

Public Water System Name			Reporting Month/Year		Date Report Submitted		Source Water Type(s)		
WWD#1 - Kensico Dam			Oct '15		11/09/15		Surface Water		
Public Water System ID			County		Town, Village, or City				
NY 5903488			Westchester		Valhalla				
DATE	Source(s) in Use	Treated water volume (1,000 gallons/day)	Chlorination			Other Treatments / Readings			
			Liquid Hypochlorite added to crock (gallons)	Free chlorine residual at entry point (mg/l)	Caustic Gal Used	Ortho Gal Used	Treated Turb		
1	Kensico Res	11,792	184	1.83	147	49	0.58		
2	Kensico Res	11,032	152	1.76	125	50	0.52		
3	Kensico Res	8,775	143	1.71	105	50	0.58		
4	Kensico Res	12,226	190	1.68	150	55	0.59		
5	Kensico Res	11,800	200	1.72	145	55	0.53		
6	Kensico Res	10,499	155	1.60	130	55	0.45		
7	Kensico Res	12,405	190	1.70	150	70	0.52		
8	Kensico Res	11,440	185	1.67	145	60	0.42		
9	Kensico Res	11,355	180	1.65	130	55	0.48		
10	Kensico Res	11,079	180	1.70	130	55	0.52		
11	Kensico Res	11,916	200	1.75	140	65	0.48		
12	Kensico Res	11,425	215	1.73	145	60	0.52		
13	Kensico Res	11,542	185	1.65	130	60	0.52		
14	Kensico Res	10,213	142	1.70	115	58	0.50		
15	Kensico Res	12,080	188	1.65	190	64	0.48		
16	Kensico Res	11,077	177	1.62	88	66	0.48		
17	Kensico Res	10,453	166	1.72	124	53	0.52		
18	Kensico Res	12,255	182	1.71	143	66	0.55		
19	Kensico Res	9,530	155	1.60	115	45	0.50		
20	Kensico Res	7,459	125	1.70	100	50	0.48		
21	Kensico Res	10,186	125	1.71	90	30	0.46		
22	Kensico Res	7,295	110	1.65	90	35	0.45		
23	Kensico Res	8,465	141	1.61	108	51	0.48		
24	Kensico Res	5,700	88	1.53	73	30	0.49		
25	Kensico Res	8,250	106	1.55	94	39	0.61		
26	Kensico Res	5,985	110	1.60	90	35	0.52		
27	Kensico Res	6,775	110	1.71	85	35	0.49		
28	Kensico Res	6,612	100	1.68	85	33	0.48		
29	Kensico Res	7,300	120	1.63	90	38	0.48		
30	Kensico Res	6,486	100	1.55	85	29	0.50		
31	Kensico Res	6,684	110	1.71	85	30	0.53		
Total		300,091	4,714		3,622	1,526			
AVG.		9,680	152	1.67	117	49	0.51		

Chlorine Mix Ratio: _____ qts/gals of _____ % chlorine added to _____ gals of water

Reported by: M. [Signature] Title: SUPervisor NYS DOH Operator Certification Number: 1040030241

Signature: [Signature] Date: 11/9/15 Operator Grade Level: FB

Microbiological Samples and Free Chlorine Residual

Sample Location	Date of Sample	Sample Type 1.Routine 2.Repeat	Total Coliform Positive	E.coli Positive	Free Chlorine Residual (mg/l)	Population Served: <input type="text"/>
Kensico Dam	10/2/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.75	<p>Number of microbiological monitoring samples required: <input type="text"/></p> <p>Number of microbiological monitoring samples taken: <input type="text"/></p> <p>Did an M&R violation occur <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If "Yes," check reason (s) below:</p> <p><input type="checkbox"/> Actual number of samples is fewer than required.</p> <p><input type="checkbox"/> Did not collect/analyze repeat sample.</p> <p><input type="checkbox"/> Did not collect/analyze for E. coli for positive total coliform from routine/repeat sample.</p> <p>Did an MCL violation occur? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p> <p>If "Yes," check reason(s) below (see also Part 5, Table 6 for additional information).</p> <p><input type="checkbox"/> For systems collecting less than 40 samples per month: two or more of the samples (routine and /or repeat) are positive for total coliform (= total coliform MCL violation).</p> <p><input type="checkbox"/> For systems collecting 40 or more samples per month: more than 5% of the samples (routine and/or repeat) are positive for total coliform (= total coliform MCL violation).</p> <p><input type="checkbox"/> The original sample was E.coli positive and at least 1 repeat sample was positive for total coliform (= E.coli MCL violation).</p> <p>Reminder: System must collect a minimum of five (5) routine microbiological monitoring samples during the month following a repeat sample collection.</p> <p>As required by 5-1.72, "Operation of a Public Water System," a copy of this form shall be sent to your local health department by the 10th calendar day of the next reporting period.</p>
	10/5/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.8	
	10/6/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.65	
	10/7/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.7	
	10/8/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.7	
	10/9/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.65	
	10/13/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.65	
	10/14/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.7	
	10/15/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.67	
	10/16/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.6	
	10/19/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.65	
	10/20/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.95	
	10/21/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.7	
	10/22/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.65	
	10/23/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.65	
	10/26/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.65	
	10/27/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.7	
	10/28/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.68	

Sample Collector(s): Larry Dema, Fred McQuillan

Name of NYSDOH Certified Laboratory: WCDLR 10108

Did any MCL violation occur? If so, please describe: _____

Did an emergency or low pressure problem occur? Did source water bypass an existing treatment process in the system? If so, please explain. _____

