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	Users		Check Results		DMR Signing Status	

Signing Process Confirmation - COX Activity ID: 5dc6608f-53fb-4210-a481-c5b7dcbdbd37

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02/08/2018

Report of Analysis

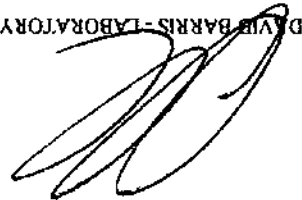
Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 5/1/2018
Receipt Date: 5/1/2018
Report Date: 5/10/2018
Sample Site: Influent

Sample ID#: 117404
Sample Type: Wastewater
Sample Source: Monthly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Ammonia as N	44.4	mg/L	ASTM D6919-03	0.05	5/3/2018	KC
Nitrate as N	0.15	mg/L	EPA300.0	0.1	5/2/2018	JB
Nitrite as N	ND	mg/L	EPA300.0	0.01	5/2/2018	JB
Orthophosphate as P	4.80	mg/L	EPA300.0	0.02	5/2/2018	JB
Phosphorous - Total as P	8.47	mg/L	EPA 200.7	0.04	5/7/2018	JM
TKN as N	62.8	mg/L	4500NorgC	0.5	5/9/2018	KC
Total Nitrogen as N	63.0	mg/L	CALC	1	5/10/2018	KC

ND = Not Detected

DAVID BARRIS - LABORATORY DIRECTOR



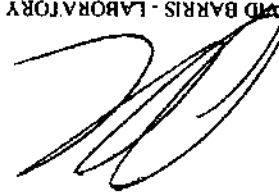
Report of Analysis

Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 5/1/2018
Receipt Date: 5/1/2018
Report Date: 5/10/2018
Sample Site: Effluent

Sample ID#: 117405
Sample Type: Wastewater
Sample Source: Monthly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Ammonia as N	3.19	mg/L	ASTM D6919-03	0.05	5/3/2018	KC
Nitrate as N	0.22	mg/L	EPA300.0	0.1	5/2/2018	JB
Nitrite as N	0.01	mg/L	EPA300.0	0.01	5/2/2018	JB
Orthophosphate as P	0.45	mg/L	EPA300.0	0.02	5/2/2018	JB
Phosphorous - Total as P	0.96	mg/L	EPA 200.7	0.04	5/7/2018	JM
TKN as N	4.07	mg/L	4500NorgC	0.5	5/9/2018	KC
Total Nitrogen as N	4.30	mg/L	CALC	1	5/10/2018	KC

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ND = Not Detected

1005 BOSTON POST ROAD
MADISON, CT 06443

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CONSULTING LABORATORIES, INC.



Phone 203-245-0568
Fax 203-318-0830
Connecticut Certification PH-0535
www.eclinconline.com

Report of Analysis

Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 5/1/2018
Receipt Date: 5/1/2018
Report Date: 5/7/2018
Sample Site: Influent

Sample ID#: 117406
Sample Type: Wastewater
Sample Source: Monthly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical Alkalinity(Grab)	226	mg/L	SM2320-B	20	5/7/2018	KC

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ND = Not Detected

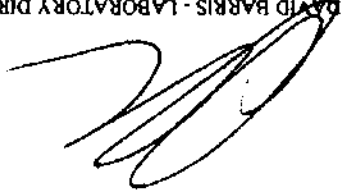
Report of Analysis

Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis

Sample Date: 5/1/2018
Receipt Date: 5/1/2018
Report Date: 5/7/2018
Sample Site: Effluent

Sample ID#: 117407
Sample Type: Wastewater
Sample Source: Monthly
Client:

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical Alkalinity(Grab)	44.4	mg/L	SM2320-B	20	5/7/2018	KC


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ND = Not Detected

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CONSULTING LABORATORIES, INC.**

1005 Boston Post Road
Madison, CT 06443

(203) 245-0568 Phone
(203) 318-0830 Fax

Client: Town of Deep River-WPCF

Contact: Mr. Peter Lewis

Address: 99 Winter Ave, Deep River, CT 06417

Phone: 860-526-6044

Fax:

Project:
Monthly
Influent/Effluent Testing

Samplers Name: (Print)

Ken Hebert

Client I.D.

