	Reporting Limit
MCL/AL	Maximum Contaminant Level*/Action Level
mg/kg wet	Results reported as wet weight
TTL	Total Threshold Limit Concentration
STLC	Soluble Threshold Limit Concentration
TCLP	Toxicity Characteristic Leachate Procedure

*MCL values listed in this report are taken from the New York State Department of Health Part 5, Subpart 5-1 Public Water System Tables. A full list of parameters and their associated MCL values can be found on the New York Department of Health's website, www.health.ny.gov. Please note that some parameters tested may not have an associated MCL value. In other cases, a listed MCL value may refer to a recommended result limit or result equivalent to another parameter; as is the case for heterotrophic plate count (HPC). HPC results equal to or less than 500 colonies/mL is considered to be equivalent to a measurable free chlorine residual.

CNA Environmental, LLC



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Krzysztof Trafalski For Sara Bogardus, Field Coordinator



DRINKING WATER • NON-POTABLE WATER • MILK • FOOD • AIR

CNA Environmental LLC.

27 Kent Street
Ballston Spa, NY 12020
(518) 884-0800
Fax# (518) 884-0801

172 Ridge Street
Glens Falls, NY 12801
(518) 792-1170
Fax# (518) 792-1261

Main Office and Lab
M-F 8:00 AM - 4:30 PM Sat 10:00 AM - Noon

Satellite Office (Sample Receipt)
M-F 8:00 AM - 3:30 PM

Chain of Custody Form

Owner Name and Address

BALDWIN CSD
260 Horizon Ave
Bolton Landing, 12814

Contact Phone

518.661.2400 ext. 105 MR

Person taking sample(s)

CO15509

Public Water Supply#

Sample Source (public water, well, pond, etc)

Water Types: DW = Drinking water (chlorination, UV system, residential well)
Raw = Untreated source water, NPW = Non-potable other (ie lake), WW = waste water.

Lab ID (CNA Use)	Sample Point	Date	Time	AM PM	Grab or Composite	Water Type	# of bottles	Analysis Required
<i>01A01a</i>	<i>1st Fall</i>	<i>4/24/16</i>	<i>1030</i>	<i>A/P</i>	<i>G</i>	<i>DW</i>	<i>1</i>	<i>PD (First Draw)</i>
<i>01A02a</i>	<i>2</i>		<i>1032</i>	<i>A/P</i>				
<i>01A03a</i>	<i>3</i>		<i>1033</i>	<i>A/P</i>				
<i>01A04a</i>	<i>4</i>		<i>1035</i>	<i>A/P</i>				
<i>05A01</i>	<i>5</i>		<i>1038</i>	<i>A/P</i>				
<i>06a</i>	<i>6</i>		<i>1040</i>	<i>A/P</i>				
<i>07a</i>	<i>7</i>		<i>1042</i>	<i>A/P</i>				
<i>08a</i>	<i>8</i>		<i>1043</i>	<i>A/P</i>				
<i>09a</i>	<i>9</i>		<i>1044</i>	<i>A/P</i>				
<i>10a</i>	<i>10</i>		<i>1042</i>	<i>A/P</i>				
<i>11a</i>	<i>11</i>		<i>1043</i>	<i>A/P</i>				
<i>12a</i>	<i>12</i>		<i>1044</i>	<i>A/P</i>				
<i>13a</i>	<i>13</i>		<i>1050</i>	<i>A/P</i>				

Relinquished by:

Received by:

Date/Time:

Relinquished by:

Received by:

Date/Time:

Relinquished by:

Received by Laboratory in Ballston Spa: *SRB*

Date/Time:

4/20/16

CNA Environmental LLC's mission is to be certified by the New York State Dept. of Health to perform the following analyses:

Potable water: chloride, coliform, color, conductivity, copper, e. Coli, fluoride/lead, nitrate, nitrite, odor, pH, solids (total dissolved), standard plate count, sulfate, turbidity
Non-Potable water: BOD, CBOD, coliform (fecal and total), e. Coli, standard plate count, fluoride, nitrate, nitrite, sulfate, pH, solids (settleable and suspended), specific conductance, turbidity

All other analyses will be forwarded to an NYS DOH ELAP/NELAC approved laboratory. CNA reserves the right to use an approved laboratory for any and all analyses in the event that CNA is unable to perform an analysis.

Customer acknowledges and agrees to allow any samples be sent to a sub lab for analysis at the discretion of CNA, is this acceptable per the client? (Y/N)

CNA USE ONLY

COC Complete: *N*

Temp. Upon Receipt: *19.8°C*

Samples were: Ship *(Hand)* Drop

Properly Preserved: *N*

On Ice/Cooling: *N*

Containers Intact: *N*

Labels Match COC: *N*

Method of Payment: *Bill*

Mailing/Billing Address:

Comments:

Email: *ME11036@ballstoncsd.org*

Chlorine Residual (mg/l):

Na₂S₂O₃ Used: Y / N

1 of 3



CNA Environmental LLC.

