

CLIENT INFORMATION

REPORT TO BE SENT TO:  
COMPANY: Spectra East inc  
ADDRESS: 8 King Road  
CITY: Rockleigh STATE: NJ ZIP: 07647  
ATTENTION: Jacob Valeich  
PHONE: 201-767-7070 FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: outfall 001-Orangetown  
PROJECT NO.: D.S permit 2025 LOCATION:  
PROJECT MANAGER:  
e-mail:  
PHONE: FAX:

CLIENT BILLING INFORMATION

BILL TO: PO#:  
ADDRESS:  
CITY: STATE: ZIP:  
ATTENTION: PHONE:

ANALYSIS

DATA TURNAROUND INFORMATION

FAX (RUSH) \_\_\_\_\_ DAYS\*  
HARDCOPY (DATA PACKAGE): \_\_\_\_\_ DAYS\*  
EDD: \_\_\_\_\_ DAYS\*  
\*TO BE APPROVED BY CHEMTECH  
STANDARD HARDCOPY TURNAROUND TIME IS 10 BUSINESS

DATA DELIVERABLE INFORMATION

☐ Level 1 (Results Only) ☐ Level 4 (QC + Full Raw Data)  
☐ Level 2 (Results + QC) ☐ NJ Reduced ☐ US EPA CLP  
☐ Level 3 (Results + QC) ☐ NYS ASP A ☐ NYS ASP B  
+ Raw Data ☐ Other \_\_\_\_\_  
☐ EDD FORMAT \_\_\_\_\_

1. Oil & Grease + Mynal  
2. Phenolics  
3. SVOC  
4. PCB  
5. Pesticides  
6. NH4-N  
7. BOD5  
8. TSS  
9. VOC →

PRESERVATIVES

COMMENTS

| ALLIANCE<br>SAMPLE<br>ID | PROJECT<br>SAMPLE IDENTIFICATION | SAMPLE<br>MATRIX | SAMPLE<br>TYPE |      | SAMPLE<br>COLLECTION |      | # OF BOTTLES | PRESERVATIVES |   |   |   |   |   |   |   |   | COMMENTS |
|--------------------------|----------------------------------|------------------|----------------|------|----------------------|------|--------------|---------------|---|---|---|---|---|---|---|---|----------|
|                          |                                  |                  | COMP           | GRAB | DATE                 | TIME |              | 1             | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |          |
| 1.                       | Manhole                          | W                | ✓              |      | 2-6-25               | 1055 | 19           | ✓             | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |          |
| 2.                       |                                  |                  |                |      |                      |      |              |               |   |   |   |   |   |   |   |   | PH 8.22  |
| 3.                       |                                  |                  |                |      |                      |      |              |               |   |   |   |   |   |   |   |   |          |
| 4.                       |                                  |                  |                |      |                      |      |              |               |   |   |   |   |   |   |   |   |          |
| 5.                       |                                  |                  |                |      |                      |      |              |               |   |   |   |   |   |   |   |   |          |
| 6.                       |                                  |                  |                |      |                      |      |              |               |   |   |   |   |   |   |   |   |          |
| 7.                       |                                  |                  |                |      |                      |      |              |               |   |   |   |   |   |   |   |   |          |
| 8.                       |                                  |                  |                |      |                      |      |              |               |   |   |   |   |   |   |   |   |          |
| 9.                       |                                  |                  |                |      |                      |      |              |               |   |   |   |   |   |   |   |   |          |
| 10.                      |                                  |                  |                |      |                      |      |              |               |   |   |   |   |   |   |   |   |          |

SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION INCLUDING COURIER DELIVERY

|                          |                          |                                 |                                                                                                                                                                            |
|--------------------------|--------------------------|---------------------------------|----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| RELINQUISHED BY SAMPLER: | DATE/TIME: <u>1150</u>   | RECEIVED BY: <u>[Signature]</u> | Conditions of bottles or coolers at receipt: <input type="checkbox"/> COMPLIANT <input type="checkbox"/> NON COMPLIANT <input type="checkbox"/> COOLER TEMP <u>3.16</u> °C |
| 1. <u>[Signature]</u>    | DATE/TIME: <u>2-6-25</u> | 1. <u>[Signature]</u>           | Comments:                                                                                                                                                                  |
| RELINQUISHED BY SAMPLER: | DATE/TIME:               | RECEIVED BY:                    |                                                                                                                                                                            |
| 2. <u>[Signature]</u>    |                          | 2. <u>[Signature]</u>           |                                                                                                                                                                            |
| RELINQUISHED BY SAMPLER: | DATE/TIME: <u>1830</u>   | RECEIVED BY:                    |                                                                                                                                                                            |
| 3. <u>[Signature]</u>    | DATE/TIME: <u>2-6-25</u> | 3. <u>[Signature]</u>           |                                                                                                                                                                            |

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ATTENTION: Jacob Valeich

PHONE: 201-767-7070 FAX:

CLIENT PROJECT INFORMATION

PROJECT NAME: Outfall 001-0mngz+bwn Dis permit 2025

PROJECT NO.: LOCATION:

PROJECT MANAGER:

e-mail:

PHONE:

FAX:

CLIENT BILLING INFORMATION

BILL TO: PO#:

ADDRESS:

CITY STATE: ZIP:

ATTENTION: PHONE:

