

Town of Deep River WPCA MOR

[illegible]

1005 BOSTON POST ROAD
MADISON, CT 06443



ENVIRONMENTAL
CONSULTING LABORATORIES, INC.

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

Report of Analysis

Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 8/7/2018
Receipt Date: 8/7/2018
Report Date: 8/16/2018
Sample Site: Influent

Sample ID#: 119411
Sample Type: Wastewater
Sample Source: Monthly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Ammonia as N	16.9	mg/L	ASTM D6919-03	0.05	8/8/2018	KC
Nitrate as N	ND	mg/L	EPA300.0	0.1	8/8/2018	JB
Nitrite as N	ND	mg/L	EPA300.0	0.01	8/8/2018	JB
Orthophosphate as P	1.81	mg/L	EPA300.0	0.02	8/8/2018	JB
Phosphorous -Total as P	4.88	mg/L	EPA 200.7	0.04	8/14/2018	JM
TKN as N	37.4	mg/L	4500NorgC	0.5	8/15/2018	KC
Total Nitrogen as N	37.4	mg/L	CALC	1	8/16/2018	KC



DAVID HARRIS - LABORATORY DIRECTOR

ND = Not Detected

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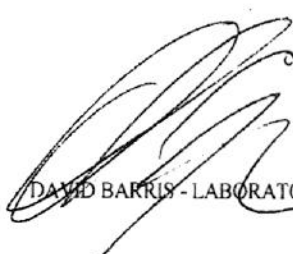
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Receipt Date: 8/7/2018
Report Date: 8/16/2018
Sample Site: Effluent

Sample ID#: 119412
Sample Type: Wastewater
Sample Source: Monthly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Ammonia as N	1.57	mg/L	ASTM D6919-03	0.05	8/8/2018	KC
Nitrate as N	3.57	mg/L	EPA300.0	0.1	8/8/2018	JB
Nitrite as N	0.39	mg/L	EPA300.0	0.01	8/8/2018	JB
Orthophosphate as P	0.44	mg/L	EPA300.0	0.02	8/8/2018	JB
Phosphorous -Total as P	0.48	mg/L	EPA 200.7	0.04	8/14/2018	JM
TKN as N	3.20	mg/L	4500NorgC	0.5	8/15/2018	KC
Total Nitrogen as N	7.16	mg/L	CALC	1	8/16/2018	KC


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Receipt Date: 8/7/2018
Report Date: 8/16/2018
Sample Site: Influent

Sample ID#: 119413
Sample Type: Wastewater
Sample Source: Monthly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical Alkalinity(Grab)	268	mg/L	SM2320-B	20	8/16/2018	KC


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Report Date: 8/16/2018
Sample Site: Effluent

Sample ID#: 119414
Sample Type: Wastewater
Sample Source: Monthly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical Alkalinity(Grab)	81.6	mg/L	SM2320-B	20	8/16/2018	KC


DAVID BARRIS - LABORATORY DIRECTOR

ND = Not Detected

**1005 Boston Post Road
Madison, CT 06443
(203) 245-0568 Phone
(203) 318-0830 Fax**

Phone: 860-526-6044 Fax:

Influent/Effluent Testing

11/10/20

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 containers? ☒ Y ☐ N If No Explain: 21.2°C
Relinquished by:	Date	Time	Received by:	Are containers broken/leaking? ☒ Y ☐ N Did Samples need to be split upon receipt? ☒ Y ☐ N Were Samples presented properly? ☒ Y ☐ N (Signature)

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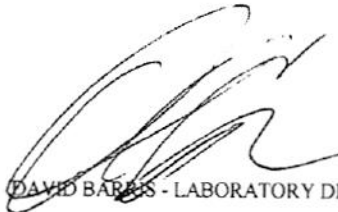
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Report of Analysis

Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 8/7/2018
Receipt Date: 8/7/2018
Report Date: 8/13/2018
Sample Site: Effluent

Sample ID#: 119417
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	8/7/2018	JB
Fecal Coliform Bacteria	<2	col/100ml	SM9222D	2	8/7/2018	JB


DAVID BARNES - LABORATORY DIRECTOR

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Attn: Pete Lewis
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Receipt Date: 8/7/2018
Report Date: 8/14/2018
Sample Site: Influent

