CES Certified Environmental Services, Inc.

7280 Caswell Street
North Syracuse, NY 13212
Phone 315-478-2374
Fax 315-478-2107

REPORT OF ANALYSES

Town Of Chenango
1529 NY Route 12
Binghamton, NY 13905-
Attn: Greg Burden

PROJECT NAME: Water Quality
DATE: 10/23/2026

SAMPLE NUMBER- 989577 SAMPLE ID- EP 110
DATE SAMPLED- 10/07/26
DATE RECEIVED- 10/07/26 SAMPLER- Client
TIME RECEIVED- 1255 DELIVERED BY- Jack Plewak

SAMPLE MATRIX- WA
TIME SAMPLED- 0933
RECEIVED BY- EM
TYPE SAMPLE- Grab

ANALYSIS	METHOD	ANALYSIS DATE	TIME	BY	RESULT	UNITS
Sample Receipt Temperature		10/07/26		CES	4.6	Degrees C
Conductance @ 25degC (SM24)	2510B	10/16/26		LA	1010	umhos/cm
#pH at 21 degrees C	SM224500HB	10/07/26	1655	MJ	H 7.26	std units
Orthophosphate as P (SM22)	4500-P-E	10/08/26	0845	AJ	0.64	mg/L

NYSDOH LAB ID NO. 11246 APPROVED BY: _____
(Terms and Conditions on Reverse Side)
Barbara L. DuChene
Laboratory Manager

The analytical results on this sample are representative of the sample received by the Laboratory.

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ANALYSIS	METHOD	ANALYSIS DATE	TIME	BY	RESULT	UNITS
Sample Receipt Temperature		10/07/26		CES	4.6	Degrees C
Alkalinity as CaCO3 -21	SM 2320B	10/12/26		MJ		
Alkalinity	SM 2320B	10/12/26		MJ	220	mg/L CaCO3
Alkalinity Final pH	SM 2320B	10/12/26		MJ	4.5	std units

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ANALYSIS	METHOD	SAMPLE PREP DATE	BY	ANALYSIS DATE	TIME	BY	RESULT	UNITS
Calcium Hardness	EPA 200.7	10/21/26	PAC	10/21/26		PAC	236	mg/L
Calcium, Total	EPA 200.7	10/21/26	PAC	10/21/26		PAC	94.5	mg/L

Note: Analysis performed by ELAP #10478.

NYSDOH LAB ID NO. 11246 APPROVED BY: _____
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Laboratory Manager

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CHAIN OF CUSTODY RECORD (SEE BACK FOR TERMS & CONDITIONS)

CES Certified Environmental Services, Inc.
7280 Caswell St. (Hancock Air Park)
North Syracuse, New York 13212
Phone 315-478-2374
Fax 315-478-2107

CES BATCH NO: N40882 PAGE ____ OF ____

Turn-Around Time Standard TAT is end of day, 10 working days after lab receipt. Samples received after 2 pm are considered next day business, Rush TAT subject to laboratory approval and surcharges.

☐ Standard ☐ 5 Working Days ☐ 3 Working Days
☐ 2 Working Days ☐ 1 Working Days

CLIENT NAME: Town of Chenango
ADDRESS: 1529 NY Rt. 12
Binghamton, NY 13901
CONTACT NAME: Attn: Mr. Gregory Burden

CLIENT PHONE: FAX:
PROJECT #/NAME/PO #: Water Quality

CES LOG NUMBERS (INTERNAL USE/DO NOT WRITE)	Collected Date	Collected Time	Matrix	Grab or Comp.	CLIENT ID/SAMPLE LOCATION	Number of Containers	1	2	3	4	5	6	7	8	9	10	Remarks
989577-579	10/7	9:33	PW	Grab	EP 110	3	X	X	X								

	Parameter and Method:	Sample bottle: Type	Sample bottle: Size	Preservative Code:
1	Ortho Phos, Conductivity, pH	Plastic	2 L	A
2	Alkalinity	Plastic	250 ml	A
3	Ca, Calcium Hardness	Plastic	250 ml	F
4				
5				
6				
7				
8				
9				
10				

Preservative Codes: A= Unpreserved B=H_2SO_4 C=HCl D=NaOH E=Ascorbic Acid F=HNO_3
G=$Na_2S_2O_3$ H=_____ I=_____

Samples Collected By:
Name (Print): Dustin Ferguson
Signature:
Company: TOC

Remarks:

RELINQUISHED BY:	Date	Time	RECEIVED BY:
Name: Dustin Ferguson	10/7	1126	Name: Jack Plewak
Signature:			Signature:
Name: Jack Plewak	10-7-26	1255	Name: Emily McManus
Signature:			Signature:

Samples Received in Good Condition: ☐ Yes ☐ No

Receipt Temperature: 4.6 °C

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Sample Receiving Checklist

Client Name: TIO Chenango

Batch Number: N4082

	Yes	No	If No Explain:
1. Proper Full and Complete Documentation:	☑	☐	
2. Appropriate Sample Containers:	☑	☐	
3. Adequate Sample Volume:	☑	☐	
4. Hold Time(OK):	☑	☐	
5. Proper Sample Labeling:	☑	☐	
6. Sample Temperature:	☑	☐	
7. Sample Received on Ice: (Not required for Bact)	☑	☐	
8. Preservation OK: (**Microbiology See Below**)	☑	☐	
9. Preservation Not Applicable:(ie: Solid/Sludge, Alk,BOD,TSS,TS,Cl,Fl,SO4,pH,Cond, etc):	☐		
10. CES Sample Container(s): If not sure ask client	☑	☐	

(If preservation required note Lot # associated with preservative if available.)

H_2SO_4 **WC** HNO3 **MT** 423 NaOH **WCSP** Ascorbic Acid **WC**

HCl **WCSP** $Na_2S_2O_3$ **WC** Other Not Available ☐

Microbiology: ☐ Chlorinated Source (Sodium Thiosulfate)

☐ Non-Chlorinated Source (No Sodium Thiosulfate)

Additional Comments/Client Correspondence

Sample(s) Received By: EM Sample(s) Logged In By: RB Login Reviewed By: RCD

DOCUMENT ID: SRCL072522 **Approved by: RRB** **Date Put In Place: 11/28/23**

CERTIFIED ENVIRONMENTAL SERVICES, INC.

TERMS AND CONDITIONS

1. **Services completed by Certified Environmental Services, Inc. are done so in general accordance with the environmental services and/or analytical industries recognized methods.**

2. **Certified Environmental Services, Inc. does not assume any other liabilities other than re-performance of the work if the completed services are determined to be deficient due to the negligence of Certified Environmental Services, Inc. Under no circumstances shall Certified Environmental Services, Inc., its employees, agents or sub-contractors be responsible for consequential or special damages of any kind or in any amount.**

3. **Any claim made must be done in writing within thirty (30) days of Certified Environmental Services, Inc.'s written report.**

4. **Certified Environmental Services, Inc. will not accept any liability in whole or in part as a result of data interpretation by the client.**

5. **All reports are submitted in writing to our customers only. Certified Environmental Services, Inc. will not be responsible for the accuracy of the contents of any report obtained by anyone other than our Client.**

6. **Invoices for services rendered are generated periodically as the work is completed. All invoices are due within thirty (30) days of the invoice date. Any discrepancy with an invoice must be reported to the accounts receivable department within fifteen (15) days of the invoice date. All balances over thirty (30) days will be subject to a 1-1/2% finance charge.**

7. **The terms and conditions set forth herein shall not be altered in any way unless done so in writing and signed by a Manager of Certified Environmental Services, Inc.**

Qualifiers (Updated 09.12.2018):

ND-Not Detected at reporting limit	NR-Not Reported	NA-Not Available
H-Regulatory hold time exceeded	R-Duplication outside in-house acceptance limits	
B-Analyte detected in Method Blank	A-Preservation incomplete. Additional acid added to sample prior to analysis.	
DO-Spike Diluted Out	E-Estimate	MDL-Method Detection Limit

S-Spike recovery outside acceptance limits (+ is over – is under, results may be biased high or biased low)

L-Laboratory Control Sample outside acceptance limits (+ is over – is under, results may be biased high or biased low)

#- NYS ELAP does not offer accreditation for this parameter.
**For Solid Waste analysis where there is no approved method, this is a laboratory developed method.
F - Filtration not performed within 15 minutes of sample collection as required by cited method.
E - Total Suspended Solids, Estimate. Residue on filter below method requirement of 2.5 mg.
E - Biochemical Oxygen Demand, Estimate. Depletion less than 2.0 as required by cited method.
X- Exceeds maximum contamination limit.