

**CERTIFICATE OF ANALYSIS**

Town of Uxbridge Massachusetts
Attn: Mr. James Boliver
105 Blackstone Street
Uxbridge, MA 01569

Date Received: 6/17/16
Date Reported: 6/20/16
P.O. #:
Work Order #: 1606-13881

DESCRIPTION: COLIFORM MONITORING

Subject sample(s) has/have been analyzed by our Warwick, R.I. and/or our Hudson, MA. laboratories with the attached results.

Reference: All parameters were analyzed by U.S. EPA approved methodologies.
The specific methodologies are listed in the methods column of the Certificate Of Analysis.

Data qualifiers (if present) are explained in full at the end of a given sample's analytical results.
The Certificate of Analysis shall not be reproduced except in full, without written approval of R. I. Analytical.
Results relate only to samples submitted to the laboratory for analysis.
Test results are not blank corrected.

Certification #: RI LAI0033, MA M-RI015, CT PH-0508, ME RI00015
NH 2070, NY 11726, MA1117

If you have any questions regarding this work, or if we may be of further assistance, please contact our customer service department.

Approved by:

Sharon Baker
MIS / Data Reporting Manager

enc: Chain of Custody

R.I. Analytical Laboratories, Inc.

CERTIFICATE OF ANALYSIS

Town of Uxbridge Massachusetts

Date Received: 6/17/16

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Sample # 001

SAMPLE DESCRIPTION: CVS, 323 NORTH MAIN ST.**SAMPLE TYPE:** GRAB**SAMPLE DATE/TIME:** 6/17/2016 @ 11:30

PARAMETER	SAMPLE RESULTS	DET. LIMIT	UNITS	METHOD	DATE/TIME ANALYZED	ANALYST
pH (field)	7.1		SU		6/17/16 11:30	*CS
Total Coliform	Present		/100 mL	SM9222B 19-21ed	6/17/16 14:29	GLP
Ecoli (MF MUG)	Present			SM9222G 19-21ed	6/17/16 14:29	GLP

Sample # 002

SAMPLE DESCRIPTION: NORTH MAIN ST MANG. 307 N MAIN**SAMPLE TYPE:** GRAB**SAMPLE DATE/TIME:** 6/17/2016 @ 12:00

PARAMETER	SAMPLE RESULTS	DET. LIMIT	UNITS	METHOD	DATE/TIME ANALYZED	ANALYST
pH (field)	7.1		SU		6/17/16 12:00	*CS
Total Coliform	Absent		/100 mL	SM9222B 19-21ed	6/17/16 14:29	GLP

Sample # 003

SAMPLE DESCRIPTION: VILLAGE CLEANERS 336 N. MAIN**SAMPLE TYPE:** GRAB**SAMPLE DATE/TIME:** 6/17/2016 @ 11:45

PARAMETER	SAMPLE RESULTS	DET. LIMIT	UNITS	METHOD	DATE/TIME ANALYZED	ANALYST
pH (field)	7.0		SU		6/17/16 11:45	*CS
Total Coliform	Present		/100 mL	SM9222B 19-21ed	6/17/16 14:29	GLP
Ecoli (MF MUG)	Present			SM9222G 19-21ed	6/17/16 14:29	GLP

*CS - Field sampling data was provided by Town of Uxbridge Massachusetts.

R.I. Analytical Laboratories, Inc.

41 Illinois Avenue Warwick, RI 02888-3007 Tel: 800-937-2580 Fax: 401-738-1970	131 Coolidge St, Suite 105 Hudson, MA 01749-1331 Tel: 800-937-2580 Fax: 978-568-0078
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Client Information		Project Information		
Company Name:	Town of Uxbridge Massachusetts	Project Name:		
Address:	105 Blackstone Street	P.O. Number:	Project Number:	
City / State / Zip:	Uxbridge, MA 01569	Report To:	William Buma	Phone: 508-278-8631 Fax: 508-278-8661
Telephone:	508-278-8631	Fax:	508-278-8661	
Contact Person:	William Buma – Operations Manager	Sampled by:		
		Quote No:	UXB040704-R1	Email address: uxwater@charter.net

Relinquished By Signatures	Date	Time	Received By Signatures	Date	Time
	6/17/16	12:45		6-17-16	12:45

Turn Around Time			
	Normal	X	EMAIL Report
	5 Business days. Possible surcharge		
	Rush – Date Due: ____/____/____		

Project Comments	
Circle if applicable: GW-1, GW-2, GW-3, S-1, S-2, S-3	<u>MCP Data Enhancement QC Package?</u> No
PWSID#: 2304000. Please call Bill Buma if coliform is detected.	

Lab Use Only	
	Sample Pick Up Only
	RIAL sampled; attach field hours
✓	Shipped on ice 3-25
Workorder No: 1606-13881	

Container Types: P=Poly, G=Glass, AG=Amber Glass, V=Vial, St=Sterile

Preservation Codes: NP=None, N=HNO₃, H=HCl, S=H₂SO₄, SH=NaOH, SB=NaHSO₄, M=MeOH, T=Na₂S₂O₃, Z=ZnOAc, I=Ice

Matrix Codes: GW=Groundwater, SW=Surface Water, WW=Wastewater, DW=Drinking Water, S=Soil, SL=Sludge, A=Air, B=Bulk/Solid, O=