



**Quarterly Treatment System Site
Operation and Maintenance Report
(October – December 2020)
Perfection Plating (401037)
Watervliet, New York**

Prepared for

New York State Department of Environmental Conservation
625 Broadway
Albany, New York 12233



Prepared by

EA Engineering, P.C. and Its Affiliate
EA Science and Technology
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March 2021
Version: FINAL
EA Project No. 16025.13

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A handwritten signature in dark ink, appearing to read 'Donald Conan'.

8 March 2021

Donald Conan, P.E., P.G., Program Manager
EA Engineering, P.C.

Date

A handwritten signature in dark ink, appearing to read 'Emily Cummings'.

8 March 2021

Emily Cummings, E.I.T., Project Manager
EA Science and Technology

Date

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LIST OF ACRONYMS/ABBREVIATIONS

AWQS	Ambient Water Quality Standard
Aztech	Aztech Technologies, Inc.
COVID-19	Coronavirus Disease 2019
EA	EA Engineering, P.C. and its affiliate EA Science and Technology
E.I.T.	Engineer-in-Training
lb	Pound(s)
mg	Milligram(s) per liter
No.	Number
NYSDEC	New York State Department of Environmental Conservation
O&M	Operation and maintenance
P.E.	Professional Engineer
P.G.	Professional Geologist
WA	Work assignment

1. INTRODUCTION

The New York State Department of Environmental Conservation (NYSDEC) tasked EA Engineering, P.C. and its affiliate EA Science and Technology (EA) to perform site management activities at the Perfection Plating Site (NYSDEC Site Number [No.] 401037), which includes performance of groundwater sampling, as well as providing oversight of the operation and maintenance (O&M) of a groundwater treatment system by remedial contractor, Aztech Technologies, Inc. (Aztech). The site is located at 911 11th Street in the Town of Watervliet, Albany County, New York (Figures 1 and 2).

The Work Assignment (WA) has been conducted under the NYSDEC State Superfund Standby Contract WA No. D007624-15 and WA No. D009806-13. The elements of site O&M were completed in accordance with the applicable guidelines and requirements of NYSDEC. The field activities presented in this report were performed from October to December 2020.

1.1 OBJECTIVES

The purpose of the field activities completed at the site was to monitor site activities and verify that the treatment system was operating effectively and meeting discharge permit requirements through laboratory analytical results.

1.2 REPORT ORGANIZATION

A summary of treatment system O&M is described in Section 2. Conclusions and recommendations are discussed in Section 3.

The following are provided as appendixes:

- **Appendix A**—Treatment System Monitoring Logs
- **Appendix B**—Treatment System Laboratory Analytical Data
- **Appendix C**—Effluent Limitations and Monitoring Requirements
- **Appendix D**—Groundwater Laboratory Analytical Data
- **Appendix E**—Daily Field Reports and Entry/Exit Logs.

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2. TREATMENT SYSTEM OPERATION AND MAINTENANCE ACTIVITIES

A summary of the operating parameters during the quarter is provided in this section. Monthly system influent and effluent water samples were collected and submitted for laboratory analysis. Bi-weekly site inspections, monthly sample collection, and bi-weekly system O&M were conducted by Aztech from October to December 2020. A treatment system O&M form and inspection checklist is completed as a part of each site visit. Operational conditions of the system and any routine maintenance conducted are recorded on the inspection checklist. Treatment system operational/inspection checklists are included in Appendix A. Groundwater monitoring is also performed quarterly by EA.

2.1 SITE OPERATION

A total of 290,696 gallons of treated water was discharged to the Hudson River via the Watervliet storm sewer during this period (29 September 2020 to 31 December 2020). For the reporting period, the flow rate averaged 2.17 gallons per minute and 3,126 gallons per day.