Sampling Location

Date

Time

Sample Type
Water Solid Comp Grab

Number of Containers

TN Series

Ortho & Total Phos

Alkalinity (grab sample)

ECL Sample I.D.#

Influent

5/1/18

8AM

X

X

2

X

X

117404

Effluent

5/1/18

8AM

X

X

2

X

X

117405

Influent

5/1/18

8AM

X

X

1

X

117406

Effluent

5/1/18

8AM

X

X

1

X

117407

Relinquished by:

Date

Time

Received by:

Relinquished by:

Date

Time

Received by:

[Signature]

05/01/18 950

[Signature]

Were Samples received within holding time? ☒ Y ☐ N
Were Samples chilled upon receipt? ☒ Y ☐ N
Were Samples in appropriate containers? ☒ Y ☐ N
If No Explain
Are containers broken/leaking? ☒ Y ☐ N
Did Samples need to be split upon receipt? ☒ Y ☐ N
Were Samples preserved properly? ☒ Y ☐ N
22.9°C

Method: *[illegible]*

Report of Analysis

Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 5/1/2018
Receipt Date: 5/1/2018
Report Date: 5/8/2018
Sample Site: Influent

Sample ID#: 117401
Sample Type: Wastewater
Sample Source: Weekly Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Biological Oxygen Demand	272	mg/L	SM5210B	2	5/2/2018	KC
Total Suspended Solids	290	mg/L	SM2540D	1	5/4/2018	JB

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ND = Not Detected

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Report of Analysis

Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 5/1/2018
Receipt Date: 5/1/2018
Report Date: 5/8/2018
Sample Site: Effluent

Sample ID#: 117402
Sample Type: Wastewater
Sample Source: Weekly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Biological Oxygen Demand	2.33	mg/L	SM5210B	2	5/2/2018	KC
Total Suspended Solids	1.00	mg/L	SM2540D	1	5/4/2018	JB

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ND = Not Detected

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Report of Analysis

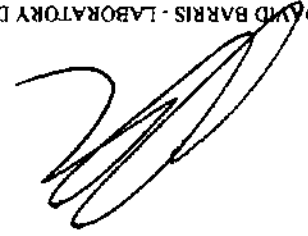
Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 5/1/2018
Receipt Date: 5/1/2018
Report Date: 5/2/2018
Sample Site: Effluent

Sample ID#: 117403
Sample Type: Wastewater
Sample Source: Weekly Bacteria Testing
Client: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Biological						
Enterococcus Bacteria	<10	MPN/100ml	Enterolert	10	5/1/2018	JB
Fecal Coliform Bacteria	<2	col/100ml	SM9222D	2	5/1/2018	JB

ND = Not Detected

DAVID BARRIS - LABORATORY DIRECTOR



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ID#	ECL Sample
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99	99
100	100

[illegible]

Received by: _____

Were Samples received within holding time? ☒ Y ☐ N
Were Samples chilled upon receipt? ☒ Y ☐ N
Were Samples in appropriate containers ☒ Y ☐ N
If No Explain _____
Are containers broken/leaking? ☒ Y ☐ N
Did Samples need to be split upon receipt? ☐ Y ☒ N
Were Samples preserved in appropriate ☒ Y ☐ N
_____ 23.10c

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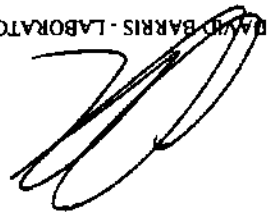
Report of Analysis

Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 5/8/2018
Receipt Date: 5/8/2018
Report Date: 5/16/2018
Sample Site: Influent

Sample ID#: 117604
Sample Type: Wastewater
Sample Source: Weekly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Biological Oxygen Demand	181	mg/L	SM5210B	2	5/9/2018	KC
Total Suspended Solids	148	mg/L	SM2540D	1	5/11/2018	JB

ND = Not Detected


DAVID BARRIS - LABORATORY DIRECTOR



Report of Analysis

Name: Town of Deep River WPCF
Sample Date: 5/8/2018
Receipt Date: 5/8/2018
Report Date: 5/16/2018
Sample Site: Effluent

