Garden State Laboratories, Inc.

Bacteriological and Chemical Testing

410 Hillside Avenue
Hillside, New Jersey 07205

Mathew Klein, M.S., Founder (1916-1996)
Harvey Klein, M.S., Laboratory Director

Toll Free 800-273-8901
Telephone 908-688-8900
Fax 908-688-8966
email: info@gslabs.com
Internet: www.gslabs.com

REPORT OF ANALYSIS

REPORT # 370412006.0
CLIENT # SCI09
DATE SUBMITTED: 4/12/17

TO: Scientific Water Conditioning
515 Pennsylvania Ave.

Linden NJ 07036
ATT: Andrew Lewin

SAMPLE TYPE: WATER, GRAB SAMPLE
SAMPLE ID: #1
SAMPLE LOCATION: GIRLS LOCKER ROOM(F), SOUTH BOUND BROOK ELEMENTRY SCHOOL

DATE SAMPLED: 4/12/17 TIME SAMPLED: 08:10

ANALYSIS	RESULT	UNITS	MCL	DATE ANALYZED
Lead	9.3	ug/l	15	4/13/17-14:
Analytical Method	EPA 200.9			
Reporting Limit, ug/l	1.0			
Dilution Factor	None			
Digested (Y/N)	No			

< = less than, not detected. Method Detection Limits and Reporting Limits available at www.gslabs.com/certnjdep.html
MCL = Maximum Contaminant Level allowed by State and Federal regulations.

Harvey Klein

306907

The liability of Garden State Laboratories, Inc. for services rendered shall in no event exceed the amount of the invoice.
Certified by NJ Dept. of Health, NJDEP #20044, NY Dept. of Health #11550 and PADEP #68-03680.

Garden State Laboratories, Inc.

Bacteriological and Chemical Testing

410 Hillside Avenue
Hillside, New Jersey 07205

Mathew Klein, M.S., Founder (1916-1996)
Harvey Klein, M.S., Laboratory Director

Toll Free 800-273-8901
Telephone 908-688-8900
Fax 908-688-8966
email: info@gslabs.com
Internet: www.gslabs.com

REPORT OF ANALYSIS

REPORT # 370412007.0
CLIENT # SCI09
DATE SUBMITTED: 4/12/17

TO: Scientific Water Conditioning
515 Pennsylvania Ave.

Linden NJ 07036
ATT: Andrew Lewin

SAMPLE TYPE: WATER, GRAB SAMPLE
SAMPLE ID: #2
SAMPLE LOCATION: BOYS LOCKER ROOM(F), SOUTH BOUND BROOK ELEMENTRY SCHOOL

DATE SAMPLED: 4/12/17 TIME SAMPLED: 08:12

ANALYSIS	RESULT	UNITS	MCL	DATE ANALYZED
Lead	<1.0	ug/l	15	4/13/17-14:29
Analytical Method	EPA 200.9			
Reporting Limit, ug/l	1.0			
Dilution Factor	None			
Digested (Y/N)	No			

< = less than, not detected. Method Detection Limits and Reporting Limits available at www.gslabs.com/certnjdep.html
MCL = Maximum Contaminant Level allowed by State and Federal regulations.

Harvey Klein
306907

The liability of Garden State Laboratories, Inc. for services rendered shall in no event exceed the amount of the invoice.
Certified by NJ Dept. of Health, NJDEP #20044, NY Dept. of Health #11550 and PADEP #68-03680.

Garden State Laboratories, Inc.

Bacteriological and Chemical Testing

410 Hillside Avenue
Hillside, New Jersey 07205

Mathew Klein, M.S., Founder (1916-1996)
Harvey Klein, M.S., Laboratory Director

Toll Free 800-273-8901
Telephone 908-688-8900
Fax 908-688-8966
email: info@gslabs.com
Internet: www.gslabs.com

REPORT OF ANALYSIS

REPORT # 370412009.0
CLIENT # SCI09
DATE SUBMITTED: 4/12/17

TO: Scientific Water Conditioning
515 Pennsylvania Ave.

Linden NJ 07036
ATT: Andrew Lewin

SAMPLE TYPE: WATER, GRAB SAMPLE
SAMPLE ID: #4
SAMPLE LOCATION: KITCHEN SINK, SOUTH BOUND BROOK ELEMENTRY SCHOOL

DATE SAMPLED: 4/12/17 TIME SAMPLED: 08:45

ANALYSIS	RESULT	UNITS	MCL	DATE ANALYZED
Lead	<1.0	ug/l	15	4/13/17-14:32
Analytical Method	EPA 200.9			
Reporting Limit, ug/l	1.0			
Dilution Factor	None			
Digested (Y/N)	No			

< = less than, not detected. Method Detection Limits and Reporting Limits available at www.gslabs.com/certnjdep.html
MCL = Maximum Contaminant Level allowed by State and Federal regulations.

Harvey Klein

306907

The liability of Garden State Laboratories, Inc. for services rendered shall in no event exceed the amount of the invoice.
Certified by NJ Dept. of Health, NJDEP #20044, NY Dept. of Health #11550 and PADEP #68-03680.

Garden State Laboratories, Inc.

