

Massachusetts Department of Environmental Protection - Drinking Water Program

Perchlorate Report doc rev 12/2020

| PWS ID #: | S ID #: 1113000 City / Tow | | | | | | | Great Barrington | | | |
|--|---|--|-----------------|-----------------|---|-------------------------|----------------------------------|--|---|--|--|
| PWS Name: | Great Barrington Fire District | | | | | | PWS Class: COM M NTNC TNC | | | | |
| DEP LOCATION (LOC) ID# | DEP Location Name | | | | | Sample Information | | Date Collected | Collected By | | |
| 10000 | POE Post Green River PH 01G | | | | | ☐ (M)uttiple ☑ (S)ingle | ☐ (R)aw ☑ (F)Inished | 07/09/2024 | РМ | | |
| Routine or Special Sample | Original, Resubmitted or Confirmation Report | | | | | (1) Reason for | If Resubmitted F Resubmission | Report, list below: | Date of Original Sam | | |
| ☑ RS □ SS | ☑ Original ☐ Resubmitted ☐ Confirmation | | | | ☐ Resample ☐ Reanalysis ☐ Report Correction | | | | | | |
| SAMPLE COMMEN | ITS — (Such as, if a Mani | fold/Multiple | sample, list th | e sources | that were o | n-line during sar | nple collection.) | | | | |
| ANALYTICAL | LABORATORY INFO | MATION: | Attach copy | of subco | ntracted lab | analysis repo | t (as applicable) | | | | |
| Primary Lab MA | | | | | Eurofins Eaton Analytical South Bend Subcontracted? (Y/N) | | | | | | |
| nalysis Lab MA Cert. #: M-IN035 Analysis Lab N | | | | Name: | Eurofins Eaton Analytical South Bend | | | | | | |
| CONTAMINANT | Result | Result Qualifier | MCL | MDL | MRL | Dilution Factor | Lab Method | Date Analyzed | Primary Lab Sample ID# Analysis Lab Sample ID# | | |
| PERCHLORATE | 0.071 | | 2.0 | 0.012 | 0.050 | 1 | 331.0 | 07/23/2024 | 810-112063-1 810-112083-1 | | |
| CONDUCTIVITY umhos/cm | · | | | | | | | | 810-112083-1 810-112083-1 | | |
| il field samples an | ut tentatively quantified). alyzed with either EPA Me ithout a perchlorate spike | | | | | | ate concentrations bet | ween 0.8 µg/L and 2.0 | ug/L must be | | |
| AB ANALI GIS CO | MIMENIA | | | | | | | | | | |
| Result Qualifier an | d Description | | | | | | | | | | |
| Reanalysis and | Spike Recovery (requ | ired for re | sults betwe | en 0.8 µ | g/L and 2. | 0 μg/L or san | nples subject to pr | etreatment in meth | od 314.0) | | |
| | Result | MDL | | RL g/L) | Concer | ike itration | Spike Recovery (%) | Lab Method | Data Analysis | | |
| Compound | (µg/L) | (µg/L) | (P) | B/L) | (µg | /L) | (70) | | Date Analyzed | | |
| Perchlorate | (µg/L) | (µg/L) | (4) | g/L) | (1) | /L) | (70) | | Daw Analyzed | | |
| | (µg/L) | (hê/r) | (4) | gr.) | (ht | /L) | (72) | | Date Analyzed | | |
| Perchlorate (reanalysis) | (μg/L) | (hg/L) | (μ | y-) | (Vg | AL) | (75) | | Daw Analyza | | |
| Perchlorate (reanalysis) Perchlorate (apike) ertify under penals form and the in | (μg/L) alties of lew that I am to formation contained he at extent of my knowle | e person e erein is true | uthorized to | fill out | | thorized Sig | jnature: | oti, Project Manager 2024 | | | |
| Perchlorate (reanalysis) Perchlorate (spike) ertify under penals form and the implete to the beserved of the month in w | alties of law that I am the standard in the standard of my knowled to CMR 22.15(2), if mailin thich the results are received. | ee person a erein le true ige. | uthorized to | fill:out ind | Au report must | thorized Sig | jnature: Amende So 08/23/ | ott, Project Manager 12024 al Office no later than 1 | O days after the | | |
| Perchlorate (reanalysis) Perchlorate (spike) certify under penalis form and the in- termplete to the beaccordance with 31 and of the month in wo | alties of law that I am the standard in the standard of my knowled to CMR 22.15(2), if mailin thich the results are received. | e person a prein is true ige. g paper repo ed or no late | uthorized to | fill:out ind | Au report must | thorized Sig | jnature: Amende So 08/23/ | ott, Project Manager 12024 al Office no later than 1 | O days after the | | |