Of the 25 O&M visits during the reporting period, the system was running upon arrival during 24 of them. The system was down upon arrival during the inspection on 1 December 2020; the system was restarted, and the flow rate adjusted. The acid barrel was topped off on each inspection day, except for the inspection on 31 December 2020. The pH probe was recalibrated during the inspections on 2 October, 9 October, and 27 October 2020, 3 November 2020, and 1 December and 4 December 2020. During the inspection on 6 November 2002, the flow meter was cleaned since it was not working upon arrival. During the inspection on 22 December 2020, the blower exhaust fan pipe was repaired.

Treatment system monitoring logs are included in Appendix A.

2.2 MONITORING ACTIVITIES

Aqueous samples (system influent and effluent) were collected on 6 October 2020, 3 November 2020, and 8 December 2020. Influent/effluent samples were collected and analyzed by Eurofins TestAmerica for inductively coupled plasma metals, cyanide, hexavalent chromium, and total suspended solids. Analytical results for the sampling events are summarized in Table 1.

2.2.1 Treatment System Influent Sampling and Analysis

System influent samples were collected on 6 October 2020, 3 November 2020, and 8 December 2020. These samples provide a basis for determining the mass of contaminants recovered from the groundwater via the interceptor trench and are also used in determining the removal efficiency of the treatment system. Influent total chromium concentrations were below the effluent limitations in the samples collected on 6 October 2020. Influent hexavalent chromium concentrations were below the effluent limitations in all influent samples collected this quarter. The results of the analyses for the sampling events are summarized in Table 1 and included in Appendix B.

2.2.2 Interceptor Trench System Evaluation

The results of the sampling and analyses were evaluated to determine the removal of contaminants from the groundwater by the interceptor trench and treatment system. During this quarter, hexavalent chromium was removed at an average rate of 0.0143 pounds (lb) per day based on the system influent and effluent samples collected on 6 October 2020, 3 November 2020, and 8 December 2020. The rate of contaminant removal of additional analytes is included in Table 2. Figure 3 compares the sample results of the downgradient well MW-EA-11S to the treatment system influent to determine the effectiveness of the interceptor trench. During this reporting period, concentrations of hexavalent chromium were non-detect in monitoring well MW-EA-11S. All results for the discharge (effluent) samples were in compliance with the effluent limitations and monitoring requirements (Appendix C).

2.2.3 Shallow Monitoring Well Sampling

As a result of hexavalent chromium detections in monitoring well MW-EA-8, located downgradient of the collection trench during the June 2013 sampling event, a quarterly groundwater sampling program was implemented to assist in monitoring the effectiveness of the collection trench. Five monitoring wells (MW-EE-6S, MW-EE-6D, MW-EA-8, MW-ESE-9, and MW-EA-7) on the Watervliet Arsenal property were decommissioned by a contractor to the Arsenal. Two of the five wells (MW-EA-7 and MW-ESE-9) were later replaced by the Watervliet Arsenal.

On 27 October 2020, groundwater samples were collected from 10 site overburden monitoring wells for total and hexavalent chromium: MW-CMT-1, MW-CMT-3, MW-EE-4S, MW-EE-5S, MW-EA-7R, MW-ESE-9R, MW-EA-10S, MW-EA-11S, MW-EA-12S, and MW-EA-13S. Samples collected from MW-EE-4S, MW-EE-5S, and MW-EA-7R, contained hexavalent chromium with concentrations above the New York State Ambient Water Quality Standard (AWQS) of 0.05 milligrams per liter (mg/L), with results of 0.057 mg/L, 19.60 mg/L, and 0.95 mg/L, respectively. The samples collected from monitoring wells MW-CMT-1 and MW-ESE-9R contained hexavalent chromium at a concentration below the New York State AWQS of 0.05 mg/L, with results of 0.0052 mg/L and 0.016 mg/L, respectively. Concentrations of hexavalent chromium in samples collected from monitoring wells MW-CMT-3, MW-EA-10S, MW-EA-12S, and MW-EA-13S were non-detect, which is similar to historical results. The concentration of hexavalent chromium in the sample collected from monitoring well MW-EA-11S was also non-detect; however, AWQS exceedances have historically been reported in samples collected from this well.

