

REASONABLE CONFIDENCE PROTOCOL LABORATORY ANALYSIS QA/QCCERTIFICATION FORM

LaboratoryName: Client: Nobis Group
AllianceTechnical Group LLC

Project Number: 95700

ProjectLocation: Stratford,CT

SamplingDate(s):05/07/25

LaboratorySampleID(s):Q1984 ListRCPMethodsUsed

(9012B, 8151A, 7471B, 6010D, 8082A, 8081B, 8270E, 8260D, 7470A, 1312, 6020B)

1	For each analytical method referenced in this laboratory report package, were all specified QA/QC performance criteria followed, including the requirement to explain any criteria falling outside of acceptable guidelines, as specified in the CTDEP method-specific Reasonable Confidence Protocol documents?	⊠Yes □ No
1A	Were the method specified preservation and holding time requirements met?	⊠ Yes □ No
1B	<u>VPH and EPH Methods only</u> : Was the VPH or EPH method conducted without significant modifications (see Section 11.3 of respective RCP methods)	□Yes □ No ⊠N/A
2	Were all samples received by the laboratory in a condition consistent with that described on the associated chain-of-custody document(s)?	⊠Yes □ No
3	Were samples received at an appropriate temperature (<6° C°)?	⊠Yes □No
4	Were all QA/QC performance criteria specified in the CTDEP Reasonable Confidence Protocol documents achieved?	□Yes ⊠No
_	a) Were reporting limits specified or referenced on the chain-of-custody?	⊠Yes □ No
5	b) Were these reporting limits met?	⊠Yes □ No
6	For each analytical method referenced in this laboratory report package, were results reported for all constituents identified in the method-specific analyte lists presented in the Reasonable Confidence Protocol documents?	⊠Yes □ No
7	Are project-specific matrix spikes and laboratory duplicates included in this data set?	□Yes ⊠No

Notes: For all questions to which the response was "No" (with the exception of question #7), additional information must be provided in an attached narrative. If the answer to question #1, #1A, or #1B is "No", the data package does not meet the requirements for "Reasonable Confidence." This form may not be altered and all questions must be answered.

I, the undersigned, attest under the pains and penalties of perjury that, to the best of my knowledge and belief and based upon my personal inquiry of those responsible for providing theinformation contained in this analytical report, such information is accurate and complete.				
Authorized Signature:	Position: OC	SUPERVISOR		
Printed Name: NIMISHA N. PANDYA	Date:			
Nameof Laboratory AllianceTechnical Group LLC				