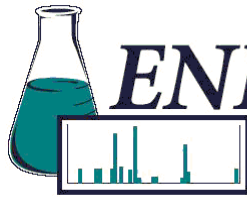


**Laboratory Report****ENDYNE Inc.**  
Environmental Laboratories

Simon Operation Services 070247  
143 South Main Street  
Suite 1  
Waterbury, VT 05676  
Atten: Mark Simon

PROJECT: WSID 5476 Jericho FD1 TC

WORK ORDER: 1711-26674

DATE RECEIVED: November 07, 2017

DATE REPORTED: November 09, 2017

SAMPLER: Kirk Patch

**VT0005476**

001 Site: 8 Westview

Date Sampled: 11/7/17 Time: 10:18

Facility ID: DS001 Smp Pt: TC001 Categ: TC Smp Type: RT Compl Ind: Y Repl Ind: N

Free Chlorine Residual (Field Result): 0.47 ppm

<u>Parameter</u>	<u>Result</u>	<u>Units</u>	<u>Method</u>	<u>Analysis Date/Time</u>	<u>Lab/Tech</u>	<u>NELAC</u>	<u>Qual.</u>
Total Coliform	Absent	/100 mL	SM20 9223B(97)	11/7/17 15:40	W KMB	A	
e. coli	Absent	/100 mL	SM20 9223B(97)	11/7/17 15:40	W KMB	A	

Endyne will submit this data electronically to the State of VT Water Supply Division in accordance with their policy and standards.

The column heading "Lab" denotes the laboratory facility where the testing was performed. "W" designates the Williston, VT lab under NELAC certification ELAP 11263; "R" designates the Lebanon, NH facility under certification NH 2037. This analysis meets NELAC requirements except as noted. Test results are representative of the samples as they were received at the laboratory. Chlorine field results are provided by the client unless otherwise indicated.

Reviewed by:

Harry B. Locker, Ph.D.  
Laboratory Director

[www.endynelabs.com](http://www.endynelabs.com)

160 James Brown Dr., Williston, VT 05495  
Ph 802-879-4333 Fax 802-879-7103

56 Etna Road, Lebanon, NH 03766  
Ph 603-678-4891 Fax 603-678-4893



WSID 5476 Jericho FD 1

Total Coliform

Endyne Inc. COC

1711-26674

Bill to:

Report to:

Prepared: 11/24/14



1711-26674

Mark Simon

Mark Simon

Cust # 071

Simon Operation Services

Simon Operation Services

VT0005476

143 South Main Street

143 South Main Street

Simon Operation Services  
WSID 5476 Jericho FD1 TC

Waterbury VT 05676

Waterbury VT 05676

Ph: (802)244-7420

stefsos@aol.com;kpatch@simonop.

TC0005476

Page 1 of 1

Was the water system chlorinated at the time of sample collection? Circle one: YES NO

Sampler:

Circle Sample Type for each sample: RT RP SP

1 Sterile 120 mL Bottle per Sample

Fac.ID: DS001 Smp Pt: TC001 Ctg: TC Smp Typ: RT RP SP Repl: Y/N Cmpl Ind: Y/N

Chlorine, Free: 0.97 mg/L

001 8 Westview

Sampled Date/Time: 11/7/17 @ 10:18am

Chlorine, Total: \_\_\_\_\_ mg/L

Fac.ID: DS001 Smp Pt: TC001 Ctg: TC Smp Typ: RT RP SP Repl: Y/N Cmpl Ind: Y/N

Chlorine, Free: \_\_\_\_\_ mg/L

002 \_\_\_\_\_

Sampled Date/Time: \_\_\_\_/\_\_\_\_/\_\_\_\_ @ \_\_\_\_

Chlorine, Total: \_\_\_\_\_ mg/L

Fac.ID: DS001 Smp Pt: TC001 Ctg: TC Smp Typ: RT RP SP Repl: Y/N Cmpl Ind: Y/N

Chlorine, Free: \_\_\_\_\_ mg/L

003 \_\_\_\_\_

Sampled Date/Time: \_\_\_\_/\_\_\_\_/\_\_\_\_ @ \_\_\_\_

Chlorine, Total: \_\_\_\_\_ mg/L

Fac.ID: DS001 Smp Pt: TC001 Ctg: TC Smp Typ: RT RP SP Repl: Y/N Cmpl Ind: Y/N

Chlorine, Free: \_\_\_\_\_ mg/L

004 \_\_\_\_\_

Sampled Date/Time: \_\_\_\_/\_\_\_\_/\_\_\_\_ @ \_\_\_\_

Chlorine, Total: \_\_\_\_\_ mg/L

Fac.ID: DS001 Smp Pt: TC001 Ctg: TC Smp Typ: RT RP SP Repl: Y/N Cmpl Ind: Y/N

Chlorine, Free: \_\_\_\_\_ mg/L

004 \_\_\_\_\_

Sampled Date/Time: \_\_\_\_/\_\_\_\_/\_\_\_\_ @ \_\_\_\_

Chlorine, Total: \_\_\_\_\_ mg/L

Relinquished by:

K Patch

Date Time

Accepted by:

11/7/17

Date Time

Relinquished by:

Received by:

BRugbee 11/7/17 13:40

Date Time

Sites/Parameters correct as listed. Client Initials

K

Date Time

Client Authorization to use Subcontract lab Client Initials

KSample origin: VT ☒ NH ☐ NY ☐ Other ☐

Reporting instructions: (PO#)

Requested Turnaround Time: Routine: Rush Due Date

Delv: Client  
Temp C: 5.7  
Comment:

Tmpl Ck

Log by

Lab use Only

160 James Brown Dr.  
Williston, VT 05495  
Ph 802-879-4333  
Fax 802-879-710356 Etna Road  
Lebanon, NH 03766  
Ph 603-678-4891  
Fax 603-678-4893315 New York Rd.  
Plattsburgh, NY 12903  
Ph 518-563-1720  
Fax 518-563-0052