Replacement wells MW-EA-7R and MW-ESE-9R were installed approximately 5 to 10 feet from the original locations on 15 August 2017. The AWQS exceedance of hexavalent chromium reported in the sample collected from MW-EA-7R remains consistent with historical readings from abandoned well MW-EA-7; however, concentrations are higher. Hexavalent chromium was detected above the AWQS at MW-ESE-9R in 2020; concentrations of hexavalent chromium in samples collected from abandoned well MW-ESE-9 historically fluctuated.

Table 3 provides a summary of the shallow monitoring well analytical results of samples collected during the October 2020 event. Table 4 shows the historical groundwater analytical results. The results of the analyses for the samples collected during the October 2020 event are depicted in Figures 4 and 5, and included in Appendix D.

2.2.4 Bedrock Monitoring Well Sampling

Groundwater samples were not collected from the bedrock monitoring wells during the 27 October 2020 sampling event.

Table 4 shows the historical groundwater analytical results for the bedrock monitoring wells.

2.3 COVID-19 RESPONSE

As part of the COVID-19 crisis response, effective 23 March 2020, EA issued the COVID-19 Crisis Response and Working Protocol Memorandum for NYSDEC Contract Nos. D0007624 and D0009806 (EA 2020a). Additionally, a site-specific memorandum was issued outlining social distancing practices to be implemented by EA staff during field activities (EA 2020b).

Aztech also prepared a Health and Safety Plan Addendum detailing COVID-19 safe work practices issued on 10 April 2020 (Aztech 2020a) and a memorandum outlining COVID-19 safe work practices for completing field work issued on 13 April 2020 (Aztech 2020b). In addition, NYSDEC posters stating site access restrictions and outlining best practices (infection prevention) were posted onsite at the treatment building.

Copies of the site entry/exit logs and daily field report are presented in Appendix E.

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3. CONCLUSIONS AND RECOMMENDATIONS

Analytical data from the influent and effluent samples collected during the period demonstrate that the system, when operating, is effectively removing the contaminants of concern from the recovered groundwater. Concentrations of hexavalent chromium and chromium in effluent samples were lower than hexavalent chromium and chromium concentrations in influent samples for each monthly sample collected during the reporting period. Additionally, hexavalent chromium concentrations were below effluent discharge limits in the October, November, and December 2020 effluent samples. Influent concentrations of hexavalent chromium were below the effluent discharge limitations during each sampling event in the reporting period. Influent total chromium concentrations were below the effluent limitations in the samples collected on 6 October 2020.

During this reporting period, bi-weekly site visits were performed and the treatment system was up and running upon arrival for 24 of the 25 visits. The system was down upon arrival at the inspection on 1 December 2020. The system was restarted, and the flow rate adjusted. Hexavalent chromium was not detected in well MW-EA-11S downgradient of the interceptor trench.

It is recommended that treatment system O&M activities continue at the current bi-weekly rate (and as needed for repairs) to maintain system operation, up-time, and effectiveness at controlling downgradient migration of the hexavalent chromium plume.

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4. REFERENCES

Aztech Technologies, Inc. (Aztech). 2020a. *HASP Addendum – COVID-19 Safe Work Practices*. 10 April.

———. 2020b. *COVID-19 Safe Practices for Completing Field Work*. 13 April.

EA Engineering, P.C., and Its Affiliate EA Science and Technology (EA). 2020a. *COVID-19 Crisis Response and Working Protocol; NYSDEC Contracts D007624 and D009806*. 23 March.

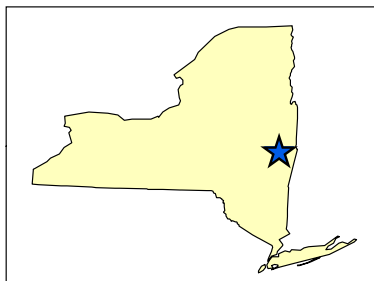
———. 2020b. *Memorandum: Former Perfection Plating Site (Site No. 401037)*. 17 April.

