

May 20, 2021

Bobby Purvis  
Daphne Utilities Wastewater Dept.  
29280 N. Main St  
Daphne, AL 36526

RE: Project: Bay Sampling Resample 5/19/21  
Pace Project No.: 20200027

Dear Bobby Purvis:

Enclosed are the analytical results for sample(s) received by the laboratory on May 19, 2021. The results relate only to the samples included in this report.

The test results provided in this final report were generated by each of the following laboratories within the Pace Network:

- Pace Analytical Services - Mobile Labs

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

Sincerely,



Mary Kathryn Brenner  
marykathryn.brenner@pacelabs.com  
251-344-9106  
Project Manager

Enclosures

cc: Eric Butler, Daphne Utilities  
Ashley Campbell, City of Daphne  
Johnny Grimes, Daphne Utilities  
Tim White, Daphne Utilities

## REPORT OF LABORATORY ANALYSIS

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

Project: Bay Sampling Resample 5/19/21

Pace Project No.: 20200027

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**Pace Analytical Services Mobile**

4320 Midmost Drive, Mobile, AL 36609

Alabama Certification #: 40810

Florida Certification #: E87977

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## REPORT OF LABORATORY ANALYSIS

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## SAMPLE SUMMARY

Project: Bay Sampling Resample 5/19/21

Pace Project No.: 20200027

Lab ID	Sample ID	Matrix	Date Collected	Date Received
20200027001	Bayfront Park	Water	05/19/21 08:35	05/19/21 12:21
20200027002	Lake Forest Yacht Club	Water	05/19/21 08:15	05/19/21 12:21

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### SAMPLE ANALYTE COUNT

Project: Bay Sampling Resample 5/19/21

Pace Project No.: 20200027

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<b>Lab ID</b>	<b>Sample ID</b>	<b>Method</b>	<b>Analysts</b>	<b>Analytes Reported</b>
20200027001	Bayfront Park	Enterolert/Quanti-Tray	PP1	1
20200027002	Lake Forest Yacht Club	Enterolert/Quanti-Tray	PP1	1

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PASI-MO = Pace Analytical Services - Mobile Labs

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### ANALYTICAL RESULTS

Project: Bay Sampling Resample 5/19/21  
Pace Project No.: 20200027

Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
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<b>Sample: Bayfront Park</b>	<b>Lab ID: 20200027001</b>	Collected: 05/19/21 08:35	Received: 05/19/21 12:21	Matrix: Water				
<b>MOB Enterolert/Quanti-Tray</b>								
Analytical Method: Enterolert/Quanti-Tray Preparation Method: Enterolert/Quanti-Tray Pace Analytical Services - Mobile Labs								
Enterococci	<b>134</b>	MPN/100mL	10.0	10	05/19/21 14:45	05/20/21 14:41		1b,N2

Parameters	Results	Units	Report Limit	DF	Prepared	Analyzed	CAS No.	Qual
------------	---------	-------	--------------	----	----------	----------	---------	------

<b>Sample: Lake Forest Yacht Club</b>	<b>Lab ID: 20200027002</b>	Collected: 05/19/21 08:15	Received: 05/19/21 12:21	Matrix: Water				
<b>MOB Enterolert/Quanti-Tray</b>								
Analytical Method: Enterolert/Quanti-Tray Preparation Method: Enterolert/Quanti-Tray Pace Analytical Services - Mobile Labs								
Enterococci	<b>202</b>	MPN/100mL	10.0	10	05/19/21 14:45	05/20/21 14:41		1b,N2

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### QUALITY CONTROL DATA

Project: Bay Sampling Resample 5/19/21

Pace Project No.: 20200027

QC Batch: 225627

Analysis Method: Enterolert/Quanti-Tray

QC Batch Method: Enterolert/Quanti-Tray

Analysis Description: MOB Enterolert/Quanti-Tray

Laboratory: Pace Analytical Services - Mobile Labs

Associated Lab Samples: 20200027001, 20200027002

METHOD BLANK: 1060153

Matrix: Water

Associated Lab Samples: 20200027001, 20200027002

Parameter	Units	Blank Result	Reporting Limit	Analyzed	Qualifiers
Enterococci	MPN/100mL	ND	1.0	05/20/21 14:41	N2

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

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## QUALIFIERS

Project: Bay Sampling Resample 5/19/21

Pace Project No.: 20200027

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### 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

J - Estimated concentration above the adjusted method detection limit and below the adjusted reporting limit.

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.

### ANALYTE QUALIFIERS

1b The incubator temperature was outside of 41.0 +/- 0.5 C greater than two hours during incubation.

N2 The lab does not hold NELAC/TNI accreditation for this parameter but other accreditations/certifications may apply. A complete list of accreditations/certifications is available upon request.