Sample ID#: 117605
Sample Type: Wastewater
Sample Source: Weekly
Client: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Biological Oxygen Demand	3.06	mg/L	SM5210B	2	5/9/2018	KC
Total Suspended Solids	3.00	mg/L	SM2540D	1	5/11/2018	JB

ND = Not Detected

DAVID BARRIS - LABORATORY DIRECTOR

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Report of Analysis

Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 5/8/2018
Receipt Date: 5/8/2018
Report Date: 5/10/2018
Sample Site: Effluent

Sample ID#: 117606
Sample Type: Wastewater
Sample Source: Weekly Bacteria Testing
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Biological						
Enterococcus Bacteria	<10	MPN/100ml	Enterolert	10	5/8/2018	JB
Fecal Coliform Bacteria	<2	col/100ml	SM9222D	2	5/8/2018	JB

ND = Not Detected

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11/23/20

Report of Analysis

Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 5/15/2018
Receipt Date: 5/15/2018
Report Date: 5/17/2018
Sample Site: Effluent

Sample ID#: 117757
Sample Type: Wastewater
Sample Source: Weekly Bacteria Testing
Client:

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Biological						
Enterococcus Bacteria	<10	MPN/100ml	Enterolert	10	5/15/2018	JB
Fecal Coliform Bacteria	<2	col/100ml	SM9222D	2	5/15/2018	JB

ND = Not Detected

DAVID BARRIS - LABORATORY DIRECTOR

(203) 245-0568 Phone
(203) 318-0830 Fax

Required Analysis

NAME: (PRINT)
JEN HEBERT

[illegible]



Report of Analysis

Name: Town of Deep River WPCF
Sample Date: 5/15/2018
Receipt Date: 5/15/2018
Report Date: 5/22/2018
Sample Site: Influent
Address: 99 Winter Ave
 Deep River, CT 06417
Att: Pete Lewis
Sample ID#: 117755
Sample Type: Wastewater
Sample Source: Weekly
Client:

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Biological Oxygen Demand	92.5	mg/L	SM5210B	2	5/16/2018	KC
Total Suspended Solids	96.0	mg/L	SM2540D	1	5/18/2018	JB

ND = Not Detected

DAVID BARRIS - LABORATORY DIRECTOR

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MADISON, CT 06443

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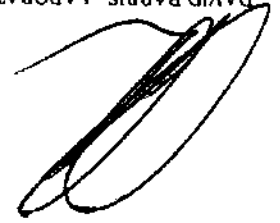
Report of Analysis

Name: Town of Deep River WPCF
Sample ID#: 117756
Sample Type: Wastewater
Sample Source: Weekly
Sampler: Client
Sample Date: 5/15/2018
Receipt Date: 5/15/2018
Report Date: 5/22/2018
Sample Site: Effluent

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Biological Oxygen Demand	5.16	mg/L	SM5210B	2	5/16/2018	KC
Total Suspended Solids	2.00	mg/L	SM2540D	1	5/18/2018	JB

ND = Not Detected

DAVID BARRIS - LABORATORY DIRECTOR



(203) 245-0568 Phone
(203) 348-0830 Fax

[illegible][illegible]

1005 BOSTON POST ROAD
MADISON, CT 06443

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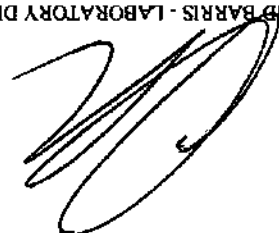
Report of Analysis

Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 5/22/2018
Receipt Date: 5/22/2018
Report Date: 5/30/2018
Sample Site: Influent

Sample ID#: 117902
Sample Type: Wastewater
Sample Source: Weekly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Biological Oxygen Demand	207	mg/L	SM5210B	2	5/24/2018	KC
Total Suspended Solids	264	mg/L	SM2540D	1	5/25/2018	JB

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ND = Not Detected

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Fax 203-318-0830
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Report of Analysis

Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 5/22/2018
Receipt Date: 5/22/2018
Report Date: 5/30/2018
Sample Site: Effluent

Sample ID#: 117903
Sample Type: Wastewater
Sample Source: Weekly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Biological Oxygen Demand	7.69	mg/L	SM5210B	2	5/24/2018	KC
Total Suspended Solids	6.00	mg/L	SM2540D	1	5/25/2018	JB