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Figures

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Legend
★ Site Location

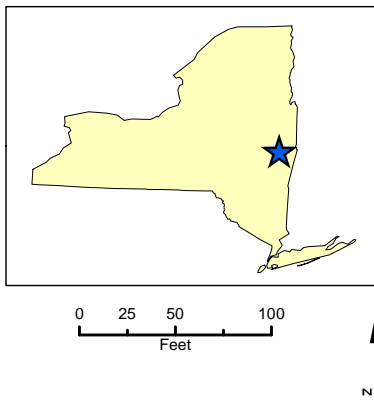
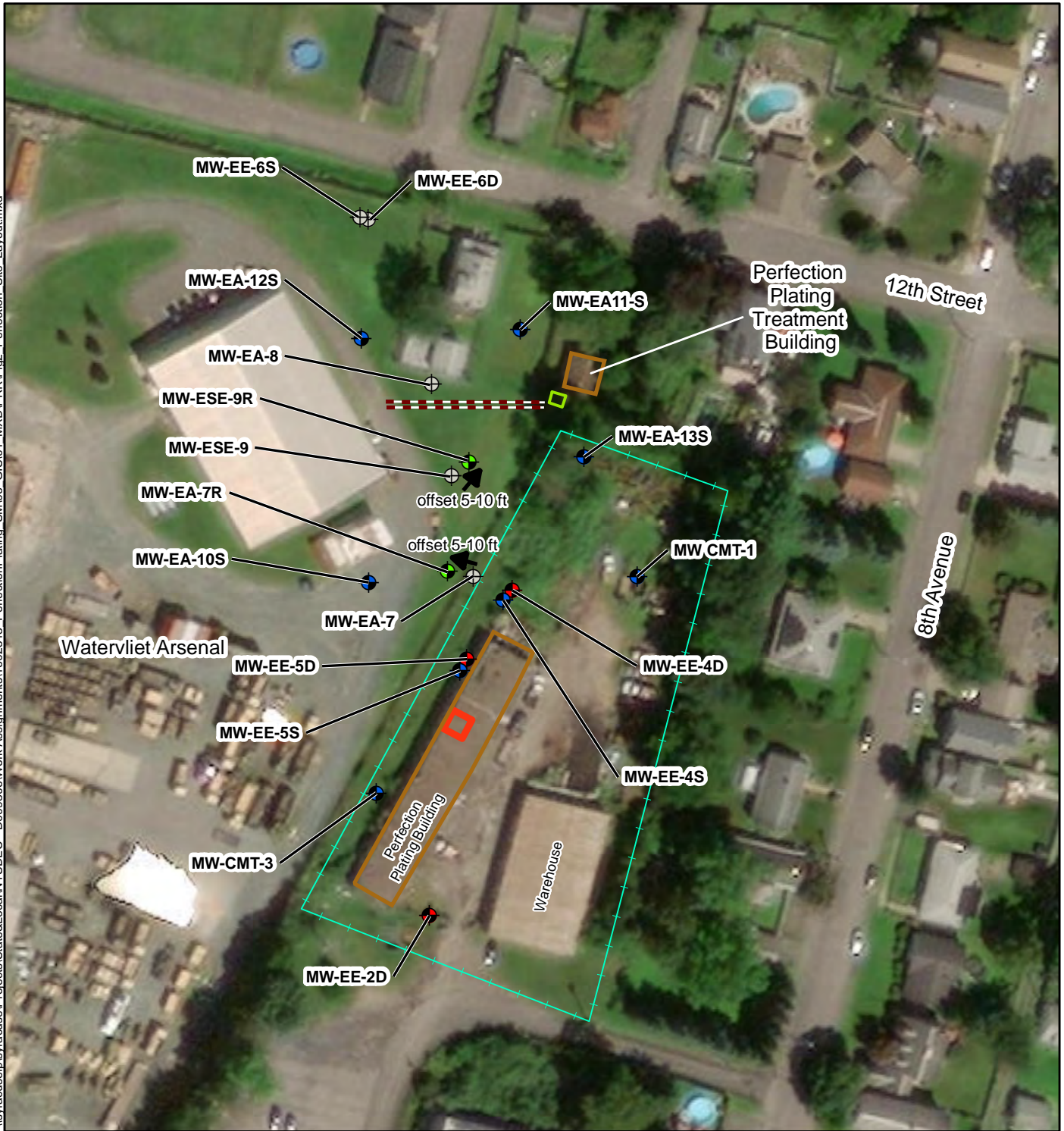
0 0.125 0.25 0.5
Miles



