

Pace Analytical Services, LLC-Fairfield
1275 Bloomfield Ave, Ste 37D, Fairfield, NJ 07004
(P) (973) 227-0422 - www.pacelabs.com

CERTIFICATE OF ANALYSIS

Christina Goldstein

DeBlock Environmental Services, LLC
16 Hugo Avenue, PO Box 675
Woodland Park, NJ 07424

Project Name and Number: **Woodland Park_All Projects / Woodland Park_All Projects**

Workorder: **25H1220**

Purchase Order:

August 29, 2025

This report relates only to the sample(s) as received by the laboratory on August 13, 2025. Laboratory reports may not be reproduced, except in full, without the written approval of the laboratory.

The issuance of the final Certificate of Analysis takes precedence over any previous Preliminary Report. Caution is advised for the utilization of preliminary data included in reports labeled as "Preliminary Report" and should not be used for regulatory purposes. A laboratory signature is provided on final reports only.

If you have any questions in reference to this laboratory report, please contact your Pace Analytical Services, LLC-Fairfield project coordinator.

Note: This cover page is included as part of the Analytical Report and must be retained as a permanent record thereof.



Victor G. Cervantes, Project Manager

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Lab ID: 25H1220-01 **Matrix:** Drinking Water **Date Collected:** 08/13/2025 08:00
Sample ID: Reading Lab - Flushed Sample **Date Received:** 08/13/2025 14:05

Total Metals - Pace Analytical Services, LLC-Fairfield

Analyte	Results	Flag	Units	MDL	RDL	Method	Prepared	Analyzed	Dilution
Lead	0.00303		mg/L	0.000492	0.00200	EPA 200.8	08/21/2025 16:10	08/21/2025 16:10	1

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Qualifiers

No Qualifiers Reported




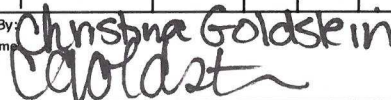

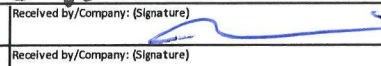
Abbreviations

DET	Analyte DETECTED
ND	Analyte NOT DETECTED at or above the Reporting Detection Limit (RDL)
NR	Not Reported
dry	Sample results reported on a dry weight basis
RPD	Relative Percent Difference
<	Less than reporting limit
≤	Less than or equal to reporting limit
>	Greater than reporting limit
≥	Greater than or equal to reporting limit
MDL	Method Detection Limit
RDL	Reporting Detection Limit
MCL/AL	Maximum Contaminant Level/Action Level
mg/kg wet	Results reported as wet weight
TTLC	Total Threshold Limit Concentration
STLC	Soluble Threshold Limit Concentration
TCLP	Toxicity Characteristic Leachate Procedure

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Laboratory Certification List for this report.

Laboratory	Certification				
	NJ	NY	PA	CT	
Pace Analytical Services, LLC Ewing 812 Silvia Street Ewing, NJ 08628	11005	12046	68-05417		
Pace Analytical Services, LLC-Fairfield 1275 Bloomfield Ave, Ste 37D Fairfield, NJ 07004	07010	11634	68-02903		

 Pace® Location Requested (City/State): CHAIN-OF-CUSTODY Analytical Request Document Fairfield, New Jersey <small>Chain-of-Custody is a LEGAL DOCUMENT - Complete all relevant fields</small>		LAB USE ONLY - Affix Workorder/Login Label Here   25H1220 S DeBlock Environmental Services, LLC Woodland Park All Projects								
Company Name: De Block Environmental Services Street Address: PO BOX 975 Woodland Park, NJ 07424		Contact/Report To: De Block Phone #: 973-998-9100 E-Mail: Cc E-Mail: Invoice to: accounts@deblock.org Invoice E-mail: Purchase Order # (if applicable): Quote #:								
Customer Project #: Project Name: Woodland Park Board of Ed Site Collection Info/Facility ID (as applicable): Beatrice Gilmore School		Time Zone Collected: [] AK [] PT [] MT [] CT [] ET County / State origin of sample(s):								
Data Deliverables: [] Level II [] Level III [] Level IV [] EQUIS [] Other		Regulatory Program (DW, RCRA, etc.) as applicable: Reportable [] Yes [X] No Rush (Pre-approval required): [] Same Day [] 1 Day [] 2 Day [] 3 Day Other _____ Date Results Requested: DW PWSID # or WW Permit # as applicable: Field Filtered (if applicable): [] Yes [] No Analysis:								
<small>* Matrix Codes (Insert in Matrix box below): Drinking Water (DW), Ground Water (GW), Wastewater (WW), Product (P), Soil/Solid (SS), Oil (OL), Wipe (WP), Tissue (TS), Bioassay (B), Vapor (V), Surface Water (SW), Sediment (SED), Sludge (SL), Caulk (CK), Leachate (LL), Biosolid (BS), Other (OT)</small>										
Customer Sample ID	Matrix *	Comp / Grab	Composite Start Date Time	Collected or Composite End Date Time	# Cont.	Residual Chlorine Result Units	Lead X	Proj. Mgr: AcctNum / Client ID: Table #: Profile / Template: Prelog / Bottle Ord. ID: Sample Comment	Lab Use Only Preservation non-conformance identified for sample	
Reading Lab - flushed sample	DW	G		8/13/25 0850	1					
Additional Instructions from Pace®:			Collected By: Printed Name: Christina Goldstein Signature: 		Customer Remarks / Special Conditions / Possible Hazards:					
Relinquished by/Company: (Signature) 			Date/Time: 8/13/25		Received by/Company: (Signature) 		Date/Time: 8/13/25 145		Tracking Number:	
Relinquished by/Company: (Signature)			Date/Time:		Received by/Company: (Signature)		Date/Time:		Delivered by: [] In- Person [] Courier	
Relinquished by/Company: (Signature)			Date/Time:		Received by/Company: (Signature)		Date/Time:		[] FedEx [] UPS [] Other	
Relinquished by/Company: (Signature)			Date/Time:		Received by/Company: (Signature)		Date/Time:		Page: 1 of 1	

Submitting a sample via this chain of custody constitutes acknowledgment and acceptance of the Pace® Terms and Conditions found at <https://www.pacelabs.com/resource-library/resource/pace-terms-and-conditions/>

ENV-FRM-CORQ-0019_v02_110123 ©

Sample Condition Upon Receipt Form (SCUR)



Affix San 25H1220

Date and Initials of person:
Examining contents: _____
Label: _____
Deliver to location: _____
pH: _____

Thermometer Used: 71TB05 Date: 08/13/25 Time: 15:19 Initials: PPA

State of Origin: NJ

Cooler #1 Temp: °C 10.4 (Misual) 0 (Correction Factor) 10.4 (Actual)

Courier: ☐ Fed Ex ☐ UPS ☐ USPS ☒ Client ☐ Commercial ☐ Pace ☐ Samples on ice, cooling process has begun

Shipping Method: ☐ First Overnight ☐ Priority Overnight ☐ Standard Overnight ☐ Ground ☐ Other

Tracking #

Custody Seal on Cooler/Box Present: ☐ Yes ☐ No Seats intact: ☐ Yes ☐ No Ice: ☒ Wet ☐ Blue ☐ Melted ☐ None

Packing Material: ☐ Bubble Wrap ☐ Bubble Bags ☐ None ☐ Other

Samples were collected by Pace employee ☐ Yes ☒ No ☐ N/A

Comments:

Chain of Custody Present	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Preservation Information: Preservative: _____ Lot #/Trace #: _____ Date: _____ Time: _____ Initials: _____
Chain of Custody Filled Out	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Relinquished Signature on COC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Sampler Name and Signature on COC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Samples Arrived within Hold Time	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Rush TAT requested on COC	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Sufficient Volume	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Correct Containers Used	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Sample Labels match COC (sample IDs & date/time of collection)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
All containers needing acid/base preservation have been checked.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
All Containers needing preservation are found to be in compliance with EPA recommendation:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Exceptions: Vials, Microbiology, O&G, Metals		
Headspace in VOA Vials? (>6mm):	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Trip Blank Present:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	

Additional Login Comments:

Client notification/ Resolution

Person Contacted:

Date/Time:

Comments/Resolution: