

LABORATORY REPORT

Coventry Parks & Rec. Dept.
Attn: Denise Cummiskey
1670 Flat River Road
Parks & Recreation Dept.
Coventry, RI 02816

Date Received: 7/19/2021
Date Reported: 7/21/2021
P.O. Number

Work Order #: 2107-11908

Project Name: BRIAR POINT BEACH

Enclosed are the analytical results and Chain of Custody for your project referenced above. The sample(s) were analyzed by our Warwick, RI laboratory unless noted otherwise. When applicable, indication of sample analysis at our Hudson, MA laboratory and/or subcontracted results are noted and subcontracted reports are enclosed in their entirety.

All samples were analyzed within the established guidelines of US EPA approved methods with all requirements met, unless otherwise noted at the end of a given sample's analytical results or in a case narrative.

The Detection Limit is defined as the lowest level that can be reliably achieved during routine laboratory conditions.

These results only pertain to the samples submitted for this Work Order # and this report shall not be reproduced except in its entirety.

We certify that the following results are true and accurate to the best of our knowledge. If you have questions or need further assistance, please contact our Customer Service Department.

Approved by:



Nicole Skyleson
Data Reporting Manager

Laboratory Certification Numbers (as applicable to sample's origin state):

Warwick RI * RI LAI00033, MA M-RI015, CT PH-0508

R.I. Analytical Laboratories, Inc.

Laboratory Report

Coventry Parks & Rec. Dept.

Work Order #: 2107-11908

Project Name: BRIAR POINT BEACH

Sample Number: 001
Sample Description: BRIAR PT. BEACH
Sample Type : GRAB
Sample Date / Time : 7/19/2021 @ 12:39

| PARAMETER | SAMPLE RESULTS | DET. LIMIT | UNITS | METHOD | DATE/TIME ANALYZED | ANALYST |
|-------------|----------------|------------|------------|------------------|--------------------|---------|
| Enterococci | 12.2 | 1.0 | MPN/100 ml | IDEXX Enterolert | 7/19/2021 14:21 | EM |



CHAIN OF CUSTODY RECORD

41 Illinois Avenue
 Warwick, RI 02888-3007
 800-937-2580 • Fax: 401-738-1970

131 Coolidge St., Suite 105
 Hudson, MA 01749-1331
 800-937-2580 • Fax: 978-568-0078

| Date Collected | Time Collected | Field Sample Identification | | Grab or Composite <small>07-16-21</small> | # of Containers & Type ^C | Preservation Code ^P | Matrix Code ^M | Enterococci |
|----------------|----------------|-----------------------------|---|--|-------------------------------------|--------------------------------|--------------------------|-------------|
| | | | | | | | | |
| 7/19/21 | 1234 | Briar Pt. Beach | G | 1ST | NP | O | X | |
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Client Information

Company Name: **Coventry Parks and Recreation Department**
 Address: **1670 Flat River Rd.**
 City / State / Zip: **Coventry, RI 02816**
 Telephone: **401-822-9107** Fax: _____
 Contact Person: **Denise Cummiskey**

Project Information

Project Name: **Briar Point Beach**
 P.O. Number: _____ Project Number: _____
 Report To: **Denise Cummiskey** Phone: _____ Fax: _____
 Sampled by: **RIA** Email report to these addresses: **dcummiskey@coventryri.org**
 Quote No: _____

| Relinquished By Signatures | Date | Time | Received By Signatures | Date | Time |
|----------------------------|---------|------|------------------------|---------|------|
| <i>[Signature]</i> | 7/19/21 | 1335 | <i>[Signature]</i> | 7-14-21 | 1335 |
| | | | | | |

Turn Around Time

| | |
|--|------------------------------------|
| <input checked="" type="checkbox"/> Normal | <input type="checkbox"/> EM Report |
| 5-7 Business days. 3 of 3 | |
| <input type="checkbox"/> Rush | - Date Due: |

Project Comments

Circle if applicable: GW-1, GW-2, GW-3, S-1, S-2, S-3 **MCP Data Enhancement QC Package?** Yes No

Temp. Upon Receipt _____ °C

Lab Use Only

Sample Pick Up Only

RIAL sampled; attach field hours

Shipped on ice **13A**

Workorder No: **107-11908**

Containers: P=Poly, G=Glass, AG=Amber Glass, V=Vial, St=Sterile Preservatives: A=Ascorbic Acid, NH4=NH4Cl, H=HCl, M=MeOH, N=HNO3, NP=None, S=H2SO4, SB=NaHSO4, SH=NaOH, T=Na2S2O3, Z=ZnOAc