

03/04/2016

Westchester County Dept. of Env Facilities
Mike Farraro
35 Woods Road
Vahalla, NY 10595
maf6@westchestergov.com

Subject: LT2 R2 Event 48 MS 4/ASI #53132

Dear: Mike Farraro

Enclosed please find the test result(s) for sample(s) received at Analytical Services, Inc. (ASI) on 03/03/2016.

This report consists of five (5) pages, including this cover page. The results reported herein relate only to the sample(s) included in this report. These results were generated under ASI's laboratory quality system, which is in accordance with the NELAC (TNI) standard. Deviations, if any, are noted. This report shall not be reproduced except in full without the written approval of the laboratory.

Thank you for using ASI for your testing needs. For additional information regarding this report, please contact ASI Client Services at 800-723-4432.

Sincerely,

ANALYTICAL SERVICES, INC.



for Carolyn M. Fogg
Technical Director



USEPA Method 1623.1 Analytical Report

 Westchester County Dept. of Env Facilities
 Mike Farraro
 35 Woods Road
 Vahalla, NY 10595
 maf6@westchestergov.com

 Analysis Start: 03/03/2016 13:48
 Analysis End: 03/04/2016 5:52
 Analyst: Danielle Gregoire

ASI Sample ID No.: 53132-01

 Method 1623.1 Batch No.: 1295 1623.1
 Cryptosporidium QC ID No.: 3324
 Giardia QC ID No.: 3325

| Sample Information | |
|-------------------------------|--|
| PWS or Client Name: | Westchester County Water District #1 |
| PWS ID: | 5903488 |
| Facility Name: | Kenisco Dam Master Chlorination Facility |
| Facility ID: | No Data |
| Sample Collection Point Name: | Raw Water Sample Tap |
| Sample Collection Point ID: | Raw Water |
| Matrix: | Water-Raw Surface |
| Method: | EPA 1623.1 |
| Analysis Type: | Field |
| Date / Time Collected: | 03/01/2016 10:00 |
| Turbidity (NTU): | 1.0 |

| Volume and Filtration Information | |
|---|-----------|
| Filter Type: | Gelman HV |
| No of Filters Used: | 1 |
| Volume Filtered (L): | 56.60 |
| Packed Pellet Volume (mL): | 0.50 |
| Total Resuspended Concentrate Volume (mL): | 5.0 |
| Total Resuspended Concentrate Volume to IMS (mL): | 5.0 |
| Number of Sub-samples: | 1 |
| Total Sample Volume Examined (L): | 56.60 |

| Analytical Results | | Matrix Spike Results | | |
|------------------------|--------------------|------------------------|-------------------------|------------------|
| Analyte | Total (Oo) cysts/L | Recovered (Oo) cysts/L | Spike Dose (Oo) cysts/L | Percent Recovery |
| <i>Giardia</i> | 0.00 | N/A | N/A | N/A |
| <i>Cryptosporidium</i> | 0.00 | N/A | N/A | N/A |

Method: Samples processed, stained and examined using USEPA Method 1623.1: Cryptosporidium and Giardia in Water by Filtration/IMS/FA (USEPA Jan. 2012: EPA 816-R-12-001) (ASI SOP 224-9).

USEPA Method 1623.1 Analytical Report

 Westchester County Dept. of Env Facilities
 Mike Farraro
 35 Woods Road
 Vahalla, NY 10595
 maf6@westchestergov.com

 Analysis Start: 03/03/2016 13:48
 Analysis End: 03/04/2016 5:56
 Analyst: Danielle Gregoire

ASI Sample ID No.: 53132-02

 Method 1623.1 Batch No.: 1295 1623.1
 Cryptosporidium QC ID No.: 3324
 Giardia QC ID No.: 3325

| Sample Information | |
|-------------------------------|--|
| PWS or Client Name: | Westchester County Water District #1 |
| PWS ID: | 5903488 |
| Facility Name: | Kenisco Dam Master Chlorination Facility |
| Facility ID: | No Data |
| Sample Collection Point Name: | Raw Water Sample Tap |
| Sample Collection Point ID: | Raw Water |
| Matrix: | Water-Raw Surface |
| Method: | EPA 1623.1 |
| Analysis Type: | MS |
| Date / Time Collected: | 03/01/2016 11:15 |
| Turbidity (NTU): | 1.0 |

| Volume and Filtration Information | |
|---|-----------|
| Filter Type: | Gelman HV |
| No of Filters Used: | 1 |
| Volume Filtered (L): | 56.37 |
| Packed Pellet Volume (mL): | 0.50 |
| Total Resuspended Concentrate Volume (mL): | 5.0 |
| Total Resuspended Concentrate Volume to IMS (mL): | 5.0 |
| Number of Sub-samples: | 1 |
| Total Sample Volume Examined (L): | 56.37 |

| Analytical Results | | Matrix Spike Results | | |
|------------------------|--------------------|------------------------|-------------------------|------------------|
| Analyte | Total (Oo) cysts/L | Recovered (Oo) cysts/L | Spike Dose (Oo) cysts/L | Percent Recovery |
| <i>Giardia</i> | 1.30 | 1.30 | 1.77 | 73.0 |
| <i>Cryptosporidium</i> | 0.98 | 0.98 | 1.77 | 55.0 |

Method: Samples processed, stained and examined using USEPA Method 1623.1: Cryptosporidium and Giardia in Water by Filtration/IMS/FA (USEPA Jan. 2012: EPA 816-R-12-001) (ASI SOP 224-9).

