

July 24, 2020

Bobby Purvis
Daphne Utilities Wastewater Dept.
29280 N. Main St
Daphne, AL 36526

RE: Project: Bay Sampling
Pace Project No.: 20163900

Dear Bobby Purvis:

Enclosed are the analytical results for sample(s) received by the laboratory on July 22, 2020. The results relate only to the samples included in this report.

The test results provided in this final report were generated by each of the following laboratories within the Pace Network:

- Pace Analytical Services - Mobile Labs

If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Mary Kathryn Brenner
marykathryn.brenner@pacelabs.com
251-344-9106
Project Manager

Enclosures

cc: Ashley Campbell, City of Daphne
Johnny Grimes, Daphne Utilities

REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
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CERTIFICATIONS

Project: Bay Sampling
Pace Project No.: 20163900

Pace Analytical Services Mobile

4320 Midmost Drive, Mobile, AL 36609
Alabama Certification #: 40810

Florida Certification #: E87977

REPORT OF LABORATORY ANALYSIS

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SAMPLE SUMMARY

Project: Bay Sampling

Pace Project No.: 20163900

Lab ID	Sample ID	Matrix	Date Collected	Date Received
20163900001	Bayfront Park	Water	07/22/20 08:10	07/22/20 11:05
20163900002	Stedman's Landing	Water	07/22/20 08:21	07/22/20 11:05

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SAMPLE ANALYTE COUNT

Project: Bay Sampling

Pace Project No.: 20163900

Lab ID	Sample ID	Method	Analysts	Analytes Reported
20163900001	Bayfront Park	Enterolert/Quanti-Tray	PP1	1
20163900002	Stedman's Landing	Enterolert/Quanti-Tray	PP1	1

PASI-MO = Pace Analytical Services - Mobile Labs

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ANALYTICAL RESULTS

Project: Bay Sampling

Pace Project No.: 20163900

Sample: Bayfront Park		Lab ID: 20163900001	Collected: 07/22/20 08:10	Received: 07/22/20 11:05	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
MOB Enterolert/Quanti-Tray								
Analytical Method: Enterolert/Quanti-Tray Preparation Method: Enterolert/Quanti-Tray								
Pace Analytical Services - Mobile Labs								
Enterococci	97.0	MPN/100mL	10.0	10	07/22/20 12:20	07/23/20 12:20		N2

REPORT OF LABORATORY ANALYSIS

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ANALYTICAL RESULTS

Project: Bay Sampling

Pace Project No.: 20163900

Sample: Stedman's Landing		Lab ID: 20163900002	Collected: 07/22/20 08:21	Received: 07/22/20 11:05	Matrix: Water			
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
MOB Enterolert/Quanti-Tray								
Analytical Method: Enterolert/Quanti-Tray Preparation Method: Enterolert/Quanti-Tray								
Pace Analytical Services - Mobile Labs								
Enterococci	75.0	MPN/100mL	10.0	10	07/22/20 12:20	07/23/20 12:20		N2

REPORT OF LABORATORY ANALYSIS

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QUALITY CONTROL DATA

Project: Bay Sampling

Pace Project No.: 20163900

QC Batch: 193676

Analysis Method: Enterolert/Quanti-Tray

QC Batch Method: Enterolert/Quanti-Tray

Analysis Description: MOB Enterolert/Quanti-Tray

Laboratory: Pace Analytical Services - Mobile Labs

Associated Lab Samples: 20163900001, 20163900002

METHOD BLANK: 896515

Matrix: Water

Associated Lab Samples: 20163900001, 20163900002

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Enterococci	MPN/100mL	ND	1.0	07/23/20 12:20	N2

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

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QUALIFIERS

Project: Bay Sampling

Pace Project No.: 20163900

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

TNTC - Too Numerous To Count

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit - The lowest concentration value that meets project requirements for quantitative data with known precision and bias for a specific analyte in a specific matrix.

S - Surrogate

1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

ANALYTE QUALIFIERS

N2 The lab does not hold NELAC/TNI accreditation for this parameter but other accreditations/certifications may apply. A complete list of accreditations/certifications is available upon request.

REPORT OF LABORATORY ANALYSIS

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QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: Bay Sampling
Pace Project No.: 20163900

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
20163900001	Bayfront Park	Enterolert/Quanti-Tray	193676	Enterolert/Quanti-Tray	193931
20163900002	Stedman's Landing	Enterolert/Quanti-Tray	193676	Enterolert/Quanti-Tray	193931

REPORT OF LABORATORY ANALYSIS

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CHAIN-OF-CUSTODY / Analytical Request
The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields n

MO# : 20163900



20163900

Section A

Required Client Information:
Company: Daphna Utilities Wastewater Dept.
Address: P O Box 2550
Daphne, AL 36526
Email: Sharon@daphnawater.com
Phone: (251)380-8561 Fax:
Requested Due Date:

Section B

Required Project Information:
Report To: Sharon Surra
Copy To:
Purchase Order #:
Project Name: Bay Sampling
Project #:

Section C

Invoice Information:
Attention:
Company Name:
Address:
Pace Project Manager: markkalryn.bremner@pacealabs.com
Pace Profile #: 9456

Regulatory Agency

State / Location

AL

ITEM #	MATRIX	CODE	COLLECTED		DATE	TIME	SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives						Analyses Test	Y/N	Requested Analysis Filtered (Y/N)	Residual Chlorine (Y/N)	SAMPLE CONDITIONS
			START	END					Unpreserved	H2SO4	HNO3	HCl	NaOH	Na2S2O3					
1	Bayfront Park	WT			7/12	0810		1											
2	Lake-Forge Yacht Club	WT			7/12	0811		1											
3	Stedman's Landing	WT			7/12	0821		1											
4																			
5																			
6																			
7																			
8																			
9																			
10																			
11																			
12																			

ADDITIONAL COMMENTS:
SL - Calm water & Birds
BP - Running water & Birds

REINQUISHED BY / AFFILIATION: Franklyn & Grace Demaree

DATE: 7/12

TIME: 1105

ACCEPTED BY / AFFILIATION: MWOJ SM

DATE: 7/12/12

TIME: 1105 29

TEMP in C:

Received on ice (Y/N): Y

Custody Sealed Cooler (Y/N): N

Samples Intact (Y/N): Y

SAMPLER NAME AND SIGNATURE: *Sharon Surra*

PRINT Name of SAMPLER: Sharon Surra

SIGNATURE of SAMPLER: *Sharon Surra*

DATE Signed: 7/12



4320 Midmost Dr Mobile AL 36609

Sample Condition Upon Receipt

Project #:

MO#: 20163900

PM: MKB
 CLIENT: MO-Daphne
 Due Date: 07/31/20

Courier: Pace Client FedEx UPS Other Tracking # _____

Custody Seal on Cooler/Box Present [see COC] Yes No Custody Seals intact Yes No

Thermometer Used: Therm Fisher IR 001 Other

Type of Ice: Wet Blue None

Samples on ice [see COC]

Date and Initials of person examining contents: MKB 7/22/20

Cooler Temperature [see COC]

1	Temperature Blank Present	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
2	Chain of Custody Present	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
3	Chain of Custody Complete	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
4	Chain of Custody Relinquished	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
5	Sampler Name on COC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
6	Short Hold Time Analyses (<72 hr):	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
7	Rush Turn Around Requested:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
8	Samples Arrived within Hold Time:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
9	Sufficient Volume	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
10	Correct Containers Used:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
11	Filtered vol. Rec. for Diss. tests	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
12	Sample Labels match COC:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
13	All containers received within manufacturer's precautionary and/or expiration dates:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
14	All containers needing chemical preservation have been checked (except VOA, micro, & O&G):	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
15	All containers preservation checked found to be in compliance with EPA recommendation:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
16	Headspace in VOA Vials (>6mm):	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A
17	Trip Blank Present:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A

