

September 13, 2018

Carey Maxwell
SJRWMD
PO Box 1429
Palatka, FL 32178

RE: Project: Paint Chips
Pace Project No.: 35414290

Dear Carey Maxwell:

Enclosed are the analytical results for sample(s) received by the laboratory on August 29, 2018. The results relate only to the samples included in this report. Results reported herein conform to the most current, applicable TNI/NELAC standards and the laboratory's Quality Assurance Manual, where applicable, unless otherwise noted in the body of the report.

If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Daniel Barrett
daniel.barrett@pacelabs.com
(813)881-9401
Project Manager

Enclosures

cc: Carey Maxwell, SJRWMD



REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
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CERTIFICATIONS

Project: Paint Chips

Pace Project No.: 35414290

Ormond Beach Certification IDs

8 East Tower Circle, Ormond Beach, FL 32174
Alabama Certification #: 41320
Connecticut Certification #: PH-0216
Florida Certification #: E83079
Georgia Certification #: 955
Guam Certification: FL NELAC Reciprocity
Hawaii Certification: FL NELAC Reciprocity
Illinois Certification #: 200068
Indiana Certification: FL NELAC Reciprocity
Kansas Certification #: E-10383
Kentucky Certification #: 90050
Louisiana Certification #: FL NELAC Reciprocity
Louisiana Environmental Certificate #: 05007
Maryland Certification: #346
Michigan Certification #: 9911
Mississippi Certification: FL NELAC Reciprocity
Missouri Certification #: 236
Montana Certification #: Cert 0074
Nebraska Certification: NE-OS-28-14

Nevada Certification: FL NELAC Reciprocity
New Hampshire Certification #: 2958
New Jersey Certification #: FL022
New York Certification #: 11608
North Carolina Environmental Certificate #: 667
North Carolina Certification #: 12710
North Dakota Certification #: R-216
Oklahoma Certification #: D9947
Pennsylvania Certification #: 68-00547
Puerto Rico Certification #: FL01264
South Carolina Certification: #96042001
Tennessee Certification #: TN02974
Texas Certification: FL NELAC Reciprocity
US Virgin Islands Certification: FL NELAC Reciprocity
Virginia Environmental Certification #: 460165
Wyoming Certification: FL NELAC Reciprocity
West Virginia Certification #: 9962C
Wisconsin Certification #: 399079670
Wyoming (EPA Region 8): FL NELAC Reciprocity

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SAMPLE SUMMARY

Project: Paint Chips
Pace Project No.: 35414290

Lab ID	Sample ID	Matrix	Date Collected	Date Received
35414290001	Palm S096	Solid	08/29/18 12:20	08/29/18 14:06

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SAMPLE ANALYTE COUNT

Project: Paint Chips
Pace Project No.: 35414290

Lab ID	Sample ID	Method	Analysts	Analytes Reported
35414290001	Palm S096	EPA 6010	LEC	1
		EPA 6010	SC1	1
		ASTM D2974-87	MLO	1

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ANALYTICAL RESULTS

Project: Paint Chips

Pace Project No.: 35414290

Sample: Palm S096 **Lab ID: 35414290001** Collected: 08/29/18 12:20 Received: 08/29/18 14:06 Matrix: Solid

Results reported on a "dry weight" basis and are adjusted for percent moisture, sample size and any dilutions.

Parameters	Results	Units	PQL	MDL	DF	Prepared	Analyzed	CAS No.	Qual
6010 MET ICP	Analytical Method: EPA 6010 Preparation Method: EPA 3050								
Lead	660	mg/kg	10	5.0	10	09/06/18 09:42	09/06/18 16:15	7439-92-1	
6010 MET ICP, TCLP	Analytical Method: EPA 6010 Preparation Method: EPA 3010								
	Leachate Method/Date: EPA 1311; 09/11/18 18:09 Initial pH: 5; Final pH: 5								
Lead	0.38	mg/L	0.010	0.0046	1	09/12/18 15:00	09/13/18 10:45	7439-92-1	
Percent Moisture	Analytical Method: ASTM D2974-87								
Percent Moisture	1.4	%	0.10	0.10	1		08/31/18 09:54		

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QUALIFIERS

Project: Paint Chips

Pace Project No.: 35414290

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

TNTC - Too Numerous To Count

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit - The lowest concentration value that meets project requirements for quantitative data with known precision and bias for a specific analyte in a specific matrix.

S - Surrogate

1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAC Institute.

SAMPLE QUALIFIERS

Sample: 35414290001

[1] Insufficient sample received from client to perform the analysis per EPA method requirements.

ANALYTE QUALIFIERS

I The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.

U Compound was analyzed for but not detected.

J(D6) Estimated Value. The relative percent difference (RPD) between the sample and sample duplicate exceeded laboratory control limits.