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**QUALITY CONTROL DATA CROSS REFERENCE TABLE**

Project: Bay Sampling Resample 5/19/21

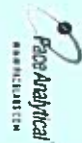
Pace Project No.: 20200027

<b>Lab ID</b>	<b>Sample ID</b>	<b>QC Batch Method</b>	<b>QC Batch</b>	<b>Analytical Method</b>	<b>Analytical Batch</b>
20200027001	Bayfront Park	Enterolert/Quanti-Tray	225627	Enterolert/Quanti-Tray	225700
20200027002	Lake Forest Yacht Club	Enterolert/Quanti-Tray	225627	Enterolert/Quanti-Tray	225700

**REPORT OF LABORATORY ANALYSIS**

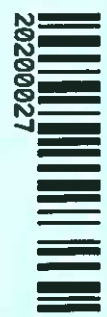
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**CHAIN-OF-CUSTODY / Analytical Reques**  
The Chain-of-Custody is a LEGAL DOCUMENT. All relevant fields

**MO# : 20200027**



20200027

**Section A** Required Client Information: **Section B** Required Project Information: **Section C** Invoice Information:

Company: Daphne Utilities Wastewater Dept. Report To: Sharon Surra  
 Address: P.O. Box 2550 Copy To:  
 Daphne, AL 36526  
 Email: sharon@daphnutilities.com Purchase Order #: Bay Sampling  
 Phone: (251)380-8561 Fax: Project Name: Bay Sampling  
 Requested Due Date: Project #: State / Location: AL  
 Attention: Invoice Information: Company Name: Pace Project Manager: marykathryn.brenner@dphutilabs.com  
 Address: Pace Quote: Pace Profile #: 9456  
 Regulatory Agency:

ITEM #	MATRIX	CODE	MATRIX CODE (500 valid codes to left)	SAMPLE TYPE (G-GRAB C-COMP)	COLLECTED		SAMPLE TEMP AT COLLECTION	# OF CONTAINERS	Preservatives						Analyses Test	Y/N	Requested Analysis Filtered (Y/N)	Residual Chlorine (Y/N)
					START DATE	END DATE			Unpreserved	H2SO4	HNO3	HCl	NaOH	Na2S2O3				
1	Bayfront Park	WT	WT		5/19	0835		Unpreserved										
2	Lake Forest Yacht Club	WT	WT		5/19	0815												
3	Seaside Landing	WT	WT															
4																		
5																		
6																		
7																		
8																		
9																		
10																		
11																		
12																		

**ADDITIONAL COMMENTS:** LF-10 Birds High H<sub>2</sub>O High I  
 BO - 0 Birds

**RELINQUISHED BY / AFFILIATION:** [Signature] DATE: 5/19/21 TIME: 1235

**ACCEPTED BY / AFFILIATION:** [Signature] DATE: 5/19 TIME: 1255

**TEMP in C:** 4.0

**SAMPLER NAME AND SIGNATURE:** [Signature]

**PRINT Name of SAMPLER:** [Name]

**SIGNATURE of SAMPLER:** [Signature]

**DATE Signed:** [Date]

**SAMPLE CONDITIONS:** Received on ice (Y/N) Custody Sealed Cooler (Y/N) Samples intact (Y/N)

WO#: 2020027

Sample Condition Upon Receipt

PM: MKB

Due Date: 05/28/21

CLIENT: MO-Daphne

Face Analytical

4320 Midmost Dr Mobile, AL 36609

Project #:

Courier:  Pace  Client  FedEx  UPS  Other Tracking # \_\_\_\_\_

Custody Seal on Cooler/Box Present: [see COC] Custody Seals intact:  Yes  No

Thermometer Used:  Therm Fisher IR 001  Other:

Type of Ice: Wet Blue None

Samples on ice: [see COC]

Cooler Temperature: [see COC]

Date and Initials of person examining contents: MAS 5/19/21

Temp must be measured from temperature blank when present Comments:

Temperature Blank Present:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	1
Chain of Custody Present:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	2
Chain of Custody Complete:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	3
Chain of Custody Relinquished:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	4
Sampler Name on COC:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	5
Short Hold Time Analyses (<72 hr):	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	6
Rush Turn Around Requested:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	7
Samples Arrived within Hold Time:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	8
Sufficient Volume:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	9
Correct Containers Used:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	10
Filtered vol. Rec. for Diss. tests	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	11
Sample Labels match COC:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	12
All containers received within manufacturer's precautionary and/or expiration dates:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	13
All containers needing chemical preservation have been checked (except VOA, micro, & O&G):	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	14
All containers preservation checked found to be in compliance with EPA recommendation:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	15
Headspace in VOA Vials (>6mm):	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	16
Trip Blank Present:	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	17

If No, was preservative added?  Yes  No  
If added record lot no.: HNO3 \_\_\_\_\_ H2SO4 \_\_\_\_\_

Client Notification/Resolution:

Person Contacted: \_\_\_\_\_ Date/Time: \_\_\_\_\_

Comments/ Resolution: \_\_\_\_\_