Bacteriological and Chemical Testing

410 Hillside Avenue
Hillside, New Jersey 07205

Mathew Klein, M.S., Founder (1916-1996)
Harvey Klein, M.S., Laboratory Director

Toll Free 800-273-8901
Telephone 908-688-8900
Fax 908-688-8966
email: info@gslabs.com
Internet: www.gslabs.com

REPORT OF ANALYSIS

REPORT # 370412010.0
CLIENT # SCI09
DATE SUBMITTED: 4/12/17

TO: Scientific Water Conditioning
515 Pennsylvania Ave.

Linden NJ 07036
ATT: Andrew Lewin

SAMPLE TYPE: WATER, GRAB SAMPLE
SAMPLE ID: #5
SAMPLE LOCATION: ICE MAKER, SOUTH BOUND BROOK ELEMENTRY SCHOOL

DATE SAMPLED: 4/12/17 TIME SAMPLED: 08:12

ANALYSIS	RESULT	UNITS	MCL	DATE ANALYZED
Lead	14.0	ug/l	15	4/13/17-14:35
Analytical Method	EPA 200.9			
Reporting Limit, ug/l	1.0			
Dilution Factor	None			
Digested (Y/N)	No			

< = less than, not detected. Method Detection Limits and Reporting Limits available at www.gslabs.com/certnjdep.html
MCL = Maximum Contaminant Level allowed by State and Federal regulations.

Harvey Klein
306907

The liability of Garden State Laboratories, Inc. for services rendered shall in no event exceed the amount of the invoice.
Certified by NJ Dept. of Health, NJDEP #20044, NY Dept. of Health #11550 and PADEP #68-03680.

Garden State Laboratories, Inc.

Bacteriological and Chemical Testing

410 Hillside Avenue
Hillside, New Jersey 07205

Mathew Klein, M.S., Founder (1916-1996)
Harvey Klein, M.S., Laboratory Director

Toll Free 800-273-8901
Telephone 908-688-8900
Fax 908-688-8966
email: info@gslabs.com
Internet: www.gslabs.com

REPORT OF ANALYSIS

REPORT # 370412012.0
CLIENT # SCI09
DATE SUBMITTED: 4/12/17

TO: Scientific Water Conditioning
515 Pennsylvania Ave.

Linden NJ 07036
ATT: Andrew Lewin

SAMPLE TYPE: WATER, GRAB SAMPLE
SAMPLE ID: #8
SAMPLE LOCATION: STORAGE FOUNTAIN, SOUTH BOUND BROOK ELEMENTRY SCHOOL

DATE SAMPLED: 4/12/17 TIME SAMPLED: AM

ANALYSIS	RESULT	UNITS	MCL	DATE ANALYZED
Lead	<1.0	ug/l	15	4/13/17-14:44
Analytical Method	EPA 200.9			
Reporting Limit, ug/l	1.0			
Dilution Factor	None			
Digested (Y/N)	No			

< = less than, not detected. Method Detection Limits and Reporting Limits available at www.gslabs.com/certnjdep.html
MCL = Maximum Contaminant Level allowed by State and Federal regulations.

Harvey Klein
306907

The liability of Garden State Laboratories, Inc. for services rendered shall in no event exceed the amount of the invoice.
Certified by NJ Dept. of Health, NJDEP #20044, NY Dept. of Health #11550 and PADEP #68-03680.

Garden State Laboratories, Inc.

Bacteriological and Chemical Testing

410 Hillside Avenue
Hillside, New Jersey 07205

Mathew Klein, M.S., Founder (1916-1996)
Harvey Klein, M.S., Laboratory Director

Toll Free 800-273-8901
Telephone 908-688-8900
Fax 908-688-8966
email: info@gslabs.com
Internet: www.gslabs.com

REPORT OF ANALYSIS

REPORT # 370412013.0
CLIENT # SCI09
DATE SUBMITTED: 4/12/17

TO: Scientific Water Conditioning
515 Pennsylvania Ave.

Linden NJ 07036
ATT: Andrew Lewin

SAMPLE TYPE: WATER, GRAB SAMPLE
SAMPLE ID: #9
SAMPLE LOCATION: ROOM 143 FOUNTAIN, SOUTH BOUND BROOK ELEMENTRY SCHOOL

DATE SAMPLED: 4/12/17 TIME SAMPLED: AM

ANALYSIS	RESULT	UNITS	MCL	DATE ANALYZED
Lead	<1.0	ug/l	15	4/13/17-14:46
Analytical Method	EPA 200.9			
Reporting Limit, ug/l	1.0			
Dilution Factor	None			
Digested (Y/N)	No			

< = less than, not detected. Method Detection Limits and Reporting Limits available at www.gslabs.com/certnjdep.html
MCL = Maximum Contaminant Level allowed by State and Federal regulations.

Harvey Klein
306907

The liability of Garden State Laboratories, Inc. for services rendered shall in no event exceed the amount of the invoice.
Certified by NJ Dept. of Health, NJDEP #20044, NY Dept. of Health #11550 and PADEP #68-03680.

Garden State Laboratories, Inc.

