

Chain of Custody

– Environmental Lead –

Contact Information	
Client Company: <u>Garden State Environmental</u>	Project Number: <u>6925</u>
Office Address: <u>555 South Broad Street</u>	Project Name: <u>University Heights: Newark <i>Lower School</i></u>
City, State, Zip: <u>Glen Rock, NJ, 07452</u>	Primary Contact: <u>Conor Tarleton</u>
Fax Number: <u>201-652-0612</u>	Office Phone: <u>201-652-1119</u>
Email Address: <u>labreports@gseconsultants.com</u>	Cell Phone: _____

iATL is accredited by the National Lead Laboratory Accreditation Program (NLLAP) to perform analytical testing of environmental samples for lead (Pb). The accreditation is through AIHA-LAP, LLC and several other nationally recognized state programs.

Matrix/Method:

- Paint by AAS: ASTM D3335-85a, 2009
- Wipe/Dust by AAS: SW 846: 3050B: 700B, 2010
- Air by AAS: NIOSH 7082, 1994
- Soil by AAS: EPA SW 846 (Soil)
- Water by AAS-GF: ASTM D3559-03D, US EPA 200.9
- Other Metals (Cd, Zn, Cr) by AAS
- Toxicity Characteristic Leaching Procedure (TCLP) by AAS: US EPA 1311
- Other _____

Special Instructions:

Turnaround Time

Preliminary Results Requested Date: _____ Verbal Email Fax

Specific date / time

10 Day 5 Day 3 Day 2 Day 1 Day* 12 Hour** 6 Hour** RUSH**

* End of next business day unless otherwise specified. ** Matrix Dependent. ***Please notify the lab before shipping***

Chain of Custody

Relinquished (Name/Organization): <u>Tara Ekiert</u>	Date: <u>12/4/17</u>	Time: <u>9:30am</u>
Received (Name / iATL): _____	Date: _____	Time: _____
Sample Login (Name / iATL): _____	Date: _____	Time: _____
Analysis(Name(s) / iATL): <u>VP 12/12/17</u>	Date: _____	Time: _____
QA/QC Review (Name / iATL): <u>[Signature]</u>	Date: _____	Time: _____
Archived / Released: _____ QA/QC InterLAB Use: _____	Date: _____	Time: _____

RECEIVED
[Signature]
DEC - 5 2017

ATL - By [Signature]

Sample Log

–Environmental Lead–

Client: Garden State Environmental Project: University Heights, Newark: 6925
Lower School

Sampling Date/Time: 12/3/17 : 9:22AM

Client Sample #	iATL #	Location/ Description	Flow Rate	Start End	Sampling time (min)	Area (ft2) Volume (L)	Results ()
UHLS-B-S-01A	6400534	Basement Kitchen			9:22AM		
UHLS-1-B-01A	6400535	ROOM 103			9:26AM		
UHLS-1-S-02A	6400536	NURSE			9:31AM		
UHLS-1-B-02A	6400537	ROOM 104			9:34AM		
UHLS-1-B-03A	6400538	ROOM 105			9:40AM		
UHLS-1-B-04A	6400539	ROOM 106			9:44AM		
UHLS-1-S-03A	6400540	Teacher's Lounge			9:47AM		
UHLS-1-S-04A	6400541	Main office			9:49AM		
UHLS-1-B-05A	6400542	ROOM 102B			9:53AM		
UHLS-1-B-06A	6400543	ROOM 111			9:57AM		
UHLS-1-B-07A	6400544	ROOM 110			10:02AM		
UHLS-1-B-08A	6400545	ROOM 109			10:06AM		
UHLS-1-B-09A	6400546	ROOM 108			10:10AM		
UHLS-2-WC-03A	6400547	Hall by Bathroom (left)			10:15AM		
UHLS-2-WC-04A	6400548	Hall by bathroom (right)			10:16AM		

* = Insufficient Sample Provided to Perform QC Reanalysis (<200mg)

** = Insufficient Sample Provided to Analyze (<50mg) *** = Matrix / Substrate Interference Possible

FB = Method Requires the submittal of blank(s). ML = Multi Layered Sample. May result in inconsistent results.

These preliminary results are issued by iATL to expedite procedures by clients based upon the above data. iATL assumes that all of the sampling methods and data upon which these results are based, has been accurately supplied by the client. These results may not have been reviewed by the Laboratory Director. Final Certificate of Analysis will follow these preliminary results. The signed COA is to be considered the official results. All EPA, HUD, and NJDEP conditions apply.

