

DATA PACKAGE

GENERAL CHEMISTRY

PROJECT NAME : MONTHLY 2025

ARAMARK UNIFORMS

740 Frelinghuysen Ave.

Newark, NJ - 07114-

Phone No: 973-824-1101

ORDER ID : Q2229

ATTENTION : Jose Liceaga



Laboratory Certification ID # 20012



1) Signature Page	3
2) Case Narrative	4
2.1) Genchem- Case Narrative	4
3) Qualifier Page	5
4) QA Checklist	6
5) Genchem Data	7
6) Shipping Document	11
6.1) CHAIN OF CUSTODY	12
6.2) Lab Certificate	13

1

2

3

4

5

6

Cover Page

Order ID : Q2229

Project ID : Monthly 2025

Client : Aramark Uniforms

Lab Sample Number

Q2229-01
Q2229-02

Client Sample Number

GRAB
COMP

I certify that the data package is in compliance with the terms and conditions of the contract, both technically and for completeness, for other than the conditions detailed above. Release of the data contained in this hard copy data package has been authorized by the laboratory manager or his designee, as verified by the following signature.

Signature :

APPROVED

By Nimisha Pandya, QA/QC Supervisor at 3:32 pm, Jun 11, 2025

Date: 6/10/2025

NYDOH CERTIFICATION NO - 11376

NJDEP CERTIFICATION NO - 20012



284 Sheffield Street, Mountainside, NJ 07092 Phone: 908 789 8900 Fax: 908 789 8922

CASE NARRATIVE

Aramark Uniforms

Project Name: Monthly 2025

Project # N/A

Order ID # Q2229

Test Name: BOD5,TPH,TSS

A. Number of Samples and Date of Receipt:

2 Water samples were received on 06/04/2025.

B. Parameters:

According to the Chain of Custody document, the following analyses were requested: BOD5, TPH and TSS. This data package contains results for BOD5,TPH,TSS.

C. Analytical Techniques:

The analysis of TPH was based on method 1664A, The analysis of TSS was based on method SM2540 D and The analysis of BOD5 was based on method SM5210 B.

D. QA/ QC Samples:

The Holding Times were met for all analysis.

The Blank Spike met requirements for all samples.

The Duplicate analysis met criteria for all samples.

The Blank analysis did not indicate the presence of lab contamination.

The Calibration met the requirements.

E. Additional Comments:

As per method 1664A, MS/MSD is required to be performed with the sample analysis. However, Lab did not receive sufficient volume to perform the MS/MSD therefore MS/MSD were not performed for this project.

I certify that the data package is in compliance with the terms and conditions of the contract, both technically and for completeness, for other than the conditions detailed above. The laboratory manager or his designee, as verified by the following signature has authorized release of the data contained in this hard copy data package.

Signature_____

APPROVED

By Nimisha Pandya, QA/QC Supervisor at 3:32 pm, Jun 11, 2025

DATA REPORTING QUALIFIERS- INORGANIC

For reporting results, the following “ Results Qualifiers” are used:

J	Indicates the reported value was obtained from a reading that was less than the Contract Required Detection Limit (CRDL), but greater than or equal to the Instrument Detection Limit (IDL).
U	Indicates the analyte was analyzed for, but not detected.
ND	Indicates the analyte was analyzed for, but not detected
E	Indicates the reported value is estimated because of the presence of interference
M	Indicates Duplicate injection precision not met.
N	Indicates the spiked sample recovery is not within control limits.
S	Indicates the reported value was determined by the Method of Standard Addition (MSA).
*	Indicates that the duplicate analysis is not within control limits.
+	Indicates the correlation coefficient for the MSA is less than 0.995.
D	Indicates the reported value is from a secondary analysis with a dilution factor. The original analysis exceeded the calibration range.
M	Method qualifiers “P” for ICP instrument “PM” for ICP when Microwave Digestion is used “CV” for Manual Cold Vapor AA “AV” for automated Cold Vapor AA “CA” for MIDI-Distillation Spectrophotometric “AS” for Semi -Automated Spectrophotometric “C” for Manual Spectrophotometric “T” for Titrimetric “NR” for analyte not required to be analyzed
OR	Indicates the analyte’s concentration exceeds the calibrated range of the instrument for that specific analysis.
Q	Indicates the LCS did not meet the control limits requirements
H	Sample Analysis Out Of Hold Time

APPENDIX A

QA REVIEW GENERAL DOCUMENTATION

Project #: Q2229

Completed

For thorough review, the report must have the following:

GENERAL:

Are all original paperwork present (chain of custody, record of communication,airbill, sample management lab chronicle, login page)

✓

Check chain-of-custody for proper relinquish/return of samples

✓

Is the chain of custody signed and complete

✓

Check internal chain-of-custody for proper relinquish/return of samples /sample extracts

✓

Collect information for each project id from server. Were all requirements followed

✓

COVER PAGE:

Do numbers of samples correspond to the number of samples in the Chain of Custody on login page

✓

Do lab numbers and client Ids on cover page agree with the Chain of Custody

✓

CHAIN OF CUSTODY:

Do requested analyses on Chain of Custody agree with form I results

✓

Do requested analyses on Chain of Custody agree with the log-in page

✓

Were the correct method log-in for analysis according to the Analytical Request and Chain of Custody

✓

Were the samples received within hold time

✓

Were any problems found with the samples at arrival recorded in the Sample Management Laboratory Chronicle

✓

ANALYTICAL:

Was method requirement followed?

✓

Was client requirement followed?

✓

Does the case narrative summarize all QC failure?

✓

All runlogs and manual integration are reviewed for requirements

✓

All manual calculations and /or hand notations verified

✓

QA Review Signature: SOHIL JODHANI

Date: 06/10/2025



SAMPLE DATA

Report of Analysis

Client:	Aramark Uniforms	Date Collected:	06/04/25 10:40
Project:	Monthly 2025	Date Received:	06/04/25
Client Sample ID:	GRAB	SDG No.:	Q2229
Lab Sample ID:	Q2229-01	Matrix:	WATER
		% Solid:	0

Parameter	Conc.	Qua.	DF	MDL	LOQ / CRQL	Units	Prep Date	Date Ana.	Ana Met.
TPH	8.20		1	0.29	5.00	mg/L		06/09/25 12:30	1664A

Comments:

U = Not Detected
 LOQ = Limit of Quantitation
 MDL = Method Detection Limit
 LOD = Limit of Detection
 D = Dilution
 Q = indicates LCS control criteria did not meet requirements
 H = Sample Analysis Out Of Hold Time

J = Estimated Value
 B = Analyte Found in Associated Method Blank
 * = indicates the duplicate analysis is not within control limits.
 E = Indicates the reported value is estimated because of the presence of interference.
 OR = Over Range
 N =Spiked sample recovery not within control limits

Report of Analysis

Client:	Aramark Uniforms	Date Collected:	06/04/25 10:42
Project:	Monthly 2025	Date Received:	06/04/25
Client Sample ID:	COMP	SDG No.:	Q2229
Lab Sample ID:	Q2229-02	Matrix:	WATER
		% Solid:	0

Parameter	Conc.	Qua.	DF	MDL	LOQ / CRQL	Units	Prep Date	Date Ana.	Ana Met.
BOD5	444		1	0.20	2.00	mg/L		06/05/25 15:30	SM 5210 B-16
TSS	121		1	1.00	4.00	mg/L		06/09/25 13:00	SM 2540 D-15

Comments:

U = Not Detected
LOQ = Limit of Quantitation
MDL = Method Detection Limit
LOD = Limit of Detection
D = Dilution
Q = indicates LCS control criteria did not meet requirements
H = Sample Analysis Out Of Hold Time

J = Estimated Value
B = Analyte Found in Associated Method Blank
* = indicates the duplicate analysis is not within control limits.
E = Indicates the reported value is estimated because of the presence of interference.
OR = Over Range
N = Spiked sample recovery not within control limits

LAB CHRONICLE

OrderID:	Q2229	OrderDate:	6/4/2025 4:39:00 PM
Client:	Aramark Uniforms	Project:	Monthly 2025
Contact:	Jose Liceaga	Location:	N41

LabID	ClientID	Matrix	Test	Method	Sample Date	Prep Date	Anal Date	Received
Q2229-01	GRAB	WATER			06/04/25			06/04/25
			TPH	1664A	10:40		06/09/25 12:30	
Q2229-02	COMP	WATER			06/04/25			06/04/25
			BOD5	SM5210 B	10:42		06/05/25 15:30	
			TSS	SM2540 D			06/09/25 13:00	



