

Report**Lab. ID #: 91152****Report Date: 8/14/19****Attn: Ms. Karen Keane
Plymouth Board of Health
11 Lincoln St.
Plymouth, MA 02360**

Sample Received Date/Time: 8/13/19, 3:30 PM
Sample Collected Date/Time: 8/13/19, 11:45 AM
Sample Collected By: G & L Labs
Total Sample Received: 1 Water Sample
Mass. Certification Number: M-MA-1100

<u>Sampling Location</u>	<u>Fecal Coliform</u> (CFU/100mL)	<u>E. coli</u> (CFU/100mL)	<u>Enterococci</u> (CFU/100mL)
Bartlett Brook	90	100	70
Maximum Contaminant Level	200	235	104
Analyzed Date/Time	8/13/19, 4:20 PM	8/13/19, 4:20 PM	8/13/19, 4:20 PM
Method Reference	SM 9222D	EPA 1603	EPA 1600

Report reviewed
and approved by:
Lab. Director

Signed Date

8/19/19



CHAIN OF CUSTODY RECORD

LAB I.D. #:

DUE DATE:

246 Arlington Street, Quincy, MA 02170
Tel: (617) 328-3663 Fax: (617) 472-0706

COMPANY: Plymouth Board of Health
ADDRESS: 11 Lincoln St
Plymouth, MA 02360
PHONE #: 508.747-1620 FAX #: _____
P.O. #: _____
CLIENT CONTACT: Karen Kenne
PROJECT ID/LOCATION: Santlet Brook Plymouth, MA

P.O. #: _____
CLIENT CONTACT: Karen Keane
PROJECT ID/LOCATION: Bartlett Brook Plymouth, MA

SAMPLE TYPE	CONTAINER TYPE
1 WATER	P - PLASTIC
2 SOIL	G - GLASS
3 SLUDGE	V - VOA
4 OIL	
5 TISSUE	
6 DRINKING WATER	
OTHER	

Fecal coliform
E. coli
Enterococci

COMMENTS

RELINQUISHED BY:

DATE: 8-12-79

RECEIVED BY:

DATE: 4 - 13 - 19



TIME: 11:45

2015

TIME: 01 - 45 - min

100

TIME:	11:45
DATE:	10/13/19

RECEIVED BY:

TIME: 11:12 AM

DATE: 01-12-19

RELINQUISHED BY:

DATE: 8-3-11

RECEIVED BY: 7

DATE: 8-15-19

TIME: 3:30 PM

76

TIME: 5 - 30 - pm

RELINQUISHED BY:

DATE: - -

RECEIVED FOR LAB I

DATE: - -

1

TIME: - - -

TIME: - -

METHOD OF SHIPMENT

SPECIAL INSTRUCTIONS

☐ **RUSH.** BUSINESS DAY TURNAROUND☐ ROUTINE

Sample Disposal Information

Are there any other known or suspected contaminants in these samples other than those listed above ?

☐	Yes	☐	No	If Yes, list known
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