

November 09, 2020

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

RE: Project: Bay Sampling
Pace Project No.: 20178662

Dear Bobby Purvis:

Enclosed are the analytical results for sample(s) received by the laboratory on November 05, 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

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CERTIFICATIONS

Project: Bay Sampling

Pace Project No.: 20178662

Pace Analytical Services Mobile

4320 Midmost Drive, Mobile, AL 36609

Alabama Certification #: 40810

Florida Certification #: E87977

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SAMPLE SUMMARY

Project: Bay Sampling

Pace Project No.: 20178662

Lab ID	Sample ID	Matrix	Date Collected	Date Received
20178662001	Bayfront Park	Water	11/05/20 13:20	11/05/20 13:20

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SAMPLE ANALYTE COUNT

Project: Bay Sampling

Pace Project No.: 20178662

Lab ID	Sample ID	Method	Analysts	Analytes Reported
20178662001	Bayfront Park	Enterolert/Quanti-Tray	PP1	1

PASI-MO = Pace Analytical Services - Mobile Labs

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ANALYTICAL RESULTS

Project: Bay Sampling

Pace Project No.: 20178662

Sample: Bayfront Park		Lab ID: 20178662001	Collected: 11/05/20 13:20	Received: 11/05/20 13:20	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	63.0	MPN/100mL	10.0	10	11/05/20 14:07	11/06/20 14:07		N2

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QUALITY CONTROL DATA

Project: Bay Sampling

Pace Project No.: 20178662

QC Batch: 206216

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: 20178662001

METHOD BLANK: 964825

Matrix: Water

Associated Lab Samples: 20178662001

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Enterococci	MPN/100mL	ND	1.0	11/06/20 14:07	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.: 20178662

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.

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QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: Bay Sampling

Pace Project No.: 20178662

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
20178662001	Bayfront Park	Enterolert/Quanti-Tray	206216	Enterolert/Quanti-Tray	206322

REPORT OF LABORATORY ANALYSIS

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Section A Required Client Information		Section B Required Project Information		Section C Invoice Information	
Company: Daphne	Report To:	Copy To:	Company Name:	Attention:	REGULATORY AGENCY
Address:	Purchase Order No.:	Address:	Address:	Address:	NPDES <input type="checkbox"/> GROUND WATER <input type="checkbox"/> DRINKING WATER
Email To:	Project Name: Bay Samples	Page Quote Reference	Page Project Manager	Page Profile #	UST <input type="checkbox"/> RCRA <input type="checkbox"/> OTHER <input type="checkbox"/>
Phone:	Project Number:	Requested Due Date/TAT:	Requested Analysis Filtered (Y/N)	Site Location STATE:	

ITEM #	Section D Required Client Information	Valid Matrix Codes MATRIX CODE	MATRIX CODE (see valid codes to left)	SAMPLE TYPE (G=GRAB C=COMP)	COLLECTED		SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives	Analysis Test	Requested Analysis Filtered (Y/N)	Residual Chlorine (Y/N)	Pace Project No./ Lab I.D.
					COMPOSITE START	COMPOSITE END/DRAW							
1	Bayfront Park				DATE	TIME	DATE	TIME					
2							11/5/20	1320		X			
3													
4													
5													
6													
7													
8													
9													
10													
11													
12													

ADDITIONAL COMMENTS		REIMBURSED BY / AFFILIATION		DATE		TIME		ACCEPTED BY / AFFILIATION		DATE		TIME		SAMPLE CONDITIONS	
BP - 0 Birds / Low level		Bryley		11/5/20		1320		Waldy		11/5		1320		Y N Y	
SAMPLER NAME AND SIGNATURE															
PRINT Name of SAMPLER:				Bryley Skipper-Deanna				DATE Signed (MM/DD/YY):				11/5/20			
SIGNATURE of SAMPLER:				<i>[Signature]</i>											
Temp in °C								Received on Ice (Y/N)							
Custody Sealed Cooler (Y/N)								Samples Intact (Y/N)							

*Important Note: By signing this form you are accepting Pace's NET 30 day payment terms and agreeing to late charges of 1.5% per month for any invoices not paid within 30 days.
F-ALL-Q-020rev 08, 12-Oct-2007



4320 Midmost Dr. Mobile AL 36609

Project #:

Sample Condition Upon Receipt

PM: MKB CLIENT: MO-Daphne Due Date: 11/16/20

MO#: 20178662

Courier: Face Client FedEx UPS Other Tracking # _____

Custody Seal on Cooler/Box Present [see COC] 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: MKS IIIIS

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	If No, was preservative added? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If added record lot no.: HNO3 H2SO4
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	

Client Notification/Resolution:

Person Contacted

Date/Time:

Comments/Resolution