Figure 1
Site Location Map
Perfection Plating Site (4-01-037)
Watervliet, New York

Map Date: 8/17/2017
Projection: State Plane NAD83 New York East (feet)

\\syracuse\p\syrcuse\Projects\State&Local\NYSDEC - D009806\Work Assignments\1602513 - Perfection Plating - SM\06 GIS\01 MXD\PRR\Fig2 Perfection Site Layout.mxd



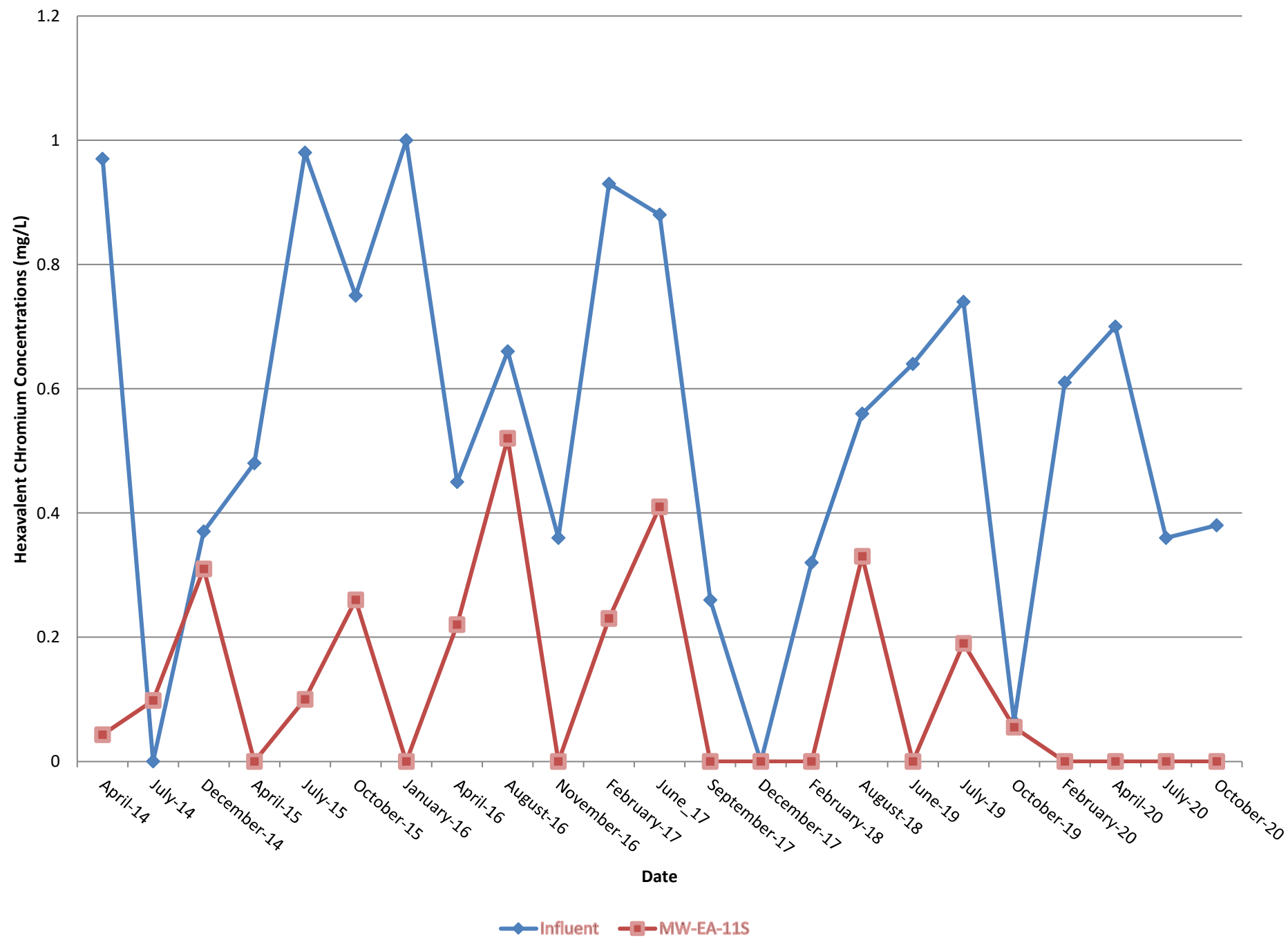
Legend