Comments: _____

Microbiological Samples and Free Chlorine Residual

Sample Location	Date of Sample	Sample Type 1.Routine 2.Repeat	Total Coliform Positive	E.coli Positive	Free Chlorine Residual (mg/l)	Population Served: <input type="text"/>
Kensico Dam	10/28/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.68	Number of microbiological monitoring samples required: <input type="text"/> Number of microbiological monitoring samples taken: <input type="text"/> Did an M&R violation occur <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," check reason (s) below: <input type="checkbox"/> Actual number of samples is fewer than required. <input type="checkbox"/> Did not collect/analyze repeat sample. <input type="checkbox"/> Did not collect/analyze for E. coli for positive total coliform from routine/repeat sample. Did an MCL violation occur? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No If "Yes," check reason(s) below (see also Part 5, Table 6 for additional information). <input type="checkbox"/> For systems collecting less than 40 samples per month: two or more of the samples (routine and /or repeat) are positive for total coliform (= total coliform MCL violation). <input type="checkbox"/> For systems collecting 40 or more samples per month: more than 5% of the samples (routine and/or repeat) are positive for total coliform (= total coliform MCL violation). <input type="checkbox"/> The original sample was E.coli positive and at least 1 repeat sample was positive for total coliform (= E.coli MCL violation). Reminder: System must collect a minimum of five (5) routine microbiological monitoring samples during the month following a repeat sample collection. As required by 5-1.72, "Operation of a Public Water System," a copy of this form shall be sent to your local health department by the 10th calendar day of the next reporting period.
	10/29/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.65	
	10/30/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.6	
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		
			<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No		

Sample Collector(s): Larry Dema, Fred McQuillan

Name of NYSDOH Certified Laboratory: WCDLR 10108

Did any MCL violation occur? If so, please describe: _____

Did an emergency or low pressure problem occur? Did source water bypass an existing treatment process in the system? If so, please explain. _____

Comments: _____

Entry Point Disinfection Monitoring, CT Value Calculations Unfiltered Surface Water Supplies

ENTRY POINT DISINFECTION MONITORING

DATE	Free Chlorine Residual Mg/l					
	0000	0400	0800	1200	1600	2000
1	1.72	1.50	1.62	1.28	1.72	1.75
2	1.73	1.71	2.00	2.00	1.63	1.68
3	1.65	1.78	1.52	1.40	1.70	1.80
4	1.78	1.92	2.30	1.52	1.71	1.76
5	1.75	1.97	1.82	1.55	1.78	1.85
6	1.75	1.70	1.65	1.65	1.68	1.70
7	1.63	1.68	1.65	1.61	1.65	1.68
8	1.68	1.62	1.60	1.55	1.69	1.71
9	1.65	1.60	1.60	1.63	1.61	1.55
10	1.70	1.70	1.60	1.60	1.65	1.55
11	1.70	1.68	1.60	1.60	1.63	1.67
12	1.74	1.69	1.63	1.60	1.65	1.80
13	1.65	1.60	1.72	1.55	1.62	1.66
14	1.72	1.83	1.68	1.72	1.71	1.69
15	1.60	1.65	1.70	1.67	1.73	1.70
16	1.75	1.70	1.68	1.69	1.69	1.70
17	1.75	1.75	1.72	1.60	1.70	1.70
18	1.75	1.68	1.69	1.67	1.66	1.72
19	1.70	1.68	1.65	1.69	1.70	1.72
20	1.70	1.66	1.67	1.65	1.68	1.72
21	1.72	1.70	1.87	2.60	1.85	1.80
22	1.68	1.70	1.70	1.68	1.72	1.75
23	1.68	1.68	1.64	1.73	1.61	1.62
24	1.68	1.64	1.60	1.58	1.61	1.60
25	1.62	1.62	1.60	1.59	1.62	1.75
26	1.65	1.70	1.67	1.67	1.68	1.73
27	1.63	1.65	1.65	1.57	1.65	1.67
28	1.64	1.60	1.66	1.60	1.63	1.70
29	1.69	1.65	1.67	1.60	1.61	1.71
30	1.67	1.63	1.65	1.67	1.63	1.67
31	1.68	1.65	1.65	1.65	1.62	1.61

1. Parameters used in determining CT values are taken at the first user at peak hourly flow conditions
2. CT value equals product of free chlorine residual in mg/l(1), and contact time in minutes (2).
(1) x (2) = (3)
3. If multiple chlorination points are utilized for CT evaluation, additional sheets should be attached.

DATE	CT VALUE COMPUTATION					Reqd. CT Value mg.min/l
	Water pH	Water Temp °C	Free Chlorine Residual mg/l	Contact Time, min	CT Value mg.min/l	
1	7.35	12.3	1.83			
2	7.32	11.9	1.76			
3	7.40	11.8	1.71			
4	7.33	11.5	1.68			
5	7.42	11.5	1.72			
6	7.30	11.4	1.60			
7	7.30	11.7	1.70			
8	7.28	11.7	1.67			
9	7.30	11.7	1.65			
10	7.30	11.6	1.70			
11	7.25	11.4	1.75			
12	7.31	11.7	1.73			
13	7.34	11.7	1.65			
14	7.33	11.7	1.70			
15	7.25	11.9	1.65			
16	7.32	11.7	1.62			
17	7.27	11.7	1.72			
18	7.30	11.4	1.71			
19	7.25	10.9	1.60			
20	7.25	10.9	1.70			
21	7.23	10.9	1.71			
22	7.25	10.7	1.65			
23	7.30	10.7	1.61			
24	7.26	10.7	1.53			
25	7.25	10.6	1.55			
26	7.25	10.6	1.60			
27	7.28	10.6	1.71			
28	7.31	10.5	1.68			
29	7.33	11.0	1.63			
30	7.31	10.7	1.55			
31	7.35	10.5	1.71			

1. Minimum number of residual samples per day _____
2. Record values every four hours if continuous monitoring required, or if residual falls below 0.2 mg/l, and notify state.