27 Kent Street
Ballston Spa, NY 12020
(518) 884-0800
Fax# (518) 884-0801

172 Ridge Street
Glens Falls, NY 12801
(518) 792-1170
Fax# (518) 792-1261

Main Office and Lab
M-F 8:00 AM - 4:30 PM Sat 10:00 AM - Noon

Satellite Office (Sample Receipt)
M-F 8:00 AM - 3:30 PM

Chain of Custody Form

Owner Name and Address: BOLTON CSO

Contact Phone: _____ Person taking sample(s): _____

Public Water Supply#: _____ Sample Source (public water, well, pond, etc): _____

Water Types: DW = Drinking water (chlorination, UV system, residential well)
 Raw = Untreated source water, NPW = Non-potable other (ie lake), WW = waste water.

Lab ID (CNA Use)	Sample Point	Date	Time	AM/PM	Grab or Composite	Water Type	# of bottles	Analysis Required
15a	14	4/26/16	1110	AP	G	D2	1	PB-First Draw
15a	15		1112	AP				
16a	16		1115	AP				
17a	17		1116	AP				
18a	18		1117	AP				
19a	19		1120	AP				
20a	20		1123	AP				
21a	21		1124	AP				
22a	22		1125	AP				
23a	23		1127	AP				
24a	24		1130	AP				
25a	25		1134	AP				
26a	26		1136	AP				

Relinquished by: _____ Received by: _____ Date/Time: _____

Relinquished by: _____ Received by: _____ Date/Time: _____

Relinquished by: _____ Received by: _____ Date/Time: _____

Received by Laboratory in Ballston Spa: [Signature] Date/Time: 4/26/16 2:43

CNA Environmental LLC's mission is to be certified by the New York State Dept. of Health to perform the following analyses:

Potable water: chloride, coliform, color, conductivity, copper, e. Coli, fluoride/lead, nitrate, nitrite, odor, pH, solids (total dissolved), standard plate count, sulfate, turbidity

Non-Potable water: BOD, CBOD, coliform (fecal and total), e. Coli, standard plate count, fluoride, nitrate, nitrite sulfate, pH, solids/settleable and suspended, specific conductance, turbidity

All other analyses will be forwarded to an NYS DOH ELAP/NELAC approved laboratory. CNA reserves the right to use an approved laboratory for any and all analyses in the event that CNA is unable to perform an analysis.

Customer acknowledges and agrees to allow any samples be sent to a sub lab for analysis at the discretion of CNA. Is this acceptable per the client? (Y/N)

CNA USE ONLY

COC Complete: Y N

Temp. Upon Receipt: 19.7°C

Samples were: Ship Hand Drop Properly Preserved Y N

On Ice/Cooling: Y N

Containers Intact: Y N

Labels Match COC: Y N

Method of Payment: Bill

Mailing/Billing Address: _____ Comments: 2 of 3

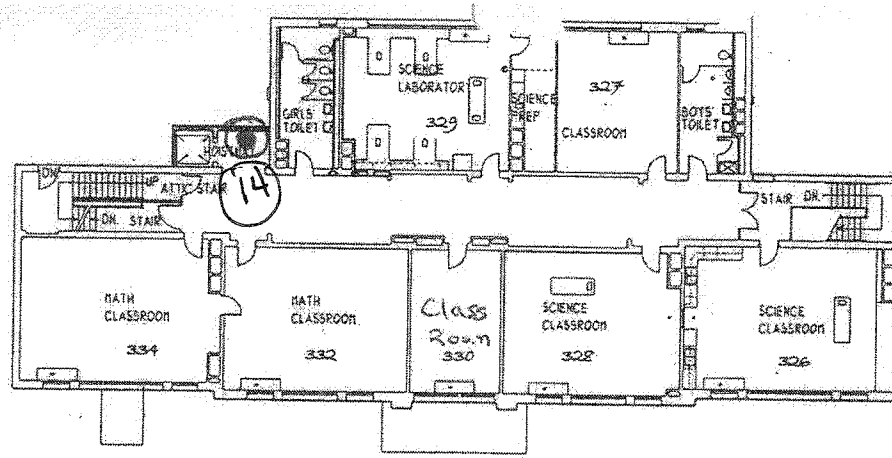
Email: _____

Chlorine Residual (mg/l): _____

Na₂S₂O₃ Used: Y / N

Bolton
Central
School

Sample locations
4-26-16



Mark Sullivan
518 932-4182

Third Floor

2 of 2

● - Sink
⊙ - Water Cooler