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QUALITY CONTROL DATA CROSS REFERENCE TABLE

Project: Paint Chips

Pace Project No.: 35414290

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
35414290001	Palm S096	EPA 3050	474718	EPA 6010	475175
35414290001	Palm S096	EPA 3010	476847	EPA 6010	476924
35414290001	Palm S096	ASTM D2974-87	473852		

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WO#: 35414290

CHAIN-OF-CUSTODY
The Chain-of-Custody is a LI



35414290

Section A
 Required Client Information:
 Company: SURWMD
 Address: PO Box 1429
 Palatka, FL 32178
 Email: cmaxwell@surwmd.com
 Phone: 386-937-0605 | Fax:

Section B
 Required Project Information:
 Report To: Caroy Maxwell
 Copy To:
 Purchase Order #:
 Project Name: Paint Chips
 Project #:

Section C
 Invoice Information:
 Attention:
 Company Name:
 Address:
 Pace Quoto:
 Pace Project Manager: daniel.barrett@pacelabs.com.
 Pace Profile #: 7314 line 5
 State / Location: FL
 Regulatory Agency:

ITEM #	MATRIX	MATRIX CODE	COLLECTED		SAMPLE TYPE (G-GRAB C-COMP)	MATRIX CODE (see valid codes to left)	SAMPLER TEMP AT COLLECTION	# OF CONTAINERS	Preservatives	Analyses Test Y/N	Requested Analysis Filtered (Y/N)	Residual Chlorine (Y/N)
			START DATE TIME	END DATE TIME								
1	Drinking Water	DW	08/29/18 12:00	08/29/18 12:20								
2	Water	WT										
3	Waste Water	WW										
4	Product	P										
5	Soil/Solid	SL										
6	Oil	OL										
7	Wipe	WP										
8	Air	AR										
9	Other	OT										
10	Tissue	TS										
11												
12												

ADDITIONAL COMMENTS
C. MAXWELL/SURWMD 08/29/18/1429 DPBR Pace

RELINQUISHED BY / AFFILIATION
C. MAXWELL/SURWMD 08/29/18/1429

ACCEPTED BY / AFFILIATION
DPBR Pace

DATE TIME
08/29/18 14:06

DATE TIME
08/29/18 14:06

SAMPLE CONDITIONS
Received on: _____
Intact (Y/N): _____
Custody (Y/N): _____
Sealed (Y/N): _____
Cooler (Y/N): _____
Samples Intact (Y/N): _____

SAMPLER NAME AND SIGNATURE
PRINT Name of SAMPLER: _____
SIGNATURE of SAMPLER: _____
DATE Signed: _____



Document Name:
Sample Condition Upon Receipt Form
Document No.:
F-FL-C-007 rev. 13

Document Revised:
May 30, 2018
Issuing Authority:
Pace Florida Quality Office

WO# : 35414290

Project #
Project Manager:
Client:

PM: DB1 Due Date: 09/06/18
CLIENT: 37-SJRWMD

Date and Initials of person:
Examining contents:
Label:
Deliver:
pH:

Thermometer Used: T337 Date: 8/29/18 Time: 1406 Initials: PBD

State of Origin: FL For WV projects, all containers verified to ≤ 6 °C

Cooler #1 Temp. °C 22.3 (Visual) 5.8 (Correction Factor) 23.1 (Actual) Samples on ice, cooling process has begun
Cooler #2 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual) Samples on ice, cooling process has begun
Cooler #3 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual) Samples on ice, cooling process has begun
Cooler #4 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual) Samples on ice, cooling process has begun
Cooler #5 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual) Samples on ice, cooling process has begun
Cooler #6 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual) Samples on ice, cooling process has begun

Courier: Fed Ex UPS USPS Client Commercial Pace Other _____
Shipping Method: First Overnight Priority Overnight Standard Overnight Ground International Priority
 Other _____

Billing: Recipient Sender Third Party Credit Card Unknown

Tracking # _____

Custody Seal on Cooler/Box Present: Yes No Seals intact: Yes No Ice: Wet Blue Dry None

Packing Material: Bubble Wrap Bubble Bags None Other _____

Samples shorted to lab (If Yes, complete) Shorted Date: _____ Shorted Time: _____ Qty: _____

Comments:

Chain of Custody Present	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Chain of Custody Filled Out	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Relinquished Signature & Sampler Name COC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Samples Arrived within Hold Time	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Rush TAT requested on COC	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Sufficient Volume	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Correct Containers Used	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Sample Labels match COC (sample IDs & date/time of collection)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
All containers needing acid/base preservation have been checked.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	Preservation Information: Preservative: _____ Lot #/Trace #: _____ Date: _____ Time: _____ Initials: _____
All Containers needing preservation are found to be in compliance with EPA recommendation: Exceptions: VOA, Coliform, TOC, O&G, Carbamates	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Headspace in VOA Vials? (>6mm):	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Trip Blank Present:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	

Client Notification/ Resolution:
Person Contacted: _____ Date/Time: _____

Comments/ Resolution (use back for additional comments): _____

Project Manager Review: _____ Date: _____