- Perfection Plating Site Boundary
- Buildings
- Former Excavation Area
- Collection Trench
- Sump Location
- Overburden Monitoring Well
- Bedrock Monitoring Well
- Replacement Monitoring Well (approximate location)
- ⊕ Abandoned Well

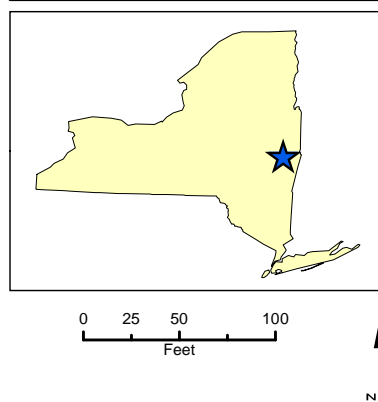
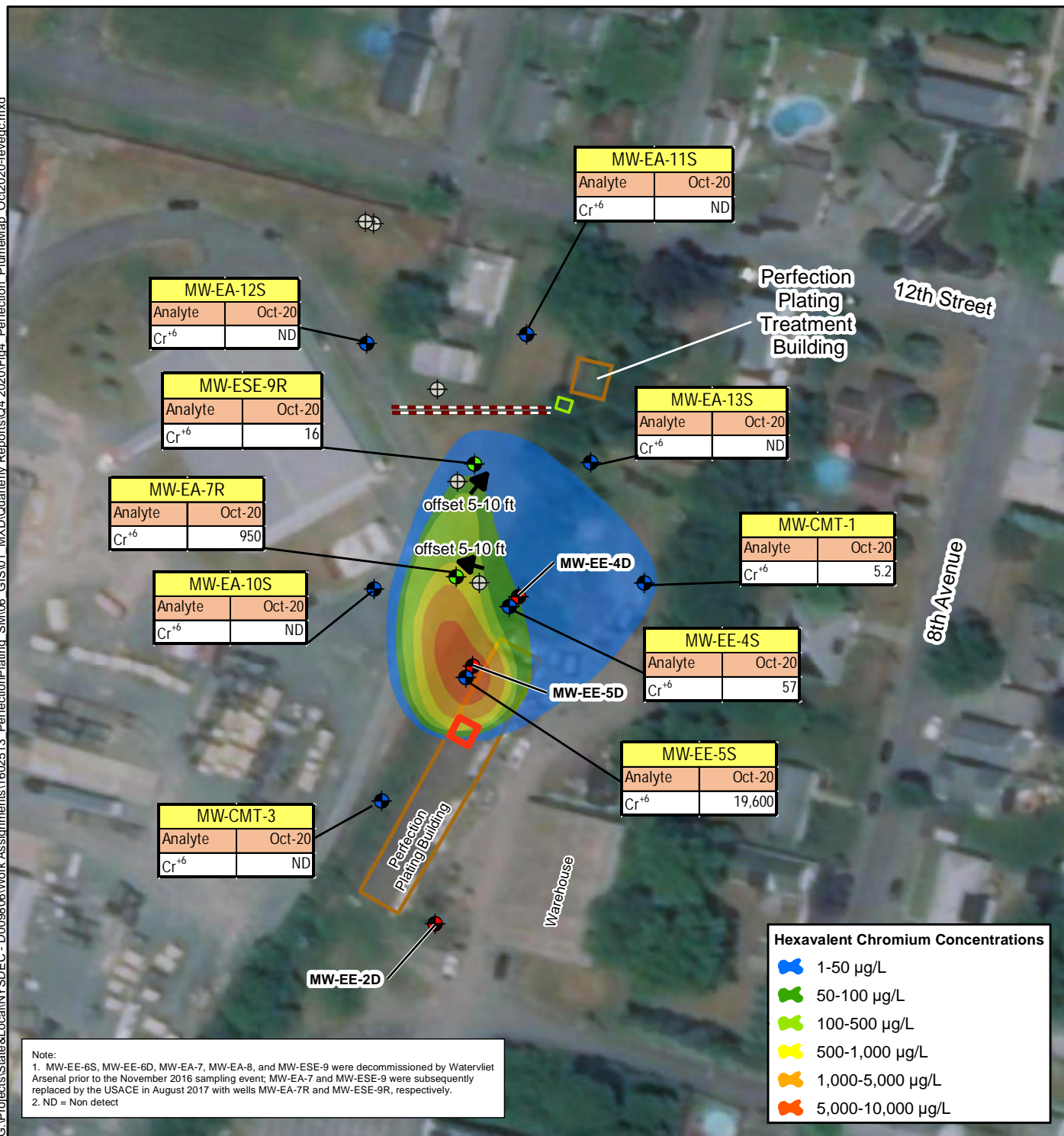
Figure 2
Site Layout
Perfection Plating Site (401037)
Watervliet, New York

