



Microbac Laboratories, Inc. - Massachusetts

CERTIFICATE OF ANALYSIS

W6G0692

HOLLAND BOARD OF HEALTH

Project Name: COLLETTE DRIVE

Dave Kowalski
27 STURBRIDGE ROAD
HOLLAND, MA 01521

Project / PO Number: N/A
Received: 07/25/2016 12:30
Reported: 07/26/2016 10:45

Analytical Testing Parameters

Client Sample ID: COLLETTE DRIVE BEACH
Lab Sample ID: W6G0692-01
Sample Type: Grab

Collected By: Tom Baltazar
Collection Date: 07/25/16
Collection Time: 09:21

Table with 8 columns: Microbiology, Result, PQL, Units, Note, Prepared, Analyzed, Lab. Row 1: Method: SM9223 B-1997, Escherichia coli, 14, 1.0, MPN/100 mL, 07/25/16 1530, 07/26/16 1010, MASS

Laboratory

MASS: Microbac Laboratories, Inc. - Massachusetts

Definitions

PQL: Practical Quantitation Limit

Cooler Receipt Log

Cooler ID: Default Cooler Temp: 13.1°C

Cooler Inspection Checklist

Checklist table with 4 columns: Item, Yes, Item, Yes. Items include Custody Seals Intact, COC/Labels Agree, Received on Ice.

Project Requested Certification(s)

Microbac Laboratories, Inc. - Massachusetts
M-MA003

Massachusetts Department of Environmental Protection

Report Comments

Samples were received in proper condition and the reported results conform to applicable accreditation standard unless otherwise noted.

Reviewed and Approved By:

Elizabeth Sjogren
Technician
07/26/2016 10:45

Go Green: Contact Elizabeth Sjogren to set up email reporting and invoicing options.

The data and information on this, and other accompanying documents, represents only the sample(s) analyzed. This report is incomplete unless all pages indicated in the footnote are present and an authorized signature is included.



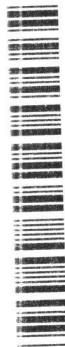
Microbac Laboratories, Inc.

CHAIN OF CUSTODY FORM

100 Barber Avenue • Worcester MA 01606

Tel: (508) 595-0010 • Fax: (508) 595-0008

Lab W/O #:



WVCC0602

E-Mail Copy of Report To

Billing Information

CUSTOMER: TOWN OF HOLLAND BOH  
 ADDRESS: 27 STURBRIDGE ROAD  
HOLLAND, MA 01521

DELIVERY: TOM BALTAZAR  
 E-MAIL: TAZAR1@HOTMAIL.COM  
 PHONE: 508-245-2525 Fax:

PURCHASE ORDER #  
 ATTENTION: DAVE KOWALSKI  
 PHONE: 413-245-7108 X112

Sample Identification	Date Collected	Time Collected	Sample Type		Number of Bottles	Analysis	Preservatives							
			COMPOSITE	GRAB			H <sub>2</sub> SO <sub>4</sub>	HCL	HNO <sub>3</sub>	NON-PRES	Mixed			
① MASSACONET SHORES	07-25-16	08:48												
② CRAIG ROAD BEACH		09:05												
③ COLLETTE DRIVE BEACH		09:21												
④ HOLLAND POND		09:42												
⑤ BRANDON ROAD		10:03												
PLEASE E-MAIL EACH TEST ON ONE PAGE														

TURNAROUND (INDICATE IN CALENDAR DAYS):  
 FAX  HARD COPY  E-MAIL

EXPEDITED SERVICE MAY BE SUBJECT TO SURCHARGE

COMMENTS:

CONDITIONS UPON RECEIPT: (CHECK ONE) COMPLIANT   
 COOLED  AMBIENT  13.1 °C Upon Receipt at lab

CUSTOMER: Tom Baltazar  
 RECEIVED: 7/25/16 1:30  
 LINQUISHED:  
 RECEIVED:  
 LINQUISHED:  
 RECEIVED:

DATE: 07-25-16  
 TIME: 1:30

Page 2 of 2