ND = Not Detected

DAVID BARRIS - LABORATORY DIRECTOR

(203) 245-0568 Phone
(203) 318-0830 Fax

[illegible]

117902
117903

[illegible]

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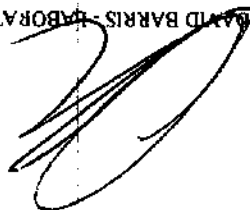
Report of Analysis

Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 5/22/2018
Receipt Date: 5/22/2018
Report Date: 5/24/2018
Sample Site: Effluent

Sample ID#: 117904
Sample Type: Wastewater
Sample Source: Client
Sampler: Weekly Bacteria Testing

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Biological						
Enterococcus Bacteria	<10	MPN/100ml	Enterolert	10	5/22/2018	JB
Fecal Coliform Bacteria	<2	col/100ml	SM9222D	2	5/22/2018	JB

ND = Not Detected


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1005 BOSTON POST ROAD
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Report of Analysis

Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 5/29/2018
Receipt Date: 5/29/2018
Report Date: 6/5/2018
Sample Site: Influent

Sample ID#: 117998
Sample Type: Wastewater
Sample Source: Weekly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Biological Oxygen Demand	66.4	mg/L	SM5210B	2	5/30/2018	KC
Total Suspended Solids	56.0	mg/L	SM2540D	1	6/1/2018	JB

DAVID BARRIS - LABORATORY DIRECTOR

ND = Not Detected

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MADISON, CT 06443

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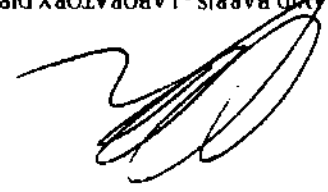
Report of Analysis

Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 5/29/2018
Receipt Date: 5/29/2018
Report Date: 6/5/2018
Sample Site: Effluent

Sample ID#: 117999
Sample Type: Wastewater
Sample Source: Weekly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Biological Oxygen Demand	2.39	mg/L	SM5210B	2	5/30/2018	KC
Total Suspended Solids	ND	mg/L	SM2540D	1	6/1/2018	JB

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ND = Not Detected

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Report of Analysis

Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 5/29/2018
Receipt Date: 5/29/2018
Report Date: 5/31/2018
Sample Site: Effluent

Sample ID#: 118000
Sample Type: Wastewater
Sample Source: Weekly Bacteria Testing
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Biological						
Enterococcus Bacteria	<10	MPN/100ml	Enterolert	10	5/29/2018	JB
Fecal Coliform Bacteria	<2	col/100ml	SM9222D	2	5/29/2018	JB

DAVID BARRIS - LABORATORY DIRECTOR



ND = Not Detected

ENVIRONMENTAL CONSULTING LABORATORIES, INC.

1005 Boston Post Road
Madison, CT 06443

(203) 245-0568 Phone
(203) 318-0830 Fax

Client: Town of Deep River-WPCF
Contact: Mr. Peter Lewis
Address: 99 Winter Ave, Deep River, CT 06417
Phone: 860-526-6044 Fax:

Project: Influent/Effluent Testing
Weekly

Sampler Name: (Print)

Address: T. W. Phillips

Client I.D.

Date

Time

Sample Type
Water Solid Comp Grab

Number of Containers

BOD TSS

Fecal/Enterococci (May-Oct)

ECL Sample I.D.#

Influent

05/29/18 8:30

X

X

1

X

X

1170098

Effluent

05/29/18 8:30

X

X

1

X

X

1170099

Effluent

05/29/18 8:30

X

X

1

X

1180000

Relinquished by:

Date

Time

Received by:

Were Samples received within holding time? Y N
Were Samples chilled upon receipt? Y N
Were Samples in appropriate container? Y N
If No Explain
Are containers broken/leaking? Y N
Did Samples need to be split upon receipt? Y N
Were Samples preserved properly? Y N

Relinquished by:

Date

Time

Received by:

Were Samples received within holding time? Y N
Were Samples chilled upon receipt? Y N
Were Samples in appropriate container? Y N
If No Explain
Are containers broken/leaking? Y N
Did Samples need to be split upon receipt? Y N
Were Samples preserved properly? Y N