



November 28, 2023

Andrew Schuck
Dundee Central School District
55 Water Street

Dundee, NY 14837

RE: Project: LEAD RE-TESTING (2 SAMP) 11/16
Pace Project No.: 70278109

Dear Andrew Schuck:

Enclosed are the analytical results for sample(s) received by the laboratory on November 17, 2023. The results relate only to the samples included in this report. Results reported herein conform to the applicable TNI/NELAC Standards and the laboratory's Quality Manual, where applicable, unless otherwise noted in the body of the report.

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

- Pace Analytical Services - Melville

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

Sincerely,

A handwritten signature in cursive script that reads "Daniel H. Bonitto".

Daniel H. Bonitto
daniel.bonitto@pacelabs.com
516-370-6000
Project Manager

Enclosures



REPORT OF LABORATORY ANALYSIS

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CERTIFICATIONS

Project: LEAD RE-TESTING (2 SAMP) 11/16

Pace Project No.: 70278109

Pace Analytical Services Long Island

575 Broad Hollow Rd, Melville, NY 11747

Connecticut Certification #: PH-0435

Delaware Certification # NY 10478

Maryland Certification #: 208

Massachusetts Certification #: M-NY026

New Hampshire Certification #: 2987

New Jersey Certification #: NY158

New York Certification #: 10478 Primary Accrediting Body

Pennsylvania Certification #: 68-00350

Rhode Island Certification #: LAO00340

Virginia Certification # 460302

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ANALYTICAL RESULTS

Project: LEAD RE-TESTING (2 SAMP) 11/16

Pace Project No.: 70278109

Sample: 114		Lab ID: 70278109001		Collected: 11/16/23 06:20	Received: 11/17/23 10:05	Matrix: Drinking Water		
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS Drinking Water		Analytical Method: EPA 200.8 Pace Analytical Services - Melville						
Lead	<1.0	ug/L	1.0	1		11/27/23 14:43	7439-92-1	

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ANALYTICAL RESULTS

Project: LEAD RE-TESTING (2 SAMP) 11/16

Pace Project No.: 70278109

Sample: 143		Lab ID: 70278109002		Collected: 11/16/23 06:23	Received: 11/17/23 10:05	Matrix: Drinking Water		
Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
200.8 MET ICPMS Drinking Water		Analytical Method: EPA 200.8 Pace Analytical Services - Melville						
Lead	2.5	ug/L	1.0	1		11/27/23 14:45	7439-92-1	

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QUALITY CONTROL DATA

Project: LEAD RE-TESTING (2 SAMP) 11/16

Pace Project No.: 70278109

QC Batch: 328785

Analysis Method: EPA 200.8

QC Batch Method: EPA 200.8

Analysis Description: 200.8 MET No Prep Drinking Water

Laboratory: Pace Analytical Services - Melville

Associated Lab Samples: 70278109001, 70278109002

METHOD BLANK: 1682428

Matrix: Water

Associated Lab Samples: 70278109001, 70278109002

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Lead	ug/L	<1.0	1.0	11/27/23 13:54	

LABORATORY CONTROL SAMPLE: 1682429

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Lead	ug/L	50	47.3	95	85-115	

MATRIX SPIKE SAMPLE: 1682431

Parameter	Units	70278362003 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Lead	ug/L	3.8	50	52.9	98	70-130	

MATRIX SPIKE SAMPLE: 1682433

Parameter	Units	70278362004 Result	Spike Conc.	MS Result	MS % Rec	% Rec Limits	Qualifiers
Lead	ug/L	3.7	50	52.0	97	70-130	

SAMPLE DUPLICATE: 1682430

Parameter	Units	70278362003 Result	Dup Result	RPD	Qualifiers
Lead	ug/L	3.8	3.9	2	

SAMPLE DUPLICATE: 1682432

Parameter	Units	70278362004 Result	Dup Result	RPD	Qualifiers
Lead	ug/L	3.7	2.5	39 D6	

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: LEAD RE-TESTING (2 SAMP) 11/16

Pace Project No.: 70278109

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.

Reported results are not rounded until the final step prior to reporting. Therefore, calculated parameters that are typically reported as "Total" may vary slightly from the sum of the reported component parameters.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAC Institute.

ANALYTE QUALIFIERS

D6 The precision between the sample and sample duplicate exceeded laboratory control limits.

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QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: LEAD RE-TESTING (2 SAMP) 11/16

Pace Project No.: 70278109

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
70278109001	114	EPA 200.8	328785		
70278109002	143	EPA 200.8	328785		

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Pace
 Pace Analytical Long Island NY
 575 Broad Hollow Rd, Melville, NY 11747

CHAIN-OF-CUSTODY Analytical Request Document
 Chain-of-Custody is a LEGAL DOCUMENT - Complete all relevant fields

LAB USE ONLY - ARIK Waford
WO#: 70278109



Company Name: Dundee Central School District
Street Address: 55 Water Street, Dundee, NY 14837

Contact/Report To: Schuck, Andrew
Phone #: (607) 243-5533
E-Mail: aschuck@dundeecs.org
Cc E-Mail:

Customer Project #: Lead Re-Testing (2 Samples)

Project Name: Rm 222 Sink 1
 Rm 454 Sink

Invoice To: Sharon Crans
Invoice E-Mail: Scrans@dundeecs.org
Purchase Order # (if applicable): 240236
Quote #:

Time Zone Collected: [] AK [] PT [] MT [] CT [] ET New York

Data Deliverables:

[] Level II [] Level III [] Level IV
 [] EQUIS
 [] Other

Rush (Pre-approval required): DW PWSID # or WW Permit # as applicable:
 [] 2 Day [] 3 day [] 5 day [] Other

Date Results Requested: Field Filtered (if applicable): [] Yes [] No

* Matrix Codes (Insert in Matrix box below): Drinking Water (DW), Ground Water (GW), Waste Water (WW), Product (P), Soil/Solid (SS), Oil (OL), Wipe (WP), Tissue (TS), Bioassay (B), Vapor (V), Other (OT), Surface Water (SW), Sediment (SED), Sludge (SL), Caulk

Customer Sample ID	Matrix *	Comp / Grab	Collected (or Composite Start)		Composite End		Res. CL2	Number & Type of Containers		200g (Lead) ↓	Preservation non-conformance identified for sample
			Date	Time	Date	Time		Plastic	Glass		
114	DW	G	11/16/23	6:20am				1			
143	DW	G	11/16/23	6:23am				1			

Customer Remarks / Special Conditions / Possible Hazards:

Collected By: Andrew Schuck
 Printed Name: Andrew Schuck
 Signature: [Signature]

Received by/Company (Signature): [Signature]
 Date/Time: 11/17/23 10:05

Received by/Company (Signature): [Signature]
 Date/Time: []

Received by/Company (Signature): [Signature]
 Date/Time: []

Received by/Company (Signature): [Signature]
 Date/Time: []

Received by/Company (Signature): [Signature]
 Date/Time: []

Additional Instructions from Pace:

Coolers: THAIX
 Thermometer ID: THAIX
 Correction Factor (°C): -0.3
 Obs Temp (°C): 16.5
 Corrected Temp (°C): 16.8

Tracing Number: 110794302059

Delivered by: [] In-Person [] Courier
 FedEx [] UPS [] Other

Date/Time: 11/17/23 10:05

Date/Time: []

Date/Time: []

Date/Time: []

WO#: 70278109

PM: DHB Due Date: 12/05/23
CLIENT: DCSD

Client Name: Dunbar central school district Project # _____

Courier: Fed Ex UPS USPS Client Commercial Parcel Other

Tracking #: 7107 9430 2059

Custody Seal on Cooler/Box Present: Yes No Seals intact: Yes No Temperature Blank Present: Yes No
 Packing Material: Bubble Wrap Bubble Bags Ziplo Non Other Type of Ice: Wet Blue None

Thermometer Used: T448 Correction Factor: +0.3 Samples on ice, cooling process has begun
 Cooler Temperature(°C): 16.5 Cooler Temperature Corrected(°C): 16.2 Date/Time 5035A kits placed in freezer _____

Temp should be above freezing to 6.0°C

USDA Regulated Soil N/A, water sample)

Did samples originate in a quarantine zone within the United States: AL, AR, CA, FL, GA, ID, LA, MS, NC, NM, NY, OK, OR, SC, TN, TX, or VA (check map)? Yes No

Did samples originate from a foreign source including Hawaii and Puerto Rico? Yes No

If Yes to either question, fill out a Regulated Soil Checklist (ENV-FRM-MELV-0076) and include with SCUR/COC paperwork.

Date and Initials of person examining contents: MMA 11/14/23

	COMMENTS:
Chain of Custody Present: <input type="checkbox"/> Yes <input type="checkbox"/> No	1.
Chain of Custody Filled Out: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	2.
Chain of Custody Relinquished: <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	3.
Sampler Name & Signature on COC: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	4.
Samples Arrived within Hold Time: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	5.
Short Hold Time Analysis (<72hr): <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	6.
Rush Turn Around Time Requested <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	7.
Sufficient Volume: (Triple volume provided for MS/MSD) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	8.
Correct Containers Used: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	9.
-Pace Containers Used: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	10.
Containers Intact: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	10.
Filtered volume received for Dissolved tests <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11. Note: if sediment is visible in the dissolved container.
Sample Labels match COC: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	12.
-Includes date/time/ID/Analysis Matrix: SL WT OIL OTHER	

Date and Initials of person checking preservation: MMA 11/17/23

All containers needing preservation have been pH paper Lot # <u>227822</u> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	13. <input type="checkbox"/> HNO ₃ <input type="checkbox"/> H ₂ SO ₄ <input type="checkbox"/> NaOH <input type="checkbox"/> HCl
All containers needing preservation are found to be in compliance with method recommendation? (HNO ₃ , H ₂ SO ₄ , HCl, NaOH>9 Sulfide, NAOH>12 Cyanide) <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Sample #
Exceptions: VOA, Coliform, TOC/DOC, Oil and Grease, DRO/8015 (water). Per Method, VOA pH is checked after analysis	Initial when completed: _____ Lot # of added preservative: _____ Date/Time preservative added: _____
Samples checked for dechlorination: KI starch test strips Lot # <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	14. Positive for Res. Chlorine? Y N
Residual chlorine strips Lot # <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	15. Positive for Sulfide? Y N
SM 4500 CN samples checked for sul <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	16.
Lead Acetate Strips Lot # <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	17.
Headspace in VOA Vials (>6mm): <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Trip Blank Present: <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Trip Blank Custody Seals Present <input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	

DATE AND INITIALS OF PERSON COMPLETING SECOND REVIEW: AS 11/17/23

Client Notification/ Resolution: _____ Field Data Required? Y / N
 Person Contacted: _____ Date/Time: _____
 Comments/ Resolution: _____

* PM (Project Manager) review is documented electronically in LIMS.