Sample ID#: 119415
Sample Type: Wastewater
Sample Source: Weekly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Biological Oxygen Demand	479	mg/L	SM5210B	2	8/8/2018	KC
Total Suspended Solids	364	mg/L	SM2540D	1	8/10/2018	JB

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Attn: Pete Lewis
Sample Date: 8/7/2018
Receipt Date: 8/7/2018
Report Date: 8/14/2018
Sample Site: Effluent

Sample ID#: 119416
Sample Type: Wastewater
Sample Source: Weekly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Biological Oxygen Demand	2.65	mg/L	SM5210B	2	8/8/2018	KC
Total Suspended Solids	ND	mg/L	SM2540D	1	8/10/2018	JB

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Report of Analysis

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

Sample ID#: 119555
Sample Type: Wastewater
Sample Source: Weekly Bacteria Testing
Sampler: Client

Sample Date: 8/14/2018
Receipt Date: 8/14/2018
Report Date: 8/15/2018
Sample Site: Effluent

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Biological						
Enterococcus Bacteria	<10	MPN/100mL	Enterolert	10	8/14/2018	JB
Fecal Coliform Bacteria	<2	col/100ml	SM9222D	2	8/14/2018	JB

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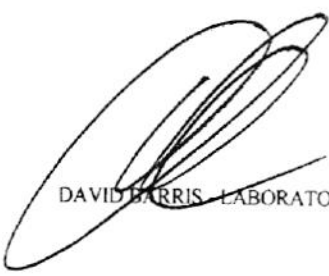
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Report of Analysis

Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 8/14/2018
Receipt Date: 8/14/2018
Report Date: 8/23/2018
Sample Site: Influent

Sample ID#: 119553
Sample Type: Wastewater
Sample Source: Weekly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Biological Oxygen Demand	276	mg/L	SM5210B	2	8/15/2018	KC
Total Suspended Solids	468	mg/L	SM2540D	1	8/17/2018	JB



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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: 8/14/2018
Receipt Date: 8/14/2018
Report Date: 8/23/2018
Sample Site: Effluent

Sample ID#: 119554
Sample Type: Wastewater
Sample Source: Weekly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Biological Oxygen Demand	2.19	mg/L	SM5210B	2	8/15/2018	KC
Total Suspended Solids	1.00	mg/L	SM2540D	1	8/17/2018	JB

DAVID BARRIS - LABORATORY DIRECTOR

ND = Not Detected

**1005 Boston Post Road
Madison, CT 06443**

Phone: 860-526-6044

Samplers Name: (Print)

John Ely

[illegible]

Relinquished by:

Date	Time
------	------

Received by:

Relinquished by:

Date _____

Time

Received by:

Were Samples received within holding time? **Y** **N**
 Were Samples chilled upon receipt? **Y** **N** **9** **11** **12**
 Were Samples in appropriate containers? **Y** **N**
 If No Explain

Are containers broken/leaking? ☒ N ☐ Y

Did Samples need to be split upon receipt? ☐ Y ☒ N

Were Samples preserved properly? ☐ Y ☒ N

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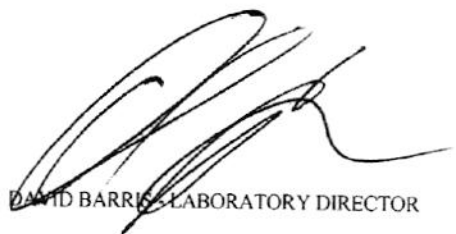
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Report of Analysis

Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 8/21/2018
Receipt Date: 8/21/2018
Report Date: 8/23/2018
Sample Site: Effluent

Sample ID#: 119696
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	8/21/2018	JB
Fecal Coliform Bacteria	<2	col/100ml	SM9222D	2	8/21/2018	JB


DAVID BARRIOS LABORATORY DIRECTOR

ND = Not Detected

John Ely

Influent/Effluent Testing

John Ely

Relinquished by:	Date	Time	Received by:	Were Samples received within holding time? ☒ Y ☐ N Were Samples chilled upon receipt? Y ☒ N ☐ Y Were Samples in appropriate containers? ☒ Y ☐ N If No Explain
	8/21/18	950		21.0 C
Relinquished by:	Date	Time	Received by:	Are containers broken/leaking? Y ☒ N ☐ Y Did Samples need to be split upon receipt? Y ☒ N ☐ Y Were Samples presented properly? ☒ Y ☐ N

