

## Results Report

Order ID: 2B04828

Karl Environmental Group

20 Lauck Road Mohnton, PA 19540 Project: Eden Autism

Eden Autism

Attn: Aja Slater Regulatory ID:

Sample Number: 2B04828-01 Collector: AS		Site: EA-Blank Collect Date: 02/23/2022 8:27 am		Samp Samp		e: Grab				
Department / Test / Parameter	Result		Units	Method	R.L.	DF	Prep Date	Ву	Analysis Date	Ву
<u>Metals</u>										
Lead	< 1.00		μg/L	EPA 200.8	1.00	1	02/25/22	MKR	03/02/22 14:14	MKR
Sample Number: 2B04828-02 Collector: AS			N-FP-1FL-Kitch-3 Date: 02/23/2022 8:25 am			le ID: le Typ	e: Grab			
Department / Test / Parameter	Result		Units	Method	R.L.	DF	Prep Date	Ву	Analysis Date	Ву
Matala										
<u>Metals</u>										
<u>Metals</u> Lead	< 1.00		μg/L	EPA 200.8	1.00	1	02/25/22	MKR	03/02/22 14:57	MKR
	< 1.00	Site: EA-WC-Collect Date:	1FL-HallRec	1	Samp	le ID:	02/25/22 BF e: Grab	MKR	03/02/22 14:57	MKR
Lead Sample Number: 2B04828-03	< 1.00		1FL-HallRec	1	Samp	le ID:	BF	MKR By	03/02/22 14:57  Analysis Date	MKR
Sample Number: 2B04828-03 Collector: AS			1FL-HallRec- 02/23/2022	1 8:21 am	Samp Samp	le ID: le Typ	BF e: Grab			

## **Sample Receipt Conditions:**

All samples met the sample receipt requirements for the relevant analyses.

The test pH, Lab is performed in the Laboratory as soon as possible. These results are not appropriate for compliance with NPDES, SDWA, or other regulatory programs that require analysis within 15 minutes of sample collection and should be considered for informational purposes only.

All results meet the requirements of STL's TNI (NELAC) Accredited Quality System unless otherwise noted. If your results contain any data qualifiers or comments, you should evaluate useability relative to your needs.

If collectors initials include "STL", samples have been collected in accordance with STL SOP SL0015.

All results reported on an As Received (Wet Weight) basis unless otherwise noted.

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Results are considered Preliminary unless report is signed by authorized representative of STL.

Report Generated On: 03/07/2022 1:46 pm 2B04828

> STL Results Revision #1.9 Effective: 04/16/2020





<sup>\*</sup>pH, Final for ASTM leachate is performed by method SM 4500-H-B.



Reviewed and Released By:

Ryan F Knerr Project Manager II Tyan Kin

Report Generated On: 03/07/2022 1:46 pm

STL\_Results Revision #1.9

Effective: 04/16/2020

2B04828





610-



	010-1	2804828					Oi	uei ID		
Client Name: Karl Environmental Gr	oup	Ryan F Knerr		26	den /	Autis	im			
Address: 20 Lauck Road	Phone: _6	Phone: 610-856-7700 Address:								
Mohnton, PA 19540		<sub>Fax:</sub> 61	0-856-5040							
Contact Name: Kyle Acker	Email: k	fo: 21-0	928	B						
Lead 2008, N) DCE = 2nd draw										
Bodies 1 Jagury Sample Description / Site ID:	Date Sampled	Time Sampled	resi(s) Nequesieu.		Bottle Quantity	Matrix 0	Sample Codes Type		Comments / Field Data:	
EA-Blank	2-23-2	10827 45	3 Level 200	8 NJ DO	06 1	Ph	G	P 14	2	
EA-FP-IFL-Kitch	-3	G7505								
EA-WC-IFL-Hall Re	1 ' /	083/						1	BF	
CA- DW-2FL- Hall?	246-1	0809						-	luc	
						-			_	
						·				
Reinquished By:	Date:		Sample Conditions Submitted with COC? Y N	Matrix NPW = Non-Potable Wate			Bottle Type F = Plastic		Reporting Options  DWA Reporting	
Received By:  Refinquished By:	Date:  Time:  Date:  Da	Temp °C: Acceptable: Y / N	Number of containers match number on COC? (V) N  All containers in tact? (V) N	Solid = Raw Sludge, Dew (reported as mg/kg PW = Potable Water (not SDWA = Safe Drinking W. Sample Type Key	g) for SDWA compliand	pes O	= Glass = Other Preservative I = Sodium Thiosulfate	PWS	SID:	
Received in Lab By:  Signing this form indicates your agreement with SWTL's Sta Shaded areas are for SWTL use only.	Time: 14CC) Date: 2/24/22 Time: 1400	Temp °C: Acceptable: Y / N  Temp °C: Acceptable: Y / N  Acceptable: Y / N	Tests within holding times N N 40 mL VOA vials free of headspace? Y N N N N N N N N N N N N N N N N N N	G = Grab  8HC = 8 Hr. Composite  24HC = 24 Hr. Composite er 12, 2014	D=Distribution E=Entry Point R=Raw C=Check S=Special M=Maximum Residence	H C S O O	= Ascorbic Ac = HNO <sub>3</sub> = HCI = H <sub>2</sub> SO <sub>4</sub> H = NaOH = Other A = None Required	□R	eturn a copy of this form with eport	