Recovered (Oo)cysts/L (applies to Matrix Spikes only) = Total (Oo)cysts/L in Matrix Spike - Total (Oo)cysts/L in Field Sample.

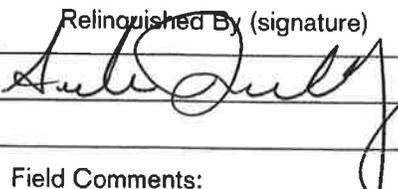
CHAIN OF CUSTODY RECORD

Ship to: Analytical Services, Inc., 130 Allen Brook Lane, Williston, VT 05495, Attn: Sample Management
 Phone: 1-800-723-4432 or 802-878-5138 • Fax: 802-878-6765 Web site: www.analyticalservices.com

| | | | |
|---|--------------------|---------------------------|--|
| Submitted By: <u>WUSD #1</u> | | Report To: _____ | |
| Phone: <u>914 231 1286</u> Email: _____ | | Phone: _____ Email: _____ | |
| Project Name | <u>WUSD 1 LT2</u> | Invoice To: _____ | |
| Job Site | <u>KENSICO DAM</u> | _____ | |
| P.O. Number | _____ | Phone: _____ Email: _____ | |

| Sample Identification* | Sample Collection | | | Sample Matrix | | | | | | Analysis Requested | Lab Use Only | |
|------------------------|-------------------|--------------|------------------|---------------|------------------|-------------|-----------|---------------|-------|--------------------|--------------|-----|
| | Date (Start) | Time (Start) | Sampler Initials | check one | | | | | | | | |
| | | | | Water - Raw | Water - Finished | Waste Water | Biosolids | Soil/Sediment | Other | | | |
| RAW WATER | 3-1-16 | 1000 | AD | ✓ | | | | | | CRYPTO | 2.6 | 3.3 |
| RAW WATER | " | 1015 | AD | ✓ | | | | | | CRYPTO | 4.8 | 3.3 |
| RAW WATER | " | 1030 | AD | ✓ | | | | | | CRYPTO | 5.1 | 3.3 |
| RAW WATER | " | 1045 | AD | ✓ | | | | | | CRYPTO | 3.8 | 3.6 |
| RAW WATER | " | 1100 | AD | ✓ | | | | | | CRYPTO | 3.8 | 3.6 |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |
| | | | | | | | | | | | | |

*Sample ID should match ID written on the sample containers and data sheets. Sample ID will appear on the report for identification.

| | | | |
|---|-------------|--|--------------|
| Relinquished By (signature) | Date/Time | Received By (signature) | Date/Time |
|  | 3-2-16 0900 |  | 10/10 3-3-16 |
| Field Comments: | | Lab Comments: | |

CHAIN OF CUSTODY RECORD

Ship to: Analytical Services, Inc., 130 Allen Brook Lane, Williston, VT 05495, Attn: Sample Management
 Phone: 1-800-723-4432 or 802-878-5138 • Fax: 802-878-6765 Web site: www.analyticalservices.com

| | | | |
|---------------------------------------|--------------------|---------------------------|--|
| Submitted By: <u>WCWD #1</u> | | Report To: _____ | |
| Phone: <u>9142311286</u> Email: _____ | | Phone: _____ Email: _____ | |
| Project Name | <u>WCWD 1 LT2</u> | Invoice To: _____ | |
| Job Site | <u>Kensico Dam</u> | _____ | |
| P.O. Number | _____ | Phone: _____ Email: _____ | |

| Sample Identification* | Sample Collection | | | Sample Matrix | | | | | | | Analysis Requested | Lab Use Only Temp (°C) | | |
|------------------------|-------------------|--------------|------------------|-------------------------------------|------------------|-------------|-----------|---------------|-------|--|--------------------|---------------------------|-----|-----|
| | Date (Start) | Time (Start) | Sampler Initials | check one | | | | | | | | | | |
| | | | | Water - Raw | Water - Finished | Waste Water | Biosolids | Soil/Sediment | Other | | | | | |
| RAW WATER | 3-1-16 | 1115 | AD | <input checked="" type="checkbox"/> | | | | | | | | <u>Crypto / MATRIX</u> | 2.1 | 3.3 |
| RAW WATER | " | 1130 | AD | <input checked="" type="checkbox"/> | | | | | | | | " " | 4.8 | 3.3 |
| RAW WATER | " | 1145 | AD | <input checked="" type="checkbox"/> | | | | | | | | " " | | 3.3 |
| RAW WATER | " | 1200 | AD | <input checked="" type="checkbox"/> | | | | | | | | " " | | 3.6 |
| RAW WATER | " | 1215 | AD | <input checked="" type="checkbox"/> | | | | | | | | " " | | 3.6 |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |
| | | | | | | | | | | | | | | |

*Sample ID should match ID written on the sample containers and data sheets. Sample ID will appear on the report for identification.

| | | | |
|-----------------------------|--------------------|-------------------------|--------------------|
| Relinquished By (signature) | Date/Time | Received By (signature) | Date/Time |
| <u>[Signature]</u> | <u>3-2-16 0900</u> | <u>[Signature]</u> | <u>1210 2-3-16</u> |
| Field Comments: | | Lab Comments: | |
| | | | |

PSB