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

Are containers broken/leaking? **Y** **N**
 Did Samples need to be split upon receipt? **Y** **N**
 Were Samples presented properly? **Y** **N**

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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: 8/21/2018
Receipt Date: 8/21/2018
Report Date: 8/28/2018
Sample Site: Influent

Sample ID#: 119694
Sample Type: Wastewater
Sample Source: Weekly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Biological Oxygen Demand	100	mg/L	SM5210B	2	8/22/2018	KC
Total Suspended Solids	156	mg/L	SM2540D	1	8/28/2018	JA



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Report of Analysis

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

Sample ID#: 119695
Sample Type: Wastewater
Sample Source: Weekly
Sampler: Client

Sample Date: 8/21/2018
Receipt Date: 8/21/2018
Report Date: 8/28/2018
Sample Site: Effluent

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Biological Oxygen Demand	2.49	mg/L	SM5210B	2	8/22/2018	KC
Total Suspended Solids	5.00	mg/L	SM2540D	1	8/28/2018	JA

DAVID BARRIS - LABORATORY DIRECTOR

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

Project:

Weekly Influent/Effluent Testing

Phone: 860-526-6044

Samplers Name: (Print)

plers Name: (Print) John Ely

Relinquished by: 	Date 8/24/18	Time 950	Received by: 	Were Samples received within holding time? ☒ Y ☐ N Were Samples chilled upon receipt? Y ☒ N ☐ Y Were Samples in appropriate containers? ☒ Y ☐ N If No Explain _____ Are containers broken/leaking? Y ☒ N ☐ Y Did Samples need to be split upon receipt? Y ☒ N ☐ Y Were Samples presented properly? ☒ Y ☐ N Initials of person receiving
	Date	Time	Received by:	

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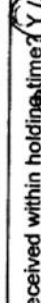
Name: Town of Deep River WPCF
99 Winter Ave
Deep River, CT 06417
Attn: Pete Lewis
Sample Date: 8/28/2018
Receipt Date: 8/28/2018
Report Date: 9/4/2018
Sample Site: Effluent

Sample ID#: 119851
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	8/28/2018	JB
Fecal Coliform Bacteria	<2	col/100ml	SM9222D	2	8/28/2018	JB

DAVID BARRIS - LABORATORY DIRECTOR

ND = Not Detected

Relinquished by: 	Date: 8/28/18	Time: 9:50A	Received by: 
Relinquished by: 	Date:	Time:	Received by:

Were Samples received within holding time? Y/N Y

Were Samples chilled upon receipt? Y/N Y

Were Samples in appropriate containers? Y/N Y

If No Explain _____

Are containers broken/leaking? Y/N Y

Did Samples need to be split upon receipt? Y/N Y

Were Samples presented properly? Y/N Y

ATTN: TYPE NUMBER

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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: 8/28/2018
Receipt Date: 8/28/2018
Report Date: 9/6/2018
Sample Site: Influent

Sample ID#: 119849
Sample Type: Wastewater
Sample Source: Weekly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Biological Oxygen Demand	<60.0	mg/L	SM5210B	2	8/29/2018	KC
Total Suspended Solids	68.0	mg/L	SM2540D	1	8/29/2018	JB


DAVID BARRIS - LABORATORY DIRECTOR

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Comments BOD result reported as less than (<) due to result out of test dilution setup range.

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Attn: Pete Lewis
Sample Date: 8/28/2018
Receipt Date: 8/28/2018
Report Date: 9/5/2018
Sample Site: Effluent

Sample ID#: 119850
Sample Type: Wastewater
Sample Source: Weekly
Sampler: Client

Parameter	Sample Result	Units	Method	MDL	Analysis Date	Analyst
Chemical						
Biological Oxygen Demand	<2.00	mg/L	SM5210B	2	8/29/2018	KC
Total Suspended Solids	4.00	mg/L	SM2540D	1	8/29/2018	JB

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