

Chain of Custody

– Environmental Lead –

Contact Information

Client Company: Garden State Environmental, inc.
Office Address: 555 South Broad St.
City, State, Zip: Glen Rock, NJ, 07452
Fax Number: 201-652-0612
Email Address: labreports@gseconsultants.com

Project Number: Ceadr Grove High School
Project Name: 8486
Primary Contact: Kaitlynn Pinero
Office Phone: 201-652-1119
Cell Phone:

iATL is accredited by the National Lead Laboratory Accreditation Program (NLLAP) to perform analytical testing of environmental samples for lead (Pb). The accreditation is through AIHA-LAP, LLC and several other nationally recognized state programs.

Matrix/Method:

- Paint by AAS: ASTM D3335-85a, 2009
- Wipe/Dust by AAS: SW 846: 3050B: 700B, 2010
- Air by AAS: NIOSH 7082, 1994
- Soil by AAS: EPA SW 846 (Soil)
- Water by AAS-GF: ASTM D3559-03D, US EPA 200.9
- Other Metals (Cd, Zn, Cr) by AAS
- Toxicity Characteristic Leaching Procedure (TCLP) by AAS: US EPA 1311
- Other _____

Special Instructions:

Please Analyze "B" sample if corresponding "A" sample is High

Turnaround Time

Preliminary Results Requested Date: _____
Specific date / time Verbal Email Fax

- 10 Day 5 Day 3 Day 2 Day 1 Day* 12 Hour** 6 Hour** RUSH**

* End of next business day unless otherwise specified. ** Matrix Dependent. ***Please notify the lab before shipping***

Chain of Custody

Relinquished (Name/Organization): Kaitlynn Pinero (GSE)
Received (Name / iATL): _____
Sample Login (Name / iATL): _____
Analysis(Name(s) / iATL): MS
QA/QC Review (Name / iATL): Lull 4/11/23
Archived / Released: _____ QA/QC InterLAB Use: _____

Date: 4/7/23 Time: 2:00 pm
Date: _____ Time: _____
Date: _____ Time: _____
Date: 4/11/23 Time: _____
Date: _____ Time: _____
Date: _____ Time: _____

RECEIVED

APR 11 2023

**Quality Assurance Project Plan (QAPP)
For
Drinking Water Sampling
of Lead Concentrations in School Drinking Water
Outlets
Cedar Grove High School**

Approvals

School District Representatives:

Program Manager: _____
Print Name Signature Date

Project Manager(s): _____
Print Name Signature Date

Individual School Project Officer(s) (See page iii)

Third Party Sampling Firm: Garden State Environmental, Inc.
(Note N/A if Third Party not involved) Name of Firm

Richard M. Lester _____
Print Name Signature Date

Laboratory: International Asbestos Testing Laboratories (IATL)
Name of Laboratory

Laboratory Manager: Frank Ehrenfeld _____ 4/18/23
Print Name Signature Date

Laboratory QA Officer: _____
Print Name Signature Date