



alpha

Alpha Analytical Laboratories, Inc.

email: clientservices@alpha-labs.com

Corporate: 208 Mason Street | Ukiah, CA 95482 | T: 707-468-0401 | F: 707-468-5267 | ELAP# 1551

27 August 2020

Volcano CSD

Attn: George Barnes

P O Box 72

Volcano, CA 95689

RE: Routine - Coliform

Work Order: 20H2145

Enclosed are the results of analyses for samples received by the laboratory on 08/18/20 14:00. If you have any questions concerning this report, please feel free to contact me.

Sincerely,

Jeanette L. Poplin For Karen L. Lantz

Project Manager



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Volcano CSD
P O Box 72
Volcano, CA 95689

Project Manager: George Barnes
Project: Routine - Coliform
Project Number: 0300016

Reported:
08/27/20 13:06

Bay Area: 262 Rickenbacker Circle | Livermore, CA 94551 | T: 925-828-6226 | F: 925-828-6309 | ELAP# 2728
Central Valley: 9090 Union Park Way Suite 113 | Elk Grove, CA 95624 | T: 916-686-5190 | F: 916-686-5192 | ELAP# 2922
North Bay: 110 Liberty Street | Petaluma, CA 94952 | T: 707-769-3128 | F: 707-769-8093 | ELAP# 2303
San Diego: 2722 Loker Avenue West Suite A | Carlsbad, CA 92010 | T: 760-930-2555 | F: 760-930-2510 | ELAP# 3055

ANALYTICAL REPORT FOR SAMPLES

Sample ID	Laboratory ID	Matrix	Date Sampled	Date Received
Even Month: 0300016 Routine OS Country Store	20H2145-01	Water	08/18/20 07:45	08/18/20 14:00



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	Result	Reporting Limit	Dilution	Batch	Prepared	Analyzed	ELAP#	Method	Note
Even Month: 0300016 Routine OS Country Store (20H2145-01)			Sample Type: Water			Sampled: 08/18/20 07:45			
Conventional Chemistry Parameters by APHA/EPA Methods									
pH	6.76 pH Units	1.68	1	AH04169	08/18/20 15:00	08/18/20 15:00	2922	SM4500-H+ B	T-14
Residual Chlorine	0.30 mg/L	0.10	1	AH04171	08/18/20 16:50	08/18/20 16:50	2922	SM4500-Cl F	T-14
Microbiological Parameters by APHA Standard Methods									
Total Coliforms	Absent		1	1	AH04259	08/18/20 15:10	08/19/20 16:36	2922	Colisure
E. Coli	Absent		1	1	AH04259	08/18/20 15:10	08/19/20 16:36	2922	Colisure

The results in this report apply to the samples analyzed in accordance with the chain of custody document. This analytical report must be reproduced in its entirety.



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Notes and Definitions

A Absent

P Present

T-14 Residual chlorine, dissolved oxygen, sulfite, and pH must be analyzed in the field to meet the EPA specified 15 minute hold time.

ND Analyte NOT DETECTED at or above the reporting limit

dry Sample results reported on a dry weight basis

RPD Relative Percent Difference

Chain of Custody - Work Order

Reports and Invoices delivered by email in PDF format

Lab No 2042145 Pg _____ of _____

Report to		Invoice to (if different)					Project Information										Signature below authorizes work under terms stated on reverse side.																																		
Company: Volcano CSD		Contact:					Project ID:										<table border="1"> <tr> <th colspan="5">Analysis Request</th> <th>TAT</th> <th>Temp upon Receipt °C</th> </tr> <tr> <td colspan="5" rowspan="3"> Standard 10 days Standard 5 days X 48 hours Other: _____ days Lab preapproval required </td> <td>Standard 10 days</td> <td>Ukiah temp:</td> </tr> <tr> <td>Standard 5 days</td> <td>Dublin temp:</td> </tr> <tr> <td>X</td> <td>Elk Grove temp:</td> </tr> <tr> <td colspan="5"></td> <td>48 hours</td> <td>37c</td> </tr> </table>										Analysis Request					TAT	Temp upon Receipt °C	Standard 10 days Standard 5 days X 48 hours Other: _____ days Lab preapproval required					Standard 10 days	Ukiah temp:	Standard 5 days	Dublin temp:	X	Elk Grove temp:						48 hours	37c
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Attn: George Barnes		Email address:					Project No:																																												
Address: PO Box 72 Volcano, CA 95689		Address:					PO Number:																																												
Phone/Fax: 209-296-4888		Phone/Fax:					Internal Lab Use: 189, 189(a) & 190, 190(a)																																												
Email Address:		Field Sampler - Printed Name & Signature:					Total Number of Containers per Sample ID																																												
Sample Identification		Sampling		Container					Preservative					Matrix					CV - PH	CV - Chlorine Residual / glass	CV - PA	Courier	Sample Notes or CDPH Source Numbers:																												
		Date	Time	40ml Vial	Poly	Glass	Sleeve	Other	HCl	HNO3	NaOH	Na2S2O3	None	Water DW	Soil	Other																																			
EVEN MONTH; 0300016		8-18-20	0745	x	x													1	x	x	x																														
Routine os country store		1	1	x														1			x																														
ODD MONTH: 0300016				x	x													1	x	x	x																														
Routine @ 16430 Clapboard				x														1			x																														
Relinquished by		Received by					Date		Time		CDPH Write On EDT Transmission?					Yes No																																			
[Signature]		[Signature]					8-18-20		1400		State System Number: _____					If "Y" please enter the Source Number(s) in the column above																																			
											Mail Hardcopy to DDW- ?					Yes No																																			
											Hardcopy to DDW attn:																																								
											Travel and Site Time:					Mileage:		Misc. Supplies:																																	