Bacteriological and Chemical Testing

410 Hillside Avenue
Hillside, New Jersey 07205

Mathew Klein, M.S., Founder (1916-1996)
Harvey Klein, M.S., Laboratory Director

Toll Free 800-273-8901
Telephone 908-688-8900
Fax 908-688-8966
email: info@gslabs.com
Internet: www.gslabs.com

REPORT OF ANALYSIS

REPORT # 370412015.0
CLIENT # SCI09
DATE SUBMITTED: 4/12/17

TO: Scientific Water Conditioning
515 Pennsylvania Ave.

Linden NJ 07036
ATT: Andrew Lewin

SAMPLE TYPE: WATER, GRAB SAMPLE
SAMPLE ID: #11
SAMPLE LOCATION: NURSE'S OFFICE, ROOM 109, SOUTH BOUND BROOK ELEMENTRY SCHOOL

DATE SAMPLED: 4/12/17 TIME SAMPLED:

ANALYSIS	RESULT	UNITS	MCL	DATE ANALYZED
Lead	<1.0	ug/l	15	4/13/17-14:58
Analytical Method	EPA 200.9			
Reporting Limit, ug/l	1.0			
Dilution Factor	None			
Digested (Y/N)	No			

< = less than, not detected. Method Detection Limits and Reporting Limits available at www.gslabs.com/certnjdep.html
MCL = Maximum Contaminant Level allowed by State and Federal regulations.

Harvey Klein
306907

The liability of Garden State Laboratories, Inc. for services rendered shall in no event exceed the amount of the invoice.
Certified by NJ Dept. of Health, NJDEP #20044, NY Dept. of Health #11550 and PADEP #68-03680.

Garden State Laboratories, Inc.

Bacteriological and Chemical Testing

410 Hillside Avenue
Hillside, New Jersey 07205

Mathew Klein, M.S., Founder (1916-1996)
Harvey Klein, M.S., Laboratory Director

Toll Free 800-273-8901
Telephone 908-688-8900
Fax 908-688-8966
email: info@gslabs.com
Internet: www.gslabs.com

REPORT OF ANALYSIS

REPORT # 370412016.0
CLIENT # SCI09
DATE SUBMITTED: 4/12/17

TO: Scientific Water Conditioning
515 Pennsylvania Ave.

Linden NJ 07036
ATT: Andrew Lewin

SAMPLE TYPE: WATER, GRAB SAMPLE
SAMPLE ID: #12
SAMPLE LOCATION: FOUNTAIN, ROOM 116, SOUTH BOUND BROOK ELEMENTRY SCHOOL

DATE SAMPLED: 4/12/17 TIME SAMPLED: 08:31

ANALYSIS	RESULT	UNITS	MCL	DATE ANALYZED
Lead	<1.0	ug/l	15	4/13/17-15:01
Analytical Method	EPA 200.9			
Reporting Limit, ug/l	1.0			
Dilution Factor	None			
Digested (Y/N)	No			

< = less than, not detected. Method Detection Limits and Reporting Limits available at www.gslabs.com/certnjdep.html
MCL = Maximum Contaminant Level allowed by State and Federal regulations.

Harvey Klein
306907

The liability of Garden State Laboratories, Inc. for services rendered shall in no event exceed the amount of the invoice.
Certified by NJ Dept. of Health, NJDEP #20044, NY Dept. of Health #11550 and PADEP #68-03680.

Garden State Laboratories, Inc.

Bacteriological and Chemical Testing

410 Hillside Avenue
Hillside, New Jersey 07205

Mathew Klein, M.S., Founder (1916-1996)
Harvey Klein, M.S., Laboratory Director

Toll Free 800-273-8901
Telephone 908-688-8900
Fax 908-688-8966
email: info@gslabs.com
Internet: www.gslabs.com

REPORT OF ANALYSIS

REPORT # 370412017.0
CLIENT # SCI09
DATE SUBMITTED: 4/12/17

TO: Scientific Water Conditioning
515 Pennsylvania Ave.

Linden NJ 07036
ATT: Andrew Lewin

SAMPLE TYPE: WATER, GRAB SAMPLE
SAMPLE ID: #13
SAMPLE LOCATION: FOUNTAIN, ROOM 118, SOUTH BOUND BROOK ELEMENTRY SCHOOL

DATE SAMPLED: 4/12/17 TIME SAMPLED: 08:33

ANALYSIS	RESULT	UNITS	MCL	DATE ANALYZED
Lead	<1.0	ug/l	15	4/13/17-15:03
Analytical Method	EPA 200.9			
Reporting Limit, ug/l	1.0			
Dilution Factor	None			
Digested (Y/N)	No			

< = less than, not detected. Method Detection Limits and Reporting Limits available at www.gslabs.com/certnjdep.html
MCL = Maximum Contaminant Level allowed by State and Federal regulations.

Harvey Klein
306907

The liability of Garden State Laboratories, Inc. for services rendered shall in no event exceed the amount of the invoice.
Certified by NJ Dept. of Health, NJDEP #20044, NY Dept. of Health #11550 and PADEP #68-03680.

Garden State Laboratories, Inc.