Temp must be measured from temperature blank when present

Client Notification/Resolution:

Person Contacted:

Comments/ Resolution:

Date/Time:



CHAIN-OF-CUSTODY / Analytical Request I
 The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields r

MO# : 20163530

PM: MKB Due Date: 08/17/20
 CLIENT: MO-Mo Co Env

Section A

Required Client Information:

Company: Mobile County Environmental
 Address: 205 Government Street
 Mobile, AL 36610
 Email: whatl@mobilecounty.org
 Phone: (251)281-3135 Fax:
 Requested Due Date:

Section B

Required Project Information:

Report To: Chance Hall
 Copy To:
 Purchase Order #:
 Project Name: Churchhula Toxicity
 Project #:

Section C

Invoice Information:

Attention:
 Company Name:
 Address:
 Pace Quote:
 Pace Project Manager: marykathryn.brenner@pacelabs.com
 Pace Profile #: 8389 5

Regulatory Agency

State / Location
 AL

ITEM #	MATRIX	CODE	COLLECTED		SAMPLE TEMP AT COLLECTION	PRESERVATIVES							Analyses Test	Requested Analysis Filtered (Y/N)	Residual Chlorine (Y/N)	SAMPLE CONDITIONS	
			START DATE	END DATE		Unpreserved	H2SO4	HNO3	HCl	NaOH	Na2S2O3	Methanol					Other
1	Effluent	WT	7/12/10	7/12/10													Flow 4" - 40000 / sec
2																	
3																	
4																	
5																	
6																	
7																	
8																	
9																	
10																	
11																	
12																	

ADDITIONAL COMMENTS

RELINQUISHED BY / AFFILIATION: [Signature] DATE: 7/12/10 TIME: 1105

ACCEPTED BY / AFFILIATION: [Signature] DATE: 7/22/10 TIME: 209

SAMPLER NAME AND SIGNATURE: [Signature] DATE Signed: 7/22

PRINT Name of SAMPLER: [Signature]

SIGNATURE of SAMPLER: [Signature]

TEMP in C

Received on Ice (Y/N)

Custody Sealed Cooler (Y/N)

Samples Intact (Y/N)



4320 Midmost Dr Mobile, AL 36609

Sample Condition Upon Receipt

Project #: 201603530

Courier: Pace Client FedEx UPS Other Tracking # _____

Custody Seal on Cooler/Box Present: [see COC] Custody Seals intact Yes No

Thermometer Used: Therm Fisher IR 001 Other

Type of Ice: Wet Blue None

Samples on ice: [see COC]

Cooler Temperature: [see COC]

Date and initials of person examining contents: NHS 7/22/20

1	Temperature Blank Present:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
2	Chain of Custody Present:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
3	Chain of Custody Complete:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
4	Chain of Custody Relinquished:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
5	Sampler Name on COC:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
6	Short Hold Time Analyses (<72 hr):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
7	Rush Turn Around Requested:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
8	Samples Arrived within Hold Time:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
9	Sufficient Volume:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
10	Correct Containers Used:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
11	Filtered vol. Rec. for Diss. tests:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
12	Sample Labels match COC:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
13	All containers received within manufacturer's precautionary and/or expiration dates:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
14	All containers needing chemical preservation have been checked (except VOA, micro, & O&G):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
15	All containers preservation checked found to be in compliance with EPA recommendation:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	If No, was preservative added? <input type="checkbox"/> Yes <input type="checkbox"/> No If added record lot no.: HNO3 _____ H2SO4 _____
16	Headspace in VOA Vials (>6mm):	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
17	Trip Blank Present:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Temp must be measured from temperature blank when present

Comments

Client Notification/Resolution:

Person Contacted:

Comments/Resolution:

Date/Time: