

DATA PACKAGE

SUB - DATA

PROJECT NAME : NYU CLINICAL LAB WATER TESTING 2025 - H252243895

NYU LANGONE HEALTH

560 First Avenue 4th Floor TH-418

New York, NY - 10016

Phone No: 646-501-0733

ORDER ID : Q2738

ATTENTION : Marie-Ange Exilhomme



Cover Page

Order ID : Q2738

Project ID : NYU Clinical Lab Water Testing 2025 - H252243895

Client : NYU Langone Health

Lab Sample Number

Q2738-01
Q2738-02
Q2738-03
Q2738-04
Q2738-05
Q2738-06
Q2738-07
Q2738-08
Q2738-09

Client Sample Number

TH-401A-SINK-1
TH-401A-SINK-2
CC-10TH-FL
CC-3RD-FL
7N-SKIRBALL
TH-430-DI-1
TH-430-DI-2
TH-430-DI-3
TH-404-DI-4

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 10:04 am, Aug 12, 2025

Date: 8/12/2025

NYDOH CERTIFICATION NO - 11376

NJDEP CERTIFICATION NO - 20012



Atlas Environmental Lab, Corp
255 West 36th Street, Suite# 1503
New York, NY 10018
Phone: (212) 563-0400 Fax: (212) 563-0401
www.atlasenvironmentallab.com

Report of Bacteriological Examination (Heterotrophic Plate Count)

Client: Alliance Technical Group
Collected/Submitted by: Client
Project Name/No.: NYU Clinical Lab Water Testing 2025 - H25224389 / Q2738
Project Address:
Matrix: Water

Lab ID: HP0725056
Date Received: 7/31/2025
Time Received: 14:03
Report Date: 8/2/2025

Sample ID#	Sample Collected	Location/Description	Incubation in/out	HPC (cfu/ml)
Client ID#	Date/Time		Date/Time	
01	7/31/2025 @ 11:30	TH-401A-SINK-1	Incubated in: 07/31/2025 @ 14:34	1
HP0725056-1			Incubated out: 08/02/2025 @ 14:34	
02	7/31/2025 @ 11:30	TH-401A-SINK-2	Incubated in: 07/31/2025 @ 14:34	6
HP0725056-2			Incubated out: 08/02/2025 @ 14:34	
03	7/31/2025 @ 12:00	CC-10TH-FL	Incubated in: 07/31/2025 @ 14:34	4
HP0725056-3			Incubated out: 08/02/2025 @ 14:34	
04	7/31/2025 @ 12:15	CC-3RD-FL	Incubated in: 07/31/2025 @ 14:34	2
HP0725056-4			Incubated out: 08/02/2025 @ 14:34	
05	7/31/2025 @ 12:15	7N-SKIRBALL	Incubated in: 07/31/2025 @ 14:34	5
HP0725056-5			Incubated out: 08/02/2025 @ 14:34	
06	7/31/2025 @ 12:15	TH-430-DI-1	Incubated in: 07/31/2025 @ 14:34	2
HP0725056-6			Incubated out: 08/02/2025 @ 14:34	



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Client: Alliance Technical Group
Collected/Submitted by: Client
Project Name/No.: NYU Clinical Lab Water Testing 2025 - H25224389 / Q2738
Project Address:
Matrix: Water

Lab ID: HP0725056
Date Received: 7/31/2025
Time Received: 14:03
Report Date: 8/2/2025

Sample ID#	Sample Collected	Location/Description	Incubation in/out	HPC (cfu/ml)
Client ID#	Date/Time		Date/Time	
07	7/31/2025 @ 12:15	TH-430-DI-2	Incubated in: 07/31/2025 @ 14:34	47
HP0725056-7			Incubated out: 08/02/2025 @ 14:34	
08	7/31/2025 @ 12:15	TH-430-DI-3	Incubated in: 07/31/2025 @ 14:34	150
HP0725056-8			Incubated out: 08/02/2025 @ 14:34	
09	7/31/2025 @ 12:15	TH-404-DI-4	Incubated in: 07/31/2025 @ 14:34	3
HP0725056-9			Incubated out: 08/02/2025 @ 14:34	

CO

Method: Potable: SM 20, 21-23 9215 B (-04); Non Potable: SM 18-21 9215 B
ELAP Method 9136

Analyst: AD

Approved by: 

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Results relate only to the items tested.
NYS-ELAP#11999

CLIENT INFORMATION

REPORT TO BE SENT TO:

COMPANY: **NYU Langone Health / Pathology**
ADDRESS: **560 1st Ave TH401-A**
CITY: **New York** STATE: **NY** ZIP: **10016**
ATTENTION: **Marie-Ange Exilhomme**
PHONE: **646-501-0733** Fax: **646-501-0498**

CLIENT PROJECT INFORMATION

PROJECT NAME: **NYU Clinical Lab #20**
PROJECT NO.: LOCATION: **Testing**
PROJECT MANAGER:
e-mail:
PHONE: FAX:

CLIENT BILLING INFORMATION

BILL TO: **NYU L+Tisch #252243895**
ADDRESS: **P.O. Box 407**
CITY: **Elmsford** STATE: **NY** ZIP: **10523**
ATTENTION: PHONE:

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

ANALYSIS

ALLIANCE SAMPLE ID	PROJECT SAMPLE IDENTIFICATION	SAMPLE MATRIX	SAMPLE TYPE		SAMPLE COLLECTION		# OF BOTTLES	PRESERVATIVES									COMMENTS
			COMP	GRAB	DATE	TIME		1	2	3	4	5	6	7	8	9	
1. Sink #1 TH401A	TH401A Cytology Sink #1	Tap			7/31/25	11:30	1	✓									
2. Sink #2 TH401A	TH401A Cytology Sink #2	Tap			7/31/25	11:30	1	✓									
3. 10 th floor Cancer Center Cytology	10 th floor Cancer Center Cytology	Tap			7/31/25	12:00	1	✓									
4. 3 rd floor Cancer Center Cytology	3 rd floor Cancer Center Cytology	Tap			7/31/25	12:15	1	✓									
5. 7N	7N Skirball FGP Cytology	Tap			7/31/25	12:15	1	✓									
6. TH430 DI#1	TH430 Histology DI#1	DI#1			7/31/25	12:15	1	✓									
TH430 DI#2	TH430 Histology DI#2	DI#2			7/31/25	12:15	1	✓									
TH430 DI#3	TH430 Histology DI#3	DI#3			7/31/25	12:15	1	✓									
TH404 DI#4	TH404 DI#4	DI#4			7/31/25	12:15	1	✓									

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

RELINQUISHED BY SAMPLER: 1. Amrita Singh	DATE/TIME: 1320 7-31-25	RECEIVED BY: 1. [Signature]	DATE/TIME: 1320 7-31-25	Conditions of bottles or coolers at receipt: ☐ COMPLIANT ☐ NON COMPLIANT ☐ COOLER TEMP _____ °C Comments: _____ _____ _____
RELINQUISHED BY SAMPLER: 2. [Signature]	DATE/TIME: _____	RECEIVED BY: 2. _____	DATE/TIME: _____	
RELINQUISHED BY SAMPLER: 3. [Signature]	DATE/TIME: 1502 7-31-25	RECEIVED BY: 3. _____	DATE/TIME: _____	

Page _____ of CLIENT: ☐ Hand Delivered ☐ Other

Shipment Complete ☐ YES ☐ NO

HP0725056

CHAIN OF CUSTODY RECORD

Sub Lab INFORMATION	CLIENT PROJECT INFORMATION	CLIENT BILLING INFORMATION
COMPANY : Atlas Environmental Lab	ORDER ID : Q2738	BILL TO: CHEMTECH PO# : q2738
ADDRESS : 255 W. 36th Street, Suite# 1503	PROJECT ID: NYU Clinical Lab Water Testing 2025 - H25224389	ADDRESS : 284, Sheffield Street
CITY: New York State : NY ZIP : 10018	PROJECT MANAGER YAZMEEN	CITY: Mountainside State : NJ ZIP : 07092
E-mail : jdarvish@atlasenvironmentallab.co	E-mail : yazmeen.gomez@alliancetg.com	ATTENTION : YAZMEE
PHONE : 212-563-0400	PHONE : (908) 789 8900 FAX: (908) 789 8922	PHONE : (908) 789 8900 FAX : (908) 789 8922

EDD : NONE	Report : Results Only	Comment :
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ID	CLIENT SAMPLE IDENTIFICATION	SAMPLE MATRIX	ANALYSIS	Preservative	Method	SAMPLE COLLECTION		# OF BOTTLES	TAT DAYS
						DATE	TIME		
01	TH-401A-SINK-1	Water	Heterotrophic Plate Count			07/31/2025	11:30:00	1	10
02	TH-401A-SINK-2	Water	Heterotrophic Plate Count			07/31/2025	11:30:00	1	10
03	CC-10TH-FL	Water	Heterotrophic Plate Count			07/31/2025	12:00:00	1	10
04	CC-3RD-FL	Water	Heterotrophic Plate Count			07/31/2025	12:15:00	1	10
05	7N-SKIRBALL	Water	Heterotrophic Plate Count			07/31/2025	12:15:00	1	10
06	TH-430-DI-1	Water	Heterotrophic Plate Count			07/31/2025	12:15:00	1	10
07	TH-430-DI-2	Water	Heterotrophic Plate Count			07/31/2025	12:15:00	1	10
08	TH-430-DI-3	Water	Heterotrophic Plate Count			07/31/2025	12:15:00	1	10
09	TH-404-DI-4	Water	Heterotrophic Plate Count			07/31/2025	12:15:00	1	10

SAMPLE CUSTODY MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGES POSSESSION INCLUDING COURIER DELIVERY				
RELINQUISHED BY SAMPLER: 1.	DATETIME: 7-31-25 14:03	RECEIVED BY: 1. <i>[Signature]</i>	Conditions of bottles or Coolers at receipt: ☐ Compliant ☐ Non Compliant Cooler Temp _____ Ice or Cooler? _____ Incubated In: 7/31/25 @ 14:34 Incubated Out: 8/2/25 @ 14:34 Chlorine: N/Y	
RELINQUISHED BY: 2.	DATETIME:	RECEIVED BY: 2.	☐ OVERNIGHT ☐ OVERNIGHT	
RELINQUISHED BY: 3.	DATETIME:	RECEIVED BY: 3.	Shipment Complete: ☐ YES ☐ NO AD <i>[Signature]</i> 8/2/25	