Bacteriological and Chemical Testing

410 Hillside Avenue
Hillside, New Jersey 07205

Mathew Klein, M.S., Founder (1916-1996)
Harvey Klein, M.S., Laboratory Director

Toll Free 800-273-8901
Telephone 908-688-8900
Fax 908-688-8966
email: info@gslabs.com
Internet: www.gslabs.com

REPORT OF ANALYSIS

REPORT # 370412018.0
CLIENT # SCI09
DATE SUBMITTED: 4/12/17

TO: Scientific Water Conditioning
515 Pennsylvania Ave.

Linden NJ 07036
ATT: Andrew Lewin

SAMPLE TYPE: WATER, GRAB SAMPLE
SAMPLE ID: #14
SAMPLE LOCATION: FOUNTAIN, ROOM 216, SOUTH BOUND BROOK ELEMENTRY SCHOOL

DATE SAMPLED: 4/12/17 TIME SAMPLED: 08:38

ANALYSIS	RESULT	UNITS	MCL	DATE ANALYZED
Lead	<1.0	ug/l	15	4/13/17-15:06
Analytical Method	EPA 200.9			
Reporting Limit, ug/l	1.0			
Dilution Factor	None			
Digested (Y/N)	No			

< = less than, not detected. Method Detection Limits and Reporting Limits available at www.gslabs.com/certnjdep.html
MCL = Maximum Contaminant Level allowed by State and Federal regulations.

Harvey Klein
306907

The liability of Garden State Laboratories, Inc. for services rendered shall in no event exceed the amount of the invoice.
Certified by NJ Dept. of Health, NJDEP #20044, NY Dept. of Health #11550 and PADEP #68-03680.

Garden State Laboratories, Inc.

Bacteriological and Chemical Testing

410 Hillside Avenue
Hillside, New Jersey 07205

Mathew Klein, M.S., Founder (1916-1996)
Harvey Klein, M.S., Laboratory Director

Toll Free 800-273-8901
Telephone 908-688-8900
Fax 908-688-8966
email: info@gslabs.com
Internet: www.gslabs.com

REPORT OF ANALYSIS

REPORT # 370412019.0
CLIENT # SCI09
DATE SUBMITTED: 4/12/17

TO: Scientific Water Conditioning
515 Pennsylvania Ave.

Linden NJ 07036
ATT: Andrew Lewin

SAMPLE TYPE: WATER, GRAB SAMPLE
SAMPLE ID: #15
SAMPLE LOCATION: FOUNTAIN, ROOM 218, SOUTH BOUND BROOK ELEMENTRY SCHOOL

DATE SAMPLED: 4/12/17 TIME SAMPLED: 08:36

ANALYSIS	RESULT	UNITS	MCL	DATE ANALYZED
Lead	<1.0	ug/l	15	4/13/17-15:09
Analytical Method	EPA 200.9			
Reporting Limit, ug/l	1.0			
Dilution Factor	None			
Digested (Y/N)	No			

< = less than, not detected. Method Detection Limits and Reporting Limits available at www.gslabs.com/certnjdep.html
MCL = Maximum Contaminant Level allowed by State and Federal regulations.

Harvey Klein
306907

The liability of Garden State Laboratories, Inc. for services rendered shall in no event exceed the amount of the invoice.
Certified by NJ Dept. of Health, NJDEP #20044, NY Dept. of Health #11550 and PADEP #68-03680.

Garden State Laboratories, Inc.

Bacteriological and Chemical Testing

410 Hillside Avenue
Hillside, New Jersey 07205

Mathew Klein, M.S., Founder (1916-1996)
Harvey Klein, M.S., Laboratory Director

Toll Free 800-273-8901
Telephone 908-688-8900
Fax 908-688-8966
email: info@gslabs.com
Internet: www.gslabs.com

REPORT OF ANALYSIS

REPORT # 370412021.0
CLIENT # SCI09
DATE SUBMITTED: 4/12/17

TO: Scientific Water Conditioning
515 Pennsylvania Ave.

Linden NJ 07036
ATT: Andrew Lewin

SAMPLE TYPE: WATER, GRAB SAMPLE
SAMPLE ID: FIELD BLANK
SAMPLE LOCATION:

DATE SAMPLED: 4/12/17 TIME SAMPLED: 08:00

ANALYSIS	RESULT	UNITS	MCL	DATE ANALYZED
Lead	<1.0	ug/l	15	4/13/17-15:12
Analytical Method	EPA 200.9			
Reporting Limit, ug/l	1.0			
Dilution Factor	None			
Digested (Y/N)	No			

< = less than, not detected. Method Detection Limits and Reporting Limits available at www.gslabs.com/certnjdep.html
MCL = Maximum Contaminant Level allowed by State and Federal regulations.

Harvey Klein

306907

The liability of Garden State Laboratories, Inc. for services rendered shall in no event exceed the amount of the invoice.
Certified by NJ Dept. of Health, NJDEP #20044, NY Dept. of Health #11550 and PADEP #68-03680.

Garden State Laboratories, Inc.

Bacteriological and Chemical Testing

410 Hillside Avenue
Hillside, New Jersey 07205

Mathew Klein, M.S., Founder (1916-1996)
Harvey Klein, M.S., Laboratory Director

Toll Free 800-273-8901
Telephone 908-688-8900
Fax 908-688-8966
email: info@gslabs.com
Internet: www.gslabs.com

REPORT OF ANALYSIS

REPORT # 370505001.0
CLIENT # SCI09
DATE SUBMITTED: 5/5/2017

TO: Scientific Water Conditioning
515 Pennsylvania Ave.

Linden NJ 07036
ATT: Andrew Lewin

SAMPLE TYPE: DRINKING WATER, GRAB SAMPLE
SAMPLE ID:
SAMPLE LOCATION: KITCHEN #1 - ROBERT MORRIS SCHOOL

DATE SAMPLED: 5/5/2017 TIME SAMPLED: 07:00

ANALYSIS	RESULT	UNITS	MCL	DATE ANALYZED
Lead	2.2	ug/l	15	5/8/17-10:56
Analytical Method	EPA 200.9			
Reporting Limit, ug/l	1.0			
Dilution Factor	None			
Digested (Y/N)	No			

< = less than, not detected. Method Detection Limits and Reporting Limits available at www.gslabs.com/certnjdep.html
MCL = Maximum Contaminant Level allowed by State and Federal regulations.

Harvey Klein

307729

The liability of Garden State Laboratories, Inc. for services rendered shall in no event exceed the amount of the invoice.
Certified by NJ Dept. of Health, NJDEP #20044, NY Dept. of Health #11550 and PADEP #68-03680.

Garden State Laboratories, Inc.

Bacteriological and Chemical Testing

410 Hillside Avenue
Hillside, New Jersey 07205

Mathew Klein, M.S., Founder (1916-1996)
Harvey Klein, M.S., Laboratory Director

Toll Free 800-273-8901
Telephone 908-688-8900
Fax 908-688-0966
email: info@gslabs.com
Internet: www.gslabs.com

REPORT OF ANALYSIS

REPORT # 370505002.0
CLIENT # SCI09
DATE SUBMITTED: 5/5/2017

TO: Scientific Water Conditioning
515 Pennsylvania Ave.

Linden NJ 07036
ATT: Andrew Lewin

SAMPLE TYPE: DRINKING WATER, GRAB SAMPLE
SAMPLE ID:
SAMPLE LOCATION: KITCHEN #2 - ROBERT MORRIS SCHOOL

DATE SAMPLED: 5/5/2017 TIME SAMPLED: 07:01

ANALYSIS	RESULT	UNITS	MCL	DATE ANALYZED
Lead	<1.0	ug/l	15	5/8/17-10:59
Analytical Method	EPA 200.9			
Reporting Limit, ug/l	1.0			
Dilution Factor	None			
Digested (Y/N)	No			

< = less than, not detected. Method Detection Limits and Reporting Limits available at www.gslabs.com/certnjdep.html
MCL = Maximum Contaminant Level allowed by State and Federal regulations.

Harvey Klein

307729

The liability of Garden State Laboratories, Inc. for services rendered shall in no event exceed the amount of the invoice.
Certified by NJ Dept. of Health, NJDEP #20044, NY Dept. of Health #11550 and PADEP #68-03680.

Garden State Laboratories, Inc.

Bacteriological and Chemical Testing

410 Hillside Avenue
Hillside, New Jersey 07205

Mathew Klein, M.S., Founder (1916-1996)
Harvey Klein, M.S., Laboratory Director

Toll Free 800-273-8901
Telephone 908-688-8900
Fax 908-688-8966
email: info@gslabs.com
Internet: www.gslabs.com

REPORT OF ANALYSIS

REPORT # 370505003.0
CLIENT # SCI09
DATE SUBMITTED: 5/5/2017

TO: Scientific Water Conditioning
515 Pennsylvania Ave.

Linden NJ 07036
ATT: Andrew Lewin

SAMPLE TYPE: DRINKING WATER, GRAB SAMPLE
SAMPLE ID:
SAMPLE LOCATION: KITCHEN #3 - ROBERT MORRIS SCHOOL

DATE SAMPLED: 5/5/2017 TIME SAMPLED: 07:01

ANALYSIS	RESULT	UNITS	MCL	DATE ANALYZED
Lead	3.1	ug/l	15	5/8/17-11:02
Analytical Method	EPA 200.9			
Reporting Limit, ug/l	1.0			
Dilution Factor	None			
Digested (Y/N)	No			

< = less than, not detected. Method Detection Limits and Reporting Limits available at www.gslabs.com/certnjdep.html
MCL = Maximum Contaminant Level allowed by State and Federal regulations.

Harvey Klein
307729

The liability of Garden State Laboratories, Inc. for services rendered shall in no event exceed the amount of the invoice.
Certified by NJ Dept. of Health, NJDEP #20044, NY Dept. of Health #11550 and PADEP #68-03680.

Garden State Laboratories, Inc.

Bacteriological and Chemical Testing

410 Hillside Avenue
Hillside, New Jersey 07205

Mathew Klein, M.S., Founder (1916-1996)
Harvey Klein, M.S., Laboratory Director

Toll Free 800-273-8901
Telephone 908-688-8900
Fax 908-688-8966
email: info@gslabs.com
Internet: www.gslabs.com

REPORT OF ANALYSIS

REPORT # 370505004.0
CLIENT # SCI09
DATE SUBMITTED: 5/5/2017

TO: Scientific Water Conditioning
515 Pennsylvania Ave.

Linden NJ 07036
ATT: Andrew Lewin

SAMPLE TYPE: DRINKING WATER, GRAB SAMPLE
SAMPLE ID:
SAMPLE LOCATION: ROOM 139 - ROBERT MORRIS SCHOOL

DATE SAMPLED: 5/5/2017 TIME SAMPLED: 07:04

ANALYSIS	RESULT	UNITS	MCL	DATE ANALYZED
Lead	1.5	ug/l	15	5/8/17-11:05
Analytical Method	EPA 200.9			
Reporting Limit, ug/l	1.0			
Dilution Factor	None			
Digested (Y/N)	No			

< = less than, not detected. Method Detection Limits and Reporting Limits available at www.gslabs.com/certnjdep.html
MCL = Maximum Contaminant Level allowed by State and Federal regulations.

Harvey Klein

307729

The liability of Garden State Laboratories, Inc. for services rendered shall in no event exceed the amount of the invoice.
Certified by NJ Dept. of Health, NJDEP #20044, NY Dept. of Health #11550 and PADEP #68-03680.

Garden State Laboratories, Inc.

410 Hillside Ave., Hillside, NJ 07205

Tel. 908-688-8900/800-273-8901 Fax 908-688-8966 www.gslabs.com info@gslabs.com

Satellite Office Locations

North Jersey — *225 Sparta Ave, Sparta NJ 07871* — *Tel. 973-729-1827*

South Jersey — *515 Rt. 9, Barnegat, NJ 08805* — *Tel. 609-698-0199*

West Jersey — *2050 Rt. 31 N, Glen Gardner, NJ 08826* — *Tel. 908-537-7414*

FOR SAMPLE RECEIVING USE ONLY

DATE/TIME/TEMP. REC'D AT LAB:

Page _____ of _____

GSL CLIENT #

MICRO #

CHEM. #

SAMPLE REC'D BY:

- ☐ GSL FIELD SAMPLER/PICK-UP
- ☐ PICK-UP AT DROP OFF LOCATION
- ☐ DELIVERED BY CLIENT

CHAIN OF CUSTODY RECORD - PRESS HARD AND PRINT CLEARLY - USE BALL POINT PEN

IMPORTANT: PRINTED NAMES & SIGNATURES ARE REQUIRED

CLIENT INFORMATION (REPORT TO BE SENT TO)

Name: Contact/Authorized by:

Mailing Address: Phone:

City/State/Zip: Fax:

SAMPLE INFORMATION

SAMPLE TYPE:

SAMPLE LOCATION:

Grab	Comp	SAMPLE ID	SAMPLE COLLECTION Date	Time	AM	PM	ANALYSIS REQUIRED (Print Legibly) ☐ List attached Total Pages _____	CONTAINER INFORMATION No.	Type*	Size	Pres.*

⇨ *Container Type: P = Plastic G = Glass A = Amber Glass T = Sterile Thio V = Vial Other/Specify: _____

⇨ *Preservation Code: A = Non Preserved B = Sulfuric Acid C = Sodium Hydroxide D = Nitric Acid E = Hydrochloric Acid F = Zinc Acetate G = Sodium Thiosulfate H = Ascorbic Acid I = Cooled Other/Specify: _____

☐ SUBCONTRACTED WORK

SEND TO:

DATE/TIME:

METHOD OF SHIPMENT:

TURNAROUND TIME: ☑ Standard ☐ Rush (If RUSH REQUESTED) Rush Due by:

REPORT FORMAT: ☐ Standard Report ☐ Other/Specify:

☐ Standard Report + E2 PWS ID#:

PAYMENT INFORMATION

☐ Sampling/Pick-up Fee: $ ☐ Composite Fee: $ ☐ Rush Fee: $ Amount Due: $

Payment Method: ☐ Credit Card Type: ☐ Check # ☐ Other: See Quote

Note:

SAMPLE CUSTODY EXCHANGES MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION

PLEASE PRINT YOUR NAME LEGIBLY, USE FULL LEGAL SIGNATURE, DATE AND TIME

Sampled by (PRINT):	Signature:	Date/Time:
Client/Client's Representative (PRINT):	Signature:	Date/Time:
1. Received/Relinquished by (PRINT):	Signature:	Date/Time:
2. Received/Relinquished by (PRINT):	Signature:	Date/Time:

THE LIABILITY OF GARDEN STATE LABORATORIES, INC. FOR SERVICES RENDERED SHALL IN NO EVENT EXCEED THE AMOUNT OF THE INVOICE.

Certified by U.S. Public Health Service, N.J. Dept. of Health, N.Y. State Dept. of Health - Lab # 11550 and N.J.D.E.P. - Lab # 20044

Garden State Laboratories, Inc.

410 Hillside Ave., Hillside, NJ 07205

Tel. 908-688-8900/800-273-8901 Fax 908-688-8966 www.gslabs.com info@gslabs.com

Satellite Office Locations

North Jersey	South Jersey	West Jersey
225 Sparta Ave, Sparta NJ 07871	515 Rt. 9, Barnegat, NJ 08805	2050 Rt. 31 N, Glen Gardner, NJ 08826
Tel. 973-729-1827	Tel. 609-698-0199	Tel. 908-537-7414

FOR SAMPLE RECEIVING USE ONLY

DATE/TIME/TEMP. REC'D AT LAB:

Page _____ of _____

GSL CLIENT #

MICRO #

CHEM. #

SAMPLE REC'D BY:

☐ GSL FIELD SAMPLER/PICK-UP

☐ PICK-UP AT DROP OFF LOCATION

☐ DELIVERED BY CLIENT

CHAIN OF CUSTODY RECORD - PRESS HARD AND PRINT CLEARLY - USE BALL POINT PEN

IMPORTANT: PRINTED NAMES & SIGNATURES ARE REQUIRED

CLIENT INFORMATION (REPORT TO BE SENT TO)

Name: Contact/Authorized by:

Mailing Address: Phone:

City/State/Zip: Fax:

SAMPLE INFORMATION

SAMPLE TYPE:

SAMPLE LOCATION:

Grab	Comp.	SAMPLE ID	SAMPLE COLLECTION Date	Time	AM	PM	ANALYSIS REQUIRED (Print Legibly) ☐ List attached Total Pages _____	CONTAINER INFORMATION No.	Type*	Size	Pres.*

⇨ *Container Type: P = Plastic G = Glass A = Amber Glass T = Sterile Thio V = Vial Other/Specify: _____

⇨ *Preservation Code: A = Non Preserved B = Sulfuric Acid C = Sodium Hydroxide D = Nitric Acid E = Hydrochloric Acid F = Zinc Acetate G = Sodium Thiosulfate H = Ascorbic Acid I = Cooled Other/Specify: _____

☐ SUBCONTRACTED WORK

SEND TO:

DATE/TIME:

METHOD OF SHIPMENT:

TURNAROUND TIME: ☐ Standard ☐ Rush (If RUSH REQUESTED) Rush Due by:

REPORT FORMAT: ☐ Standard Report ☐ Other/Specify:

☐ Standard Report + E2 PWS ID#:

PAYMENT INFORMATION

☐ Sampling/Pick-up Fee: $ ☐ Composite Fee: $ ☐ Rush Fee: $ Amount Due: $

Payment Method: ☐ Credit Card Type: ☐ Check # ☐ Other: See Quote

Note:

SAMPLE CUSTODY EXCHANGES MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION

PLEASE PRINT YOUR NAME LEGIBLY, USE FULL LEGAL SIGNATURE, DATE AND TIME

Sampled by (PRINT):	Signature:	Date/Time:
Client/Client's Representative (PRINT):	Signature:	Date/Time:
1. Received/Relinquished by (PRINT):	Signature:	Date/Time:
2. Received/Relinquished by (PRINT):	Signature:	Date/Time:

THE LIABILITY OF GARDEN STATE LABORATORIES, INC. FOR SERVICES RENDERED SHALL IN NO EVENT EXCEED THE AMOUNT OF THE INVOICE.

Certified by U.S. Public Health Service, N.J. Dept. of Health, N.Y. State Dept. of Health - Lab # 11550 and N.J.D.E.P. - Lab # 20044

CB 3/4/15

Garden State Laboratories, Inc.

410 Hillside Ave., Hillside, NJ 07205

Tel. 908-688-8900/800-273-8901 Fax 908-688-8966 www.gslabs.com info@gslabs.com

Satellite Office Locations

North Jersey — *225 Sparta Ave, Sparta NJ 07871* — *Tel. 973-729-1827*

South Jersey — *515 Rt. 9, Barnegat, NJ 08805* — *Tel. 609-698-0199*

West Jersey — *2050 Rt. 31 N, Glen Gardner, NJ 08826* — *Tel. 908-537-7414*

FOR SAMPLE RECEIVING USE ONLY

DATE/TIME/TEMP. REC'D AT LAB:

Page _____ of _____

GSL CLIENT #

MICRO #

CHEM. #

SAMPLE REC'D BY:

- ☐ GSL FIELD SAMPLER/PICK-UP
- ☐ PICK-UP AT DROP OFF LOCATION
- ☐ DELIVERED BY CLIENT

CHAIN OF CUSTODY RECORD - PRESS HARD AND PRINT CLEARLY - USE BALL POINT PEN

IMPORTANT: PRINTED NAMES & SIGNATURES ARE REQUIRED

CLIENT INFORMATION (REPORT TO BE SENT TO)

Name: Contact/Authorized by:

Mailing Address: Phone:

City/State/Zip: Fax:

SAMPLE INFORMATION

SAMPLE TYPE:

SAMPLE LOCATION:

Grab	Comp	SAMPLE ID	SAMPLE COLLECTION Date	Time	AM	PM	ANALYSIS REQUIRED (Print Legibly) ☐ List attached Total Pages ____	CONTAINER INFORMATION No.	Type*	Size	Pres.*

⇨ **Container Type: P = Plastic G = Glass A = Amber Glass T = Sterile Thio V = Vial Other/Specify: _____*

⇨ **Preservation Code: A = Non Preserved B = Sulfuric Acid C = Sodium Hydroxide D = Nitric Acid E = Hydrochloric Acid F = Zinc Acetate G = Sodium Thiosulfate H = Ascorbic Acid I = Cooled Other/Specify: _____*

☐ SUBCONTRACTED WORK

SEND TO:

DATE/TIME:

METHOD OF SHIPMENT:

TURNAROUND TIME: ☒ Standard ☐ Rush (If RUSH REQUESTED) Rush Due by:

REPORT FORMAT: ☐ Standard Report ☐ Other/Specify:

☐ Standard Report + E2 PWS ID#:

PAYMENT INFORMATION

☐ Sampling/Pick-up Fee: $ ☐ Composite Fee: $ ☐ Rush Fee: $ Amount Due: $

Payment Method: ☐ Credit Card Type: ☐ Check # ☐ Other: See Quote

Note:

SAMPLE CUSTODY EXCHANGES MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION

PLEASE PRINT YOUR NAME LEGIBLY, USE FULL LEGAL SIGNATURE, DATE AND TIME

Sampled by (PRINT):	Signature:	Date/Time:
Client/Client's Representative (PRINT):	Signature:	Date/Time:
1. Received/Relinquished by (PRINT):	Signature:	Date/Time:
2. Received/Relinquished by (PRINT):	Signature:	Date/Time:

THE LIABILITY OF GARDEN STATE LABORATORIES, INC. FOR SERVICES RENDERED SHALL IN NO EVENT EXCEED THE AMOUNT OF THE INVOICE.

Certified by U.S. Public Health Service, N.J. Dept. of Health, N.Y. State Dept. of Health - Lab # 11550 and N.J.D.E.P. - Lab # 20044

CB 3/4/15

Garden State Laboratories, Inc.

410 Hillside Ave., Hillside, NJ 07205

Tel. 908-688-8900/800-273-8901 Fax 908-688-8966 www.gslabs.com info@gslabs.com

Satellite Office Locations

North Jersey — *225 Sparta Ave, Sparta NJ 07871* — *Tel. 973-729-1827*

South Jersey — *515 Rt. 9, Barnegat, NJ 08805* — *Tel. 609-698-0199*

West Jersey — *2050 Rt. 31 N, Glen Gardner, NJ 08826* — *Tel. 908-537-7414*

FOR SAMPLE RECEIVING USE ONLY

DATE/TIME/TEMP. REC'D AT LAB:

Page _____ of _____

GSL CLIENT #

MICRO #

CHEM. #

SAMPLE REC'D BY:

- ☐ GSL FIELD SAMPLER/PICK-UP
- ☐ PICK-UP AT DROP OFF LOCATION
- ☐ DELIVERED BY CLIENT

CHAIN OF CUSTODY RECORD - PRESS HARD AND PRINT CLEARLY - USE BALL POINT PEN

IMPORTANT: PRINTED NAMES & SIGNATURES ARE REQUIRED

CLIENT INFORMATION (REPORT TO BE SENT TO)

Name: Contact/Authorized by:

Mailing Address: Phone:

City/State/Zip: Fax:

SAMPLE INFORMATION

SAMPLE TYPE:

SAMPLE LOCATION:

Grab	Comp	SAMPLE ID	SAMPLE COLLECTION Date	Time	AM	PM	ANALYSIS REQUIRED (Print Legibly) ☐ List attached Total Pages ____	CONTAINER INFORMATION No.	Type*	Size	Pres.*

⇨ **Container Type: P = Plastic G = Glass A = Amber Glass T = Sterile Thio V = Vial Other/Specify: _____*

⇨ **Preservation Code: A = Non Preserved B = Sulfuric Acid C = Sodium Hydroxide D = Nitric Acid E = Hydrochloric Acid F = Zinc Acetate G = Sodium Thiosulfate H = Ascorbic Acid I = Cooled Other/Specify: _____*

☐ SUBCONTRACTED WORK

SEND TO:

DATE/TIME:

METHOD OF SHIPMENT:

TURNAROUND TIME: ☐ Standard ☐ Rush (IF RUSH REQUESTED) Rush Due by:

REPORT FORMAT: ☐ Standard Report ☐ Other/Specify:

☐ Standard Report + E2 PWS ID#:

PAYMENT INFORMATION

☐ Sampling/Pick-up Fee: $ ☐ Composite Fee: $ ☐ Rush Fee: $ Amount Due: $

Payment Method: ☐ Credit Card Type: ☐ Check # ☐ Other: See Quote

Note:

SAMPLE CUSTODY EXCHANGES MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION

PLEASE PRINT YOUR NAME LEGIBLY, USE FULL LEGAL SIGNATURE, DATE AND TIME

Sampled by (PRINT):	Signature:	Date/Time:
Client/Client's Representative (PRINT):	Signature:	Date/Time:
1. Received/Relinquished by (PRINT):	Signature:	Date/Time:
2. Received/Relinquished by (PRINT):	Signature:	Date/Time:

THE LIABILITY OF GARDEN STATE LABORATORIES, INC. FOR SERVICES RENDERED SHALL IN NO EVENT EXCEED THE AMOUNT OF THE INVOICE.

Certified by U.S. Public Health Service, N.J. Dept. of Health, N.Y. State Dept. of Health - Lab # 11550 and N.J.D.E.P. - Lab # 20044

CB 3/4/15