SHIPPING DOCUMENTS

CLIENT INFORMATION				CLIENT PROJECT INFORMATION				CLIENT BILLING INFORMATION																																																																																							
REPORT TO BE SENT TO: COMPANY: <u>Aramark Uniforms</u> ADDRESS: <u>740 Frelinghuysen Ave.</u> CITY: <u>Newark</u> STATE: <u>NJ</u> ZIP: <u>07114</u> ATTENTION: <u>Jarrod Mills</u> PHONE: <u>973-824-1101</u> FAX: _____				PROJECT NAME: <u>Monthly</u> PROJECT NO.: _____ LOCATION: _____ PROJECT MANAGER: _____ e-mail: _____ PHONE: _____ FAX: _____				BILL TO: _____ PO#: _____ ADDRESS: _____ CITY: _____ STATE: _____ ZIP: _____ ATTENTION: _____ PHONE: _____																																																																																							
DATA TURNAROUND INFORMATION				DATA DELIVERABLE INFORMATION				ANALYSIS																																																																																							
FAX (RUSH) _____ DAYS* HARDCOPY (DATA PACKAGE): _____ DAYS* EDD: _____ DAYS* *TO BE APPROVED BY CHEMTECH STANDARD HARDCOPY TURNAROUND TIME IS 10 BUSINESS				<input type="checkbox"/> Level 1 (Results Only) <input type="checkbox"/> Level 4 (QC + Full Raw Data) <input type="checkbox"/> Level 2 (Results + QC) <input type="checkbox"/> NJ Reduced <input type="checkbox"/> US EPA CLP <input type="checkbox"/> Level 3 (Results + QC) <input type="checkbox"/> NYS ASP A <input type="checkbox"/> NYS ASP B + Raw Data <input type="checkbox"/> Other _____ <input type="checkbox"/> EDD FORMAT _____				<div>1P4 BODS ISS</div> <table><thead><tr><th colspan="9">PRESERVATIVES</th><th colspan="3">COMMENTS</th></tr><tr><th colspan="9">← Specify Preservatives</th><th colspan="3"></th></tr><tr><th colspan="9">A-HCl D-NaOH</th><th colspan="3"></th></tr><tr><th colspan="9">B-HNO3 E-ICE</th><th colspan="3"></th></tr><tr><th colspan="9">C-H2SO4 F-OTHER</th><th colspan="3"></th></tr></thead><tbody><tr><td>1.</td><td>2.</td><td>3.</td><td>4.</td><td>5.</td><td>6.</td><td>7.</td><td>8.</td><td>9.</td><td></td><td></td><td></td><td></td><td></td><td></td><td></td></tr></tbody></table>												PRESERVATIVES									COMMENTS			← Specify Preservatives												A-HCl D-NaOH												B-HNO3 E-ICE												C-H2SO4 F-OTHER												1.	2.	3.	4.	5.	6.	7.	8.	9.							
PRESERVATIVES									COMMENTS																																																																																						
← Specify Preservatives																																																																																															
A-HCl D-NaOH																																																																																															
B-HNO3 E-ICE																																																																																															
C-H2SO4 F-OTHER																																																																																															
1.	2.	3.	4.	5.	6.	7.	8.	9.																																																																																							
ALLIANCE SAMPLE ID	PROJECT SAMPLE IDENTIFICATION			SAMPLE MATRIX	SAMPLE TYPE		SAMPLE COLLECTION		# OF BOTTLES																																																																																						
				COMP	GRAB	DATE	TIME																																																																																								
1.	Grab			W		6-4-25	1040	1	✓	C	E	E																																																																																			
2.	Comp			W	✓	6-4-25	1042	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: <u>1044</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>2.8</u> °C																																																																																									
1. <u>[Signature]</u>		6-4-25		1. <u>[Signature]</u>		Comments: _____																																																																																									
RELINQUISHED BY SAMPLER:		DATE/TIME:		RECEIVED BY:																																																																																											
2.				2.																																																																																											
RELINQUISHED BY SAMPLER:		DATE/TIME: <u>1830</u>		RECEIVED BY:		Page _____ of _____ CLIENT: <input type="checkbox"/> Hand Delivered <input type="checkbox"/> Other _____ Shipment Complete																																																																																									
3. <u>[Signature]</u>		6-4-25		3.		<input type="checkbox"/> YES <input type="checkbox"/> NO																																																																																									

Laboratory Certification

Certified By	License No.
CAS EPA CLP Contract	68HERH20D0011
Connecticut	PH-0830
DOD ELAP (ANAB)	L2219
Maine	2024021
Maryland	296
New Hampshire	255424 Rev 1
New Jersey	20012
New York	11376
Pennsylvania	68-00548
Soil Permit	525-24-234-08441
Texas	T104704488