Reported by _____

Date 11/09/15

Title _____

Signature _____

Cert. No. _____

Westchester County Water District #1

LT2 Compliant water report 2015

October	LT2 Compliant Water Gal.	Non Compliant Water Gal.
White Plains	0	289,988,000
Scarsdale	20,861,000	67,568,000
Yonkers	162,358,000	0
Mount Vernon	226,690,000	0
Monthly Total	409,909,000	357,556,000

Sample No. **AR21469**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG NM

Bottle No : 17-2829

VALHALLA, NY

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/02/2015 AT 8:50:00AM

Submitted On : 10/02/2015 AT 12:50:00PM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.75

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/02/2015 AT 1:51:00PM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	2	SM20 9215B

Approved By *Jian Cai*

QA Officer

Date Approved : 10/05/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/5/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR21587**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG NM

Bottle No : 20-8056

VALHALLA, NY

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/05/2015 AT 9:54:00AM

Submitted On : 10/05/2015 AT 11:38:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.80

Residual Cl2 :

Sample chilled on arrival ? : YES

add'l Report To :

Sample Type : POT_DW

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/05/2015 AT 11:50:00AM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	1	SM20 9215B

Approved By *Jian Cai*

QA Officer

Date Approved : 10/07/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/7/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR21706**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : NM ERG

VALHALLA, NY

Bottle No : 24-1536

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/06/2015 AT 10:50:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/06/2015 AT 11:45:00AM

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.65

Residual Cl2 :

Sample chilled on arrival ? : YES

add'l Report To :

Sample Type : POT_DW

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/06/2015 AT 2:36:00PM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	3	SM20 9215B

Approved By *Jian Cai*

QA Officer

Date Approved : 10/08/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/8/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR21815**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : NM

Bottle No : 10-8052

VALHALLA, NY

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/07/2015 AT 8:50:00AM

Submitted On : 10/07/2015 AT 11:07:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.70

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/07/2015 AT 11:57:00AM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	2	SM20 9215B

Approved By *Jian Cai*

QA Officer

Date Approved : 10/09/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/9/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR21920**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : NM

Bottle No : 23-7288

VALHALLA, NY

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/08/2015 AT 8:46:00AM

Submitted On : 10/08/2015 AT 12:10:00PM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.70

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/08/2015 AT 1:11:00PM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	5	SM20 9215B

Approved By *Jian Cai*

QA Officer

Date Approved : 10/13/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/13/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR22004**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : NM

VALHALLA, NY

Bottle No : 17-6893

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/09/2015 AT 9:37:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/09/2015 AT 10:52:00AM

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.65

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/09/2015 AT 11:59:00AM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count Note: estc 1140	CFU/ml	>300	SM20 9215B

Approved By *Jian Cai*

QA Officer

Date Approved : 10/13/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/13/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR22128**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG

VALHALLA, NY

Bottle No : 15-1990

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/13/2015 AT 9:06:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/13/2015 AT 10:16:00AM

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.65

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/13/2015 AT 11:14:00AM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	2	SM20 9215B

Approved By *Jian Cai*

QA Officer

Date Approved : 10/15/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/15/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR22270**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG RRC

Bottle No : 27-2419

VALHALLA, NY

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/14/2015 AT 9:08:00AM

Submitted On : 10/14/2015 AT 11:35:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.70

Residual Cl2 :

Sample chilled on arrival ? : YES

add'l Report To :

Sample Type : POT_DW

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/14/2015 AT 2:39:00PM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	4	SM20 9215B

Approved By *Jian Cai*

QA Officer

Date Approved : 10/16/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/16/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR22340**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG RRC

VALHALLA, NY

Bottle No : 5-2647

Collection Point : TREATED

Collected By : DEMA

ID of Source : WWD1

Collection Date : 10/15/2015 AT 8:05:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/15/2015 AT 9:56:00AM

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.67

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/15/2015 AT 10:49:00AM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	2	SM20 9215B

Approved By *Jian Cai*

QA Officer

Date Approved : 10/19/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/19/2015

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These analytical results relate only to the sample identified in this report.

Sample No. **AR22460**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG

VALHALLA, NY

Bottle No : 17-2677

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/16/2015 AT 8:30:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/16/2015 AT 10:29:00AM

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.60

Residual Cl2 :

Sample chilled on arrival ? : YES

add'l Report To :

Sample Type : POT_DW

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/16/2015 AT 11:04:00AM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	2	SM20 9215B

Approved By *Jian Cai*

QA Officer

Date Approved : 10/19/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/19/2015

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These analytical results relate only to the sample identified in this report.

Sample No. **AR22563**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG

VALHALLA, NY

Bottle No : 20-2822

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/19/2015 AT 10:02:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/19/2015 AT 11:01:00AM

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.65

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/19/2015 AT 11:07:00AM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	10	SM20 9215B

Approved By *David Vinci*

Chief of Environmental Labs

Date Approved : 10/22/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/22/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR22636**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : NM ERG

VALHALLA, NY

Bottle No : 18-2927

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/20/2015 AT 8:30:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/20/2015 AT 10:13:00AM

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.95

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/20/2015 AT 10:56:00AM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	<1	SM20 9215B

Approved By *Jian Cai*

QA Officer

Date Approved : 10/22/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/22/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR22821**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG

VALHALLA, NY

Bottle No : 43-2786

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/21/2015 AT 12:25:00PM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/21/2015 AT 1:28:00PM

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.70

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/21/2015 AT 2:48:00PM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	1	SM20 9215B

Approved By *Jian Cai*

QA Officer

Date Approved : 10/23/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/23/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR22900**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG

VALHALLA, NY

Bottle No : 13-2802

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/22/2015 AT 10:09:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/22/2015 AT 10:44:00AM

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.65

Residual Cl2 :

Sample chilled on arrival ? : YES

add'l Report To :

Sample Type : POT_DW

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/22/2015 AT 11:56:00AM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	1	SM20 9215B

Approved By *Jian Cai*

QA Officer

Date Approved : 10/26/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/26/2015

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These analytical results relate only to the sample identified in this report.

Sample No. **AR23002**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : NM ERG

Bottle No : 18-2900

VALHALLA, NY

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/23/2015 AT 9:43:00AM

Submitted On : 10/23/2015 AT 11:15:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.65

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/23/2015 AT 11:23:00AM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	1	SM20 9215B

Approved By *Jian Cai*

QA Officer

Date Approved : 10/26/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/26/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR23098**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : NM

VALHALLA, NY

Bottle No : 13-8115

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/26/2015 AT 10:39:00AM

Submitted On : 10/26/2015 AT 11:27:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.65

Residual Cl2 :

Sample chilled on arrival ? : YES

add'l Report To :

Sample Type : POT_DW

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/26/2015 AT 11:45:00AM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	2	SM20 9215B

Approved By *Jian Cai*

QA Officer

Date Approved : 10/28/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/28/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR23201**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG

VALHALLA, NY

Bottle No : 19-2290

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/27/2015 AT 10:45:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/27/2015 AT 12:10:00PM

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.70

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/27/2015 AT 2:45:00PM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	1	SM20 9215B

Approved By *Jian Cai*

QA Officer

Date Approved : 10/29/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/29/2015

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These analytical results relate only to the sample identified in this report.