Map Date: 8/13/2020
Projection: State Plane NAD83 New York East (feet)

Figure 3
Historical Influent and MW-EA-11S Hexavalent Chromium



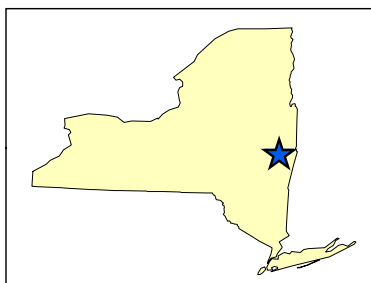
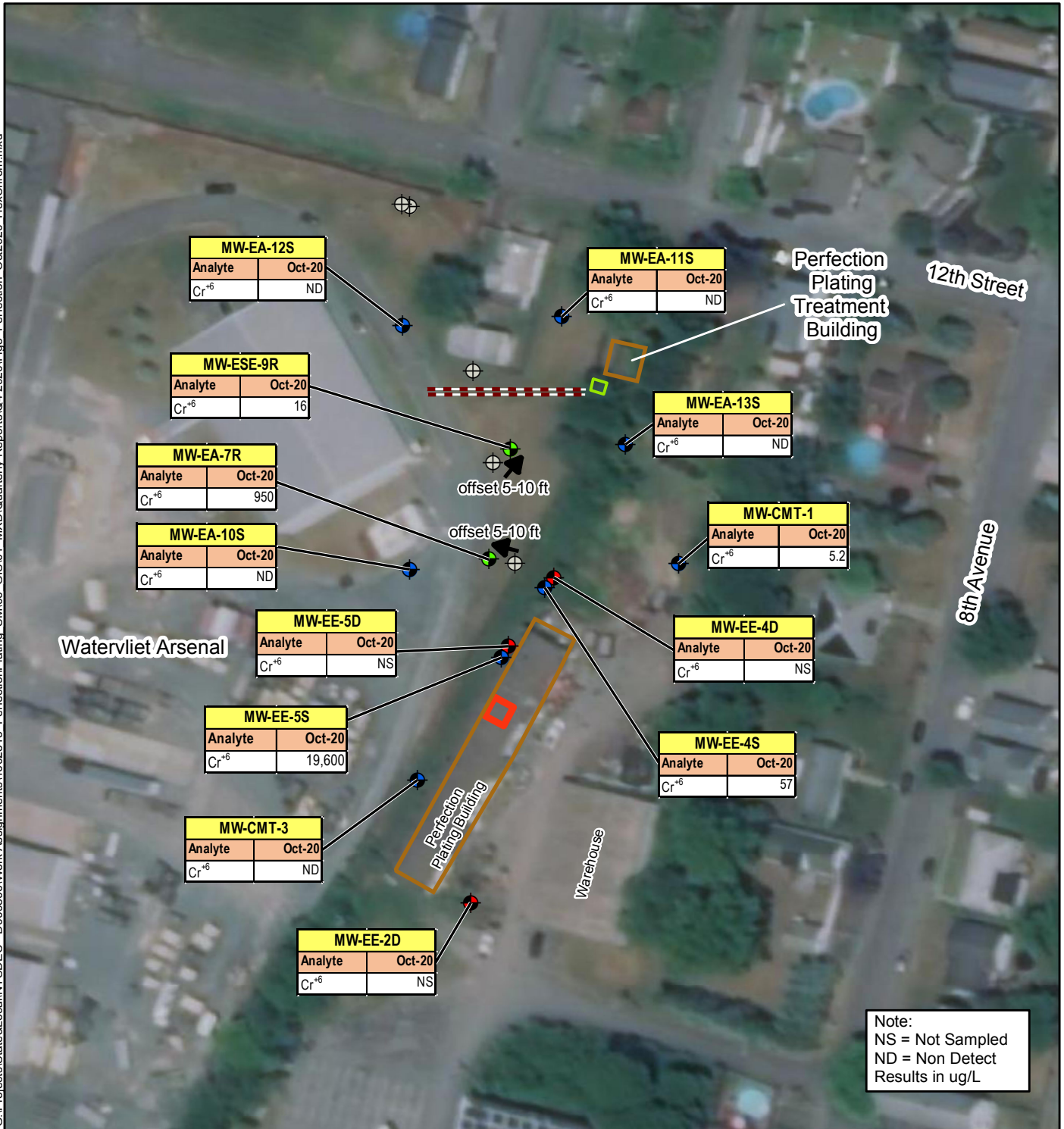
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- Legend**
- Overburden Monitoring Well
 - Bedrock Monitoring Well
 - Replacement Monitoring Well (approximate location)
 - Abandoned Well
 - Collection Trench
 - Sump Location
 - Former Excavation Area
 - Buildings

Figure 4
 Hexavalent Chromium October 2020
 Overburden Isopleth Map
 Perfection Plating Site (401037)
 Watervliet, New York

Map Date: 1/18/2021
 Projection: State Plane NAD83 New York East (feet)



Legend

- Overburden Monitoring Well
- Bedrock Monitoring Well
- Replacement Monitoring Well (approximate location)
- Abandoned Well
- Buildings
- Collection Trench
- Sump Location
- Former Excavation Area

0 25 50 100
Feet

N

Figure 5
Hexavalent Chromium Concentrations
October 2020
 Perfection Plating Site (401037)
 Watervliet, New York

Map Date: 1/22/2021
 Projection: State Plane NAD83 New York East (feet)



Tables

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Table 1 Treatment System Analytical Results (October 2020)

Parameters List	System Influent	System Effluent	Effluent Limitations and Monitoring Requirements
INDUCTIVELY COUPLED PLASMA METALS E200.7 (mg/L)			
Arsenic	<0.0056	<0.0056	0.15
Cadmium	<0.00050	<0.00050	0.03
Chromium	0.45	0.16	0.5
Copper	<0.0016	<0.0016	0.5
Iron	0.066	<0.019	4.0
Lead	<0.0030	<0.0030	0.4
Nickel	0.0088 J	0.0057 J	1.3
Selenium	<0.0087	<0.0087	0.07
Zinc	0.0078 J	0.0022 J	0.4
CYANIDE AMENABLE TO CHLORINATION SM 4500CN_G