ANALYSIS

DATA TURNAROUND INFORMATION

FAX (RUSH) DAYS\*

HARDCOPY (DATA PACKAGE): DAYS\*

EDD: DAYS\*

\*TO BE APPROVED BY CHEMTECH

STANDARD HARDCOPY TURNAROUND TIME IS 10 BUSINESS

DATA DELIVERABLE INFORMATION

☐ Level 1 (Results Only) ☐ Level 4 (QC + Full Raw Data)

☐ Level 2 (Results + QC) ☐ NJ Reduced ☐ US EPA CLP

☐ Level 3 (Results + QC) ☐ NYS ASP A ☐ NYS ASP B

+ Raw Data) ☐ Other

☐ EDD FORMAT

Metals  
Cyanide  
Cyanide-Ammonia  
COD  
Ammonia  
LL Hg

PRESERVATIVES

COMMENTS

| ALLIANCE<br>SAMPLE<br>ID | PROJECT<br>SAMPLE IDENTIFICATION | SAMPLE<br>MATRIX | SAMPLE<br>TYPE |      | SAMPLE<br>COLLECTION |      | # OF BOTTLES |   |   |   |   |   |   |   |   |   | COMMENTS |
|--------------------------|----------------------------------|------------------|----------------|------|----------------------|------|--------------|---|---|---|---|---|---|---|---|---|----------|
|                          |                                  |                  | COMP           | GRAB | DATE                 | TIME |              | 1 | 2 | 3 | 4 | 5 | 6 | 7 | 8 | 9 |          |
| 1.                       | Manhole                          | W                | ✓              |      | 2-6-25               | 1055 | 19           | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ | ✓ |   |   |          |
| 2.                       |                                  |                  |                |      |                      |      |              |   |   |   |   |   |   |   |   |   |          |
| 3.                       |                                  |                  |                |      |                      |      |              |   |   |   |   |   |   |   |   |   |          |
| 4.                       |                                  |                  |                |      |                      |      |              |   |   |   |   |   |   |   |   |   |          |
| 5.                       |                                  |                  |                |      |                      |      |              |   |   |   |   |   |   |   |   |   |          |
| 6.                       |                                  |                  |                |      |                      |      |              |   |   |   |   |   |   |   |   |   |          |
| 7.                       |                                  |                  |                |      |                      |      |              |   |   |   |   |   |   |   |   |   |          |
| 8.                       |                                  |                  |                |      |                      |      |              |   |   |   |   |   |   |   |   |   |          |
| 9.                       |                                  |                  |                |      |                      |      |              |   |   |   |   |   |   |   |   |   |          |
| 10.                      |                                  |                  |                |      |                      |      |              |   |   |   |   |   |   |   |   |   |          |

SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION INCLUDING COURIER DELIVERY

|                          |                           |                                            |                                                                                                                                                                    |
|--------------------------|---------------------------|--------------------------------------------|--------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| RELINQUISHED BY SAMPLER: | DATE/TIME: 1150<br>2-6-25 | RECEIVED BY: [Signature]<br>1150<br>2-6-25 | Conditions of bottles or coolers at receipt: <input type="checkbox"/> COMPLIANT <input type="checkbox"/> NON COMPLIANT <input type="checkbox"/> COOLER TEMP 3.1 °C |
| 1.                       |                           |                                            | Comments:                                                                                                                                                          |
| RELINQUISHED BY SAMPLER: | DATE/TIME:                | RECEIVED BY:                               |                                                                                                                                                                    |
| 2.                       |                           |                                            |                                                                                                                                                                    |
| RELINQUISHED BY SAMPLER: | DATE/TIME: 1830<br>2-6-25 | RECEIVED BY:                               |                                                                                                                                                                    |
| 3.                       |                           |                                            |                                                                                                                                                                    |

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CLIENT: ☐ Hand Delivered ☐ Other

Shipment Complete

☐ YES ☐ NO

**FIELD SAMPLING LOG**Client Name: Spectra East Inc.Client Address: 8 King Rd. RockleighClient Rep on Site: Jacob ValeichSampling Date: 2-6-25Arrival Time: 1030Departure Time: 1118Project Name: Outfall out-Orangetown D:5 Permit 2025Project Location: RockleighCooler Custody Seal: N/ATemperature Correction Factor (°C): +3**FIELD EQUIPMENT CALIBRATION**

| pH Calibration (SM4500-H B/9040C) |                    |                    |                    |                        |
|-----------------------------------|--------------------|--------------------|--------------------|------------------------|
| Calibration                       |                    |                    |                    | ICV<br>(± 0.1 pH unit) |
|                                   | 7.00 Buffer        | 4.00 Buffer        | 10.00 Buffer       | 7.00 Buffer            |
|                                   | W 3071             | W 3107             | W 3094             | W 3093                 |
| Time                              | 1038               | 1040               | 1042               | 1045                   |
| Temp °C                           | 18.82 <sup>c</sup> | 18.80 <sup>c</sup> | 18.84 <sup>c</sup> | 18.81 <sup>c</sup>     |
| pH                                | 7.00               | 4.00               | 10.00              | 7.00                   |

**FIELD EQUIPMENT CALIBRATION**

| Specific Conductance (mS/cm) (99% -101%)/(mmho/cm) (SM2510 B/120.1/9050A) |    |                        |
|---------------------------------------------------------------------------|----|------------------------|
| Calibration (± 1%) (99% -101%)                                            |    | ICV (± 1%) (99% -101%) |
|                                                                           | WP | WP                     |
| Time                                                                      |    |                        |
| Temp °C                                                                   |    |                        |
| Reading (mS/cm)                                                           |    |                        |

Sampler Signature/Date:


2-6-25

Supervisor Review/Date:


2/6/25