Sample No. **AR23302**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : NM

VALHALLA, NY

Bottle No : 16-2688

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/28/2015 AT 8:32:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/28/2015 AT 11:22:00AM

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.68

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/28/2015 AT 11:59:00AM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	4	SM20 9215B

Approved By *Jian Cai*

QA Officer

Date Approved : 10/30/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/30/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR23387**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG

VALHALLA, NY

Bottle No : 15-1866

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/29/2015 AT 10:05:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/29/2015 AT 12:28:00PM

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.65

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/29/2015 AT 2:10:00PM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	4	SM20 9215B

Approved By **Sandy Vannelli**

VOC Supervisor

Date Approved : 11/02/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 11/2/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR23454**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : RRC

VALHALLA, NY

Bottle No : 17-2447

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/30/2015 AT 10:47:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/30/2015 AT 12:53:00PM

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.60

Residual Cl2 :

Sample chilled on arrival ? : YES

add'l Report To :

Sample Type : POT_DW

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/30/2015 AT 1:13:00PM	
Coliform Presence/Absence Test	per 100ml	Absent	Colilert-18
Heterotrophic Plate Count	CFU/ml	2	SM20 9215B

Approved By **Sandy Vannelli**

VOC Supervisor

Date Approved : 11/02/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 11/2/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR22129**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG

VALHALLA, NY

Bottle No : 16-3693

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/13/2015 AT 9:07:00AM

Submitted On : 10/13/2015 AT 10:15:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.65

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/13/2015 AT 10:31:00AM	
Diatomaceae Organisms TABELLARIA-15	ASU per ml	15	SM1810200F
Chlorophyceae Organisms	ASU per ml	0	SM1810200F
Cyanophyceae Organisms	ASU per ml	0	SM1810200F
Protozoa Organisms DINOBYON-23	ASU per ml	23	SM1810200F
Rotifera Organisms	ASU per ml	0	SM1810200F
Crustaceae Organisms	ASU per ml	0	SM1810200F
Other Microscopic Organisms	ASU per ml	0	SM1810200F
Amorphous Matter	ASU per ml	46	SM1810200F

Approved By *David Vinci*

Chief of Environmental Labs

Date Approved : 10/14/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/14/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR23097**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : NM

VALHALLA, NY

Bottle No : 12-3787

Collection Point : TREATED

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/26/2015 AT 10:38:00AM

Submitted On : 10/26/2015 AT 11:27:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.65

Residual Cl2 :

Sample chilled on arrival ? : N/A

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/26/2015 AT 11:49:00AM	
Diatomaceae Organisms	ASU per ml	0	SM1810200F
Chlorophyceae Organisms	ASU per ml	0	SM1810200F
Cyanophyceae Organisms	ASU per ml	0	SM1810200F
Protozoa Organisms	ASU per ml	0	SM1810200F
Rotifera Organisms	ASU per ml	0	SM1810200F
Crustaceae Organisms	ASU per ml	0	SM1810200F
Other Microscopic Organisms	ASU per ml	0	SM1810200F
Total Microscopic Organisms	ASU per ml	<1	SM18 10200F
Amorphous Matter	ASU per ml	296	SM1810200F

NYSDOH ELAP and NELAC do not offer accreditation for Microscopic Examination. Unless the sample is otherwise qualified, all method QC requirements were found to be acceptable.

Approved By *David Vinci*

Chief of Environmental Labs

Date Approved : 10/28/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/28/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR21470**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG NM

Bottle No : 18-8176T

VALHALLA, NY

Collection Point : RAW

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/02/2015 AT 8:50:00AM

Submitted On : 10/02/2015 AT 8:51:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_SRC

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/02/2015 AT 1:51:00PM	
Heterotrophic Plate Count	CFU/ml	38	SM20 9215B
Coliform, Most Probable Number	per 100ml	17	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	7.8	SM20 9221E

Approved By *Jian Cai*

QA Officer

Date Approved : 10/06/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/6/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR21585**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG NM

VALHALLA, NY

Bottle No : 19-7221T

Collection Point : RAW

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/05/2015 AT 9:55:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/05/2015 AT 11:38:00AM

PWS No. : 5903488

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_SRC

addtl Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/05/2015 AT 11:50:00AM	
Heterotrophic Plate Count	CFU/ml	44	SM20 9215B
Coliform, Most Probable Number	per 100ml	4.5	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	<1.8	SM20 9221E

Approved By *Jian Cai*

QA Officer

Date Approved : 10/09/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/9/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR21704**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : NM ERG

Bottle No : 23-8190T

VALHALLA, NY

Collection Point : RAW

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/06/2015 AT 10:48:00AM

Submitted On : 10/06/2015 AT 11:44:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_SRC

addtl Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/06/2015 AT 2:36:00PM	
Heterotrophic Plate Count	CFU/ml	55	SM20 9215B
Coliform, Most Probable Number	per 100ml	7.8	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	<1.8	SM20 9221E

Approved By *Jian Cai*

QA Officer

Date Approved : 10/13/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/13/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR21813**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : NM

VALHALLA, NY

Bottle No : 9-2967T

Collection Point : RAW

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/07/2015 AT 8:51:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/07/2015 AT 11:07:00AM

PWS No. : 5903488

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_SRC

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/07/2015 AT 11:57:00AM	
Heterotrophic Plate Count	CFU/ml	58	SM20 9215B
Coliform, Most Probable Number	per 100ml	11	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	2.0	SM20 9221E

Approved By *Jian Cai*

QA Officer

Date Approved : 10/13/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/13/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR21918**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : NM

VALHALLA, NY

Bottle No : 22-2664T

Collection Point : RAW

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/08/2015 AT 8:47:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/08/2015 AT 12:10:00PM

PWS No. : 5903488

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_SRC

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/08/2015 AT 12:34:00PM	
Heterotrophic Plate Count	CFU/ml	53	SM20 9215B
Coliform, Most Probable Number	per 100ml	2.0	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	<1.8	SM20 9221E

Approved By *Jian Cai*

QA Officer

Date Approved : 10/13/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/13/2015

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These analytical results relate only to the sample identified in this report.

Sample No. **AR22002**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : NM

VALHALLA, NY

Bottle No : 16-7232T

Collection Point : RAW

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/09/2015 AT 9:38:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/09/2015 AT 10:52:00AM

PWS No. : 5903488

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_SRC

addtl Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/09/2015 AT 11:59:00AM	
Heterotrophic Plate Count	CFU/ml	67	SM20 9215B
Coliform, Most Probable Number	per 100ml	2.0	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	<1.8	SM20 9221E

Approved By *Jian Cai*

QA Officer

Date Approved : 10/13/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/13/2015

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These analytical results relate only to the sample identified in this report.

Sample No. **AR22126**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG

VALHALLA, NY

Bottle No : 14-8159T

Collection Point : RAW

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/13/2015 AT 9:05:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/13/2015 AT 10:16:00AM

PWS No. : 5903488

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_SRC

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/13/2015 AT 11:14:00AM	
Heterotrophic Plate Count	CFU/ml	288	SM20 9215B
Coliform, Most Probable Number	per 100ml	7.8	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	2.0	SM20 9221E

Approved By *Jian Cai*

QA Officer

Date Approved : 10/19/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/19/2015

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These analytical results relate only to the sample identified in this report.

Sample No. **AR22271**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG RRC

VALHALLA, NY

Bottle No : 28-7220T

Collection Point : RAW

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/14/2015 AT 9:10:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/14/2015 AT 11:49:00AM

PWS No. : 5903488

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

add'l Report To :

Sample Type : POT_SRC

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/14/2015 AT 2:39:00PM	
Heterotrophic Plate Count	CFU/ml	36	SM20 9215B
Coliform, Most Probable Number	per 100ml	13	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	<1.8	SM20 9221E

Approved By *Jian Cai*

QA Officer

Date Approved : 10/19/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/19/2015

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These analytical results relate only to the sample identified in this report.

Sample No. **AR22338**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG RRC

VALHALLA, NY

Bottle No : 4-7230T

Collection Point : RAW

Collected By : DEMA

ID of Source : WWD1

Collection Date : 10/15/2015 AT 8:00:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/15/2015 AT 9:56:00AM

PWS No. : 5903488

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

add'l Report To :

Sample Type : POT_SRC

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/15/2015 AT 10:49:00AM	
Heterotrophic Plate Count	CFU/ml	54	SM20 9215B
Coliform, Most Probable Number	per 100ml	17	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	4.5	SM20 9221E

Approved By *Jian Cai*

QA Officer

Date Approved : 10/19/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/19/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR22461**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG

VALHALLA, NY

Bottle No : 18-8179T

Collection Point : RAW

Collected By : MCQUILLAN

ID of Source : VWD1

Collection Date : 10/16/2015 AT 8:31:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/16/2015 AT 10:30:00AM

PWS No. : 5903488

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_SRC

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/16/2015 AT 11:04:00AM	
Heterotrophic Plate Count	CFU/ml	18	SM20 9215B
Coliform, Most Probable Number	per 100ml	1.8	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	<1.8	SM20 9221E

Approved By *Jian Cai*

QA Officer

Date Approved : 10/20/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/20/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR22561**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG

VALHALLA, NY

Bottle No : 19-2980T

Collection Point : RAW

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/19/2015 AT 10:03:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/19/2015 AT 11:01:00AM

PWS No. : 5903488

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_SRC

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/19/2015 AT 11:07:00AM	
Heterotrophic Plate Count	CFU/ml	53	SM20 9215B
Coliform, Most Probable Number	per 100ml	4.5	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	<1.8	SM20 9221E

Approved By *Jian Cai*

QA Officer

Date Approved : 10/23/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/23/2015

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These analytical results relate only to the sample identified in this report.

Sample No. **AR22634**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : NM ERG

Bottle No : 17-8194T

VALHALLA, NY

Collection Point : RAW

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/20/2015 AT 8:29:00AM

Submitted On : 10/20/2015 AT 10:13:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_SRC

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/20/2015 AT 10:56:00AM	
Heterotrophic Plate Count	CFU/ml	40	SM20 9215B
Coliform, Most Probable Number	per 100ml	14	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	1.8	SM20 9221E

Approved By *Jian Cai*

QA Officer

Date Approved : 10/26/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/26/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR22819**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG

Bottle No : 42-8167T

VALHALLA, NY

Collection Point : RAW

Collected By : MCQUILLAN

Collection Date : 10/21/2015 AT 12:24:00PM

ID of Source : WWD1

Submitted On : 10/21/2015 AT 1:28:00PM

PWS No. : 5903488

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_SRC

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/21/2015 AT 2:12:00PM	
Heterotrophic Plate Count	CFU/ml	40	SM20 9215B
Coliform, Most Probable Number	per 100ml	6.8	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	<1.8	SM20 9221E

Approved By *Jian Cai*

QA Officer

Date Approved : 10/26/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/26/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR22898**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG

VALHALLA, NY

Bottle No : 12-8176T

Collection Point : RAW

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/22/2015 AT 10:10:00AM

Submitted On : 10/22/2015 AT 10:44:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_SRC

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/22/2015 AT 11:56:00AM	
Heterotrophic Plate Count	CFU/ml	34	SM20 9215B
Coliform, Most Probable Number	per 100ml	23	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	<1.8	SM20 9221E

Approved By *Jian Cai*

QA Officer

Date Approved : 10/26/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/26/2015

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These analytical results relate only to the sample identified in this report.