\* was not working

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AT(Check One): Standard 24hr 48hr 72hr Other (Additional charges may apply for rush TAT. If not specified, standard TAT will apply)





TESTING LABS	610∹	2804828	Order ID:
Client Name: Karl Environmental Group		Ryan F Knerr	Eden Autism
Address: 20 Lauck Road		Phone: 610-856-7700	Address:
Mohnton, PA 19540		Fax: 610-856-5040	
Contact Name: Kyle Acker		Email: kacker@karlenv.com	Payment / P.O. Info: 21-0928 B
Comments: 200, 8 A) DC	6 = 0		

	21401 200.0 1 200 100	(C - 2	nd d	raw										
	PODO LO JUNO	7	70						<b>-</b>		See Codes Below			
SWTL Sample Number	Campic Description? Ofte 1D.	Date Sampled	Time Sampled	Samplers Initials	Test(s) Reque	sted:			Bottle Quantity	Matrix	Sample Type	Bottle Type	Preservative	Comments / Field Data:
	EA-Blank	2-33-37	0827	48	Lead	200.8	NJ	006	)	Ph	G	P	17	
	EA-FP-IFL-Kitch-3		G7535						)					
	EA-WC-IFL-Hall Rec-1		C831				-		V	T		l	L	BF
	EA. DW-2FL-14911246-1		0809											wc
														,
								***************************************						

Reinquished By:	Date:		Sample Conditions	Matr	íx Key	Bottle Type Key	Reporting Options
		Submitted with COC? (Y) N	NPW = Non-Potable Wa Solid = Raw Sludge, Dev		P = Plastic G = Glass	SDWA Reporting	
Received By: Date:		T 10	Number of containers	(reported as mg/l		O = Other	PWSID:
	Time:	Temp °C:	match number on COC? Y/I N	PW = Potable Water (no		Preservative Key	□Fax
Reinquished By:		Acceptable: Y / N			Vater Act Potable Sample	N = Sodium	<b>X</b> Email
resinquisited by:	Date: 2-24-22	Temp ºC:	All containers in tact? (Y/I N	Sample Type Key	SDWA Sample Types	Thiosulfate A = Ascorbic Acid	kacker@karlenv.com
	Time: 1400	Acceptable: Y / N	Tests within holding (Y) N	G = Grab	D=Distribution E=Entry Point	H = HNO <sub>3</sub> C = HCl	Return a copy of this form with
Received in Aab By:	Date: 2/24/22	Temp °C: 8,1 €		8HC = 8 Hr. Composite	R=Raw C=Check S=Special	S = H <sub>2</sub> SO <sub>4</sub> OH = NaOH O = Other	Report
LW(D)	Time: / //00	Acceptable: (Y) N	40 mL VOA vials free of headspace?	24HC = 24 Hr. Composite	M=Maximum Residence	NA = None Required	
Signing this form indicates your agreement with SWTL's Sta	ndard Terms and Conditions up	less otherwise specified in wri	ting SI E050 Pay 1.4 Effective Nevemb	nor 10, 2014			

Signang this form indicates your agreement with SWFL's Standard Terms and Conditions unless otherwise specified in writing. SLF059 Rev. 1.4 Effective November 12, 20 Shaded areas are for SWFL use only.

\* was not working

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AT(Check One): Standard 24hr 48hr 72hr Other