

July 20, 2021

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

RE: Project: Bay Sampling 7/19/21
Pace Project No.: 20214935

Dear Bobby Purvis:

Enclosed are the analytical results for sample(s) received by the laboratory on July 19, 2021. 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: Eric Butler, Daphne Utilities
Ashley Campbell, City of Daphne
Johnny Grimes, Daphne Utilities
Tim White, Daphne Utilities

REPORT OF LABORATORY ANALYSIS

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

Project: Bay Sampling 7/19/21

Pace Project No.: 20214935

Pace Analytical Services Mobile

4320 Midmost Drive, Mobile, AL 36609

Alabama Certification #: 40810

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SAMPLE SUMMARY

Project: Bay Sampling 7/19/21

Pace Project No.: 20214935

Lab ID	Sample ID	Matrix	Date Collected	Date Received
20214935001	Bayfront Park	Water	07/19/21 08:15	07/19/21 11:00
20214935002	Lake Forest Yacht Club	Water	07/19/21 08:00	07/19/21 11:00
20214935003	Stedman's Landing	Water	07/19/21 08:30	07/19/21 11:00

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SAMPLE ANALYTE COUNT

Project: Bay Sampling 7/19/21

Pace Project No.: 20214935

Lab ID	Sample ID	Method	Analysts	Analytes Reported
20214935001	Bayfront Park	Enterolert/Quanti-Tray	PP1	1
20214935002	Lake Forest Yacht Club	Enterolert/Quanti-Tray	PP1	1
20214935003	Stedman's Landing	Enterolert/Quanti-Tray	PP1	1

PASI-MO = Pace Analytical Services - Mobile Labs

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ANALYTICAL RESULTS

Project: Bay Sampling 7/19/21

Pace Project No.: 20214935

Sample: Bayfront Park		Lab ID: 20214935001	Collected: 07/19/21 08:15	Received: 07/19/21 11:00	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	20.0	MPN/100mL	10.0	10	07/19/21 11:15	07/20/21 11:15		N2

Sample: Lake Forest Yacht Club		Lab ID: 20214935002	Collected: 07/19/21 08:00	Received: 07/19/21 11:00	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	52.0	MPN/100mL	10.0	10	07/19/21 11:15	07/20/21 11:15		N2

Sample: Stedman's Landing		Lab ID: 20214935003	Collected: 07/19/21 08:30	Received: 07/19/21 11:00	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	173	MPN/100mL	10.0	10	07/19/21 11:15	07/20/21 11:15		N2

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QUALITY CONTROL DATA

Project: Bay Sampling 7/19/21

Pace Project No.: 20214935

QC Batch: 231457

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: 20214935001, 20214935002, 20214935003

METHOD BLANK: 1088702

Matrix: Water

Associated Lab Samples: 20214935001, 20214935002, 20214935003

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Enterococci	MPN/100mL	ND	1.0	07/20/21 11:15	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 7/19/21

Pace Project No.: 20214935

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 7/19/21

Pace Project No.: 20214935

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
20214935001	Bayfront Park	Enterolert/Quanti-Tray	231457	Enterolert/Quanti-Tray	231567
20214935002	Lake Forest Yacht Club	Enterolert/Quanti-Tray	231457	Enterolert/Quanti-Tray	231567
20214935003	Stedman's Landing	Enterolert/Quanti-Tray	231457	Enterolert/Quanti-Tray	231567

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20214935

Section A

Required Client Information:
 Company: Dapine Utilities Wd Inc. Water Dept.
 Address: P O Box 2550
 Dapine AL 36526
 Email: Sharon@dapineutil.com
 Phone: (251)380-4561
 Requested Due Date:

Section B

Required Project Information:
 Project No: Sharon Suda
 City: AL
 State: AL

Section C

Invoice Information:
 Invoice No: 20214935
 Invoice Date: 7/19/21
 Invoice Amount: \$1,100.00
 Requested Analysis Price: \$110.00

Regulatory Agency: AL
State / Location: AL

ITEM #	SAMPLE ID One Character per Box (A-Z, 0-9) Sample IDs must be unique	DATE	TIME	ANALYSES TEST	Y/N	PRESERVATION		DATE	TIME	SAMPLE CONDITIONS
						TEMP	TIME			
1	Bayfront Park	7/19/21	0815							
2	Lane Forest Yacht Club	7/19/21	0800							
3	Starchin's Landing	7/19/21	0830							
4										
5										
6										
7										
8										
9										
10										
11										
12										

ADDITIONAL COMMENTS	RELINQUISHED BY / AFFILIATION	DATE	TIME	ACCEPTED BY / AFFILIATION	DATE	TIME	SAMPLE CONDITIONS
LF - 15 Birds	High Tide	7/19/21	1100	Sharon Suda	7/19/21	1100	Y N Y
BD - 2 Birds	Sharon Suda	7/19/21	1100	Sharon Suda	7/19/21	1100	Y N Y
SL - 8 Birds	Sharon Suda	7/19/21	1100	Sharon Suda	7/19/21	1100	Y N Y

SAMPLER NAME AND SIGNATURE
 PRINT NAME OF SAMPLER: Sharon Suda
 SIGNATURE OF SAMPLER: *[Signature]*
 DATE SIGNED: 7/19/21



Sample Condition Upon Receipt

4320 Midmost Dr Mobile, AL 36609

WO#: 20214935

PM: MKB Due Date: 07/28/21
CLIENT: M0-Daphne

Project #: _____

Courier: Pace Client FedEx UPS Other Tracking # _____

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

Thermometer Used:	<input checked="" type="checkbox"/> Therm Fisher IR 001
	<input type="checkbox"/> Other:

Type of Ice: Wet Blue None

Samples on ice: [see COC]

Cooler Temperature: [see COC]

Date and Initials of person examining contents: MAS 7/19/21

Temp must be measured from temperature blank when present Comments:

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

Client Notification/Resolution:

Person Contacted: _____ Date/Time: _____

Comments/ Resolution: _____