Sample No. **AR23003**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : NM ERG

Bottle No : 19-7221T

VALHALLA, NY

Collection Point : RAW

Collected By : MCQUILLAN

Collection Date : 10/23/2015 AT 9:44:00AM

ID of Source : WWD1

Submitted On : 10/23/2015 AT 11:15:00AM

PWS No. : 5903488

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

add'l Report To :

Sample Type : POT_SRC

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/23/2015 AT 11:23:00AM	
Heterotrophic Plate Count	CFU/ml	240	SM20 9215B
Coliform, Most Probable Number	per 100ml	4.5	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	<1.8	SM20 9221E

Approved By *Jian Cai*

QA Officer

Date Approved : 10/27/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/27/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR23099**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : NM

VALHALLA, NY

Bottle No : 14-2967T

Collection Point : RAW

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/26/2015 AT 10:40:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/26/2015 AT 11:27:00AM

PWS No. : 5903488

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

addtl Report To :

Sample Type : POT_SRC

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/26/2015 AT 11:45:00AM	
Heterotrophic Plate Count	CFU/ml	141	SM20 9215B
Coliform, Most Probable Number	per 100ml	2.0	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	<1.8	SM20 9221E

Approved By *Jian Cai*

QA Officer

Date Approved : 10/30/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/30/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR23202**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : ERG

VALHALLA, NY

Bottle No : 20-8159T

Collection Point : RAW

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/27/2015 AT 10:46:00AM

Submitted On : 10/27/2015 AT 12:10:00PM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_SRC

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/27/2015 AT 2:45:00PM	
Heterotrophic Plate Count	CFU/ml	82	SM20 9215B
Coliform, Most Probable Number	per 100ml	<1.8	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	<1.8	SM20 9221E

Approved By **Sandy Vannelli**

VOC Supervisor

Date Approved : 11/02/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 11/2/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR23303**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : NM

VALHALLA, NY

Bottle No : 17-7220T

Collection Point : RAW

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/28/2015 AT 8:33:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/28/2015 AT 11:22:00AM

PWS No. : 5903488

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

add'l Report To :

Sample Type : POT_SRC

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/28/2015 AT 11:59:00AM	
Heterotrophic Plate Count	CFU/ml	44	SM20 9215B
Coliform, Most Probable Number	per 100ml	7.8	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	<1.8	SM20 9221E

Approved By **Sandy Vannelli**

VOC Supervisor

Date Approved : 11/02/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 11/2/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR23385**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO
VALHALLA, NY
Collection Point : RAW
ID of Source : WWD1
Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Received By : ERG
Bottle No : 14-2664T

Collected By : MCQUILLAN
Collection Date : 10/29/2015 AT 10:06:00AM
Submitted On : 10/29/2015 AT 12:28:00PM
PWS No. : 5903488
Type Descriptor : 002 **Source ID :** 000
pH :
Free Cl2 : **Residual Cl2 :**
Sample chilled on arrival ? : YES
Sample Type : POT_SRC

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/29/2015 AT 2:10:00PM	
Heterotrophic Plate Count	CFU/ml	84	SM20 9215B
Coliform, Most Probable Number	per 100ml	<1.8	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	<1.8	SM20 9221E

Approved By **Sandy Vannelli**

VOC Supervisor

Date Approved : 11/02/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 11/2/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR23455**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : KENSICO

Received By : RRC

Bottle No : 18-2966

VALHALLA, NY

Collection Point : RAW

Collected By : MCQUILLAN

ID of Source : WWD1

Collection Date : 10/30/2015 AT 10:48:00AM

Submitted On : 10/30/2015 AT 12:53:00PM

PWS No. : 5903488

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Type Descriptor : 002

Source ID : 000

pH :

Free Cl2 :

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_SRC

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/30/2015 AT 1:13:00PM	
Heterotrophic Plate Count	CFU/ml	75	SM20 9215B
Coliform, Most Probable Number	per 100ml	4.5	SM20 9221B
Fecal Coliform, Most Probable Number	per 100ml	2.0	SM20 9221E

Approved By *David Vinci*

Chief of Environmental Labs

Date Approved : 11/04/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 11/4/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Public Water System Name			Reporting Month/Year		Date Report Submitted			Source Water Type(s)	
WWD #1 Shaft 22			Oct '15		11/09/15			Surface Water	
Public Water System ID			County		Town, Village, or City				
NY 5903488			Westchester		Yonkers				
DATE	Source(s) in Use	Treated water volume (1,000 gallons/day)	Chlorination			Other Treatments / Readings			
			Chlorine used per day (lbs)	Free chlorine residual at entry point (mg/l)	Caustic Gal Used	Ortho Gal Used	Treated Turb	pH	
1	Del Aq.	12,700	110	1.67	315	70	0.69	7.45	
2	Del Aq.	12,600	110	1.78	325	75	0.66	7.68	
3	Del Aq.	12,200	110	1.60	245	80	0.83	7.55	
4	Del Aq.	12,350	110	1.52	270	75	0.78	7.54	
5	Del Aq.	12,850	110	1.36	230	80	0.76	7.55	
6	Del Aq.	11,700	220	1.52	120	35	0.76	7.46	
7	Del Aq.	13,800	110	1.60	265	122	0.73	7.51	
8	Del Aq.	13,800	165	1.37	150	0	0.76	7.54	
9	Del Aq.	10,020	165	1.52	30	0	0.76	7.56	
10	Del Aq.	13,560	165	1.50	0	0	0.88	6.80	
11	Del Aq.	13,660	165	1.80	0	0	0.93	6.65	
12	Del Aq.	11,660	165	1.60	0	0	0.83	6.84	
13	Del Aq.	13,600	110	1.65	260	128	0.83	6.68	
14	Del Aq.	13,000	110	1.57	200	130	0.78	7.53	
15	Del Aq.	12,550	110	1.60	250	105	0.84	7.54	
16	Del Aq.	11,463	165	1.25	250	110	0.77	7.64	
17	Del Aq.	13,039	220	1.52	262	110	0.77	7.53	
18	Del Aq.	15,448	165	1.64	263	105	0.77	7.47	
19	Del Aq.	13,100	165	1.56	245	100	0.72	7.53	
20	Del Aq.	14,900	165	1.37	280	100	0.70	7.54	
21	Del Aq.	15,700	165	1.30	275	110	0.72	7.37	
22	Del Aq.	15,200	220	1.47	275	100	0.70	7.54	
23	Del Aq.	14,700	165	1.51	250	115	0.73	7.55	
24	Del Aq.	13,800	275	1.40	245	100	0.78	7.55	
25	Del Aq.	15,300	220	1.57	260	110	0.74	7.55	
26	Del Aq.	14,700	220	1.47	245	100	0.73	7.54	
27	Del Aq.	13,800	220	1.52	225	105	0.72	7.50	
28	Del Aq.	14,200	220	1.44	250	110	0.71	7.52	
29	Del Aq.	14,927	220	1.45	287	110	0.88	7.50	
30	Del Aq.	13,821	220	1.62	280	110	0.92	7.52	
31	Del Aq.	13,680	220	1.70	200	107	0.82	7.55	
Total		417,828	5,280		6,752	2,602			
AVG.		13,478	170	1.53	218	84	0.77	7.43	

Chlorine Mix Ratio: _____ qts/gals of _____ % chlorine added to _____ gals of water

Reported by: H. [Signature] Title: Sup of Water NYS DOH Operator Certification Number: N110322H

Signature: [Signature] Date: 11/9/15 Operator Grade Level: FB

Microbiological Samples and Free Chlorine Residual

Sample Location	Date of Sample	Sample Type 1.Routine	Total Coliform Positive <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	E. coli Positive <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Free Chlorine Residual (mg/l)	Population Served: _____
Shaft-22	10/1/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.67	Number of microbiological monitoring samples required: 8
	10/6/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.63	Number of microbiological monitoring samples taken: 8
	10/8/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.47	Did an M&R violation occur? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	10/13/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.59	If "Yes," check reason (s) below: Actual number of samples is fewer than required. Did not collect/analyze repeat sample. Did not collect/analyze for E. coli for positive total coliform from routine/repeat sample.
	10/15/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.59	
	10/20/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.37	Did an MCL violation occur? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No
	10/22/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.45	If "Yes," check reason(s) below (see also Part 5, Table 6 for additional information). For systems collecting less than 40 samples per month: two or more of the samples (routine and /or repeat) are positive for total coliform (= total coliform MCL violation). For systems collecting 40 or more samples per month: more than 5% of the samples (routine and/or repeat) are positive for total coliform (= total coliform MCL violation).
	10/26/2015	1	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	1.47	
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		The original sample was E. coli positive and at least 1 repeat sample was positive for total coliform (= E.coli MCL violation).
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		Reminder: System must collect a minimum of five (5) routine microbiological monitoring samples during the month following a repeat sample collection.
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		As required by 5-1.72, "Operation of a Public Water System," a copy of this form shall be sent to your local health department by the 10th calendar day of the next reporting period.
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		
			<input type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No		

Sample Collector(s): Larry Dema

Name of NYSDOH Certified Laboratory: WCDLR-10108

Did any MCL violation occur? If so, please describe: _____

Did an emergency or low pressure problem occur? Did source water bypass an existing treatment process in the system? If so, please explain. _____

Comments: _____

Sample No. **AR21271**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : SHAFT 22

Received By : NM ERG

YONKERS, NY

Bottle No : 4-7063

Collection Point : TREATED

Collected By : DEMA

ID of Source : WWD1

Collection Date : 10/01/2015 AT 8:15:00AM

Submitted On : 10/01/2015 AT 9:22:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.67

Residual Cl2 :

Sample chilled on arrival ? : YES

add'l Report To :

Sample Type : POT_DW

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/01/2015 AT 10:14:00AM	
Heterotrophic Plate Count Note: estc 712	CFU/ml	>300	SM20 9215B
Coliform, Presence/Absence Test	per 100ml	Absent	SM20 9221D

Approved By *Jian Cai*

QA Officer

Date Approved : 10/05/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/5/2015

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These analytical results relate only to the sample identified in this report.

Sample No. **AR21728**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : SHAFT 22

Received By : ERG

Bottle No : 38-8111

YONKERS, NY

Collection Point : TREATED

Collected By : DEMA

ID of Source : WWD1

Collection Date : 10/06/2015 AT 8:30:00AM

Submitted On : 10/06/2015 AT 2:09:00PM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.63

Residual Cl2 :

Sample chilled on arrival ? : YES

addtl Report To :

Sample Type : POT_DW

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/06/2015 AT 2:36:00PM	
Heterotrophic Plate Count	CFU/ml	5	SM20 9215B
Coliform, Presence/Absence Test	per 100ml	Absent	SM20 9221D

Approved By *Jian Cai*

QA Officer

Date Approved : 10/08/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/8/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR21869**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : SHAFT 22

Received By : NM

YONKERS, NY

Bottle No : 3-6889

Collection Point : TREATED

Collected By : DEMA

ID of Source : WWD1

Collection Date : 10/08/2015 AT 8:00:00AM

Submitted On : 10/08/2015 AT 8:39:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.47

Residual Cl2 :

Sample chilled on arrival ? : YES

add'l Report To :

Sample Type : POT_DW

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/08/2015 AT 10:37:00AM	
Heterotrophic Plate Count Note: estc 1898	CFU/ml	>300	SM20 9215B
Coliform, Presence/Absence Test	per 100ml	Absent	SM20 9221D

Approved By *Jian Cai*

QA Officer

Date Approved : 10/13/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/13/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR22114**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : SHAFT 22

Received By : NM ERG

YONKERS, NY

Bottle No : 3-2606

Collection Point : TREATED

Collected By : DEMA

ID of Source : WWD1

Collection Date : 10/13/2015 AT 8:00:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/13/2015 AT 8:22:00AM

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.59

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/13/2015 AT 10:18:00AM	
Heterotrophic Plate Count	CFU/ml	1	SM20 9215B
Coliform, Presence/Absence Test	per 100ml	Absent	SM20 9221D

Approved By *Jian Cai*

QA Officer

Date Approved : 10/15/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/15/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR22341**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : SHAFT 22

Received By : ERG RRC

YONKERS, NY

Bottle No : 6-2620

Collection Point : TREATED

Collected By : DEMA

ID of Source : WWD1

Collection Date : 10/15/2015 AT 8:40:00AM

Submitted On : 10/15/2015 AT 9:56:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.59

Residual Cl2 :

Sample chilled on arrival ? : YES

add'l Report To :

Sample Type : POT_DW

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/15/2015 AT 10:49:00AM	
Heterotrophic Plate Count	CFU/ml	106	SM20 9215B
Coliform, Presence/Absence Test	per 100ml	Absent	SM20 9221D

Approved By *Jian Cai*

QA Officer

Date Approved : 10/19/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/19/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR22680**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : SHAFT 22

Received By : ERG

YONKERS, NY

Bottle No : 32-8056

Collection Point : TREATED

Collected By : DEMA

ID of Source : WWD1

Collection Date : 10/20/2015 AT 8:00:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/20/2015 AT 1:23:00PM

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.37

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/20/2015 AT 3:34:00PM	
Heterotrophic Plate Count	CFU/ml	<1	SM20 9215B
Coliform, Presence/Absence Test	per 100ml	Absent	SM20 9221D

Approved By *Jian Cai*

QA Officer

Date Approved : 10/22/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/22/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR22891**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : SHAFT 22

Received By : RRC ERG

Bottle No : 6-2797

YONKERS, NY

Collection Point : TREATED

Collected By : DEMA

ID of Source : WWD1

Collection Date : 10/22/2015 AT 7:50:00AM

Submitted On : 10/22/2015 AT 9:24:00AM

PWS No. : 5903488

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.45

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/22/2015 AT 10:39:00AM	
Heterotrophic Plate Count	CFU/ml	3	SM20 9215B
Coliform, Presence/Absence Test	per 100ml	Absent	SM20 9221D

Approved By *Jian Cai*

QA Officer

Date Approved : 10/26/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/26/2015

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These analytical results relate only to the sample identified in this report.

Sample No. **AR23088**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : SHAFT 22

Received By : ERG NM

Bottle No : 4-2532

YONKERS, NY

Collection Point : TREATED

Collected By : DEMA

ID of Source : WWD1

Collection Date : 10/26/2015 AT 8:25:00AM

Submitted On : 10/26/2015 AT 9:09:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.47

Residual Cl2 :

Sample chilled on arrival ? : YES

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/26/2015 AT 11:37:00AM	
Heterotrophic Plate Count	CFU/ml	2	SM20 9215B
Coliform, Presence/Absence Test	per 100ml	Absent	SM20 9221D

Approved By *Jian Cai*

QA Officer

Date Approved : 10/28/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/28/2015

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These analytical results relate only to the sample identified in this report.

Sample No. **AR23090**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : SHAFT 22

Received By : ERG NM

YONKERS, NY

Bottle No : 6-3693

Collection Point : TREATED

Collected By : DEMA

ID of Source : WWD1

Collection Date : 10/26/2015 AT 8:30:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/26/2015 AT 9:09:00AM

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.47

Residual Cl2 :

Sample chilled on arrival ? : N/A

Sample Type : POT_DW

add'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/26/2015 AT 9:39:00AM	
Diatomaceae Organisms ASTERIONELLA-15	ASU per ml	15	SM1810200F
Chlorophyceae Organisms	ASU per ml	0	SM1810200F
Cyanophyceae Organisms	ASU per ml	0	SM1810200F
Protozoa Organisms DINOBYRON-15	ASU per ml	15	SM1810200F
Rotifera Organisms	ASU per ml	0	SM1810200F
Crustaceae Organisms	ASU per ml	0	SM1810200F
Other Microscopic Organisms	ASU per ml	0	SM1810200F
Total Microscopic Organisms	ASU per ml	30	SM18 10200F
Amorphous Matter	ASU per ml	114	SM1810200F

NYSDOH ELAP and NELAC do not offer accreditation for Microscopic Examination. Unless the sample is otherwise qualified, all method QC requirements were found to be acceptable.

Approved By *David Vinci*

Chief of Environmental Labs

Date Approved : 10/28/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/28/2015

Page 1 of 1

These analytical results relate only to the sample identified in this report.

Sample No. **AR22115**

REPORT OF ANALYSIS

Westchester County Department of Labs and Research

10 Dana Road Valhalla, New York 10595

Sample Location : SHAFT 22

Received By : NM ERG

YONKERS, NY

Bottle No : 4-1540

Collection Point : TREATED

Collected By : DEMA

ID of Source : WWD1

Collection Date : 10/13/2015 AT 8:05:00AM

Agency : Westchester County DEF
Operations Bldg., Grasslands
Valhalla, NY 10595
Attn: Mike Ferraro

Submitted On : 10/13/2015 AT 8:23:00AM

PWS No. : 5903488

Type Descriptor : 022

Source ID : 000

pH :

Free Cl2 : 1.59

Residual Cl2 :

Sample chilled on arrival ? : NA

Sample Type : POT_DW

addt'l Report To :

Comment :

Test Description	Units	Results	Method
Date/Time Set		10/13/2015 AT 9:20:00AM	
Diatomaceae Organisms	ASU per ml	38	SM1810200F
FRAGILARIA-23			
ASTERIONELLA-15			
Chlorophyceae Organisms	ASU per ml	0	SM1810200F
Cyanophyceae Organisms	ASU per ml	0	SM1810200F
Protozoa Organisms	ASU per ml	38	SM1810200F
DINOBYRON-38			
Rotifera Organisms	ASU per ml	0	SM1810200F
Crustaceae Organisms	ASU per ml	0	SM1810200F
Other Microscopic Organisms	ASU per ml	0	SM1810200F
Amorphous Matter	ASU per ml	122	SM1810200F

Approved By *David Vinci*

Chief of Environmental Labs

Date Approved : 10/14/2015

Environmental Laboratories
NYS ELAP # 10108
(914) 231-1620

EMAIL Original 10/14/2015

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These analytical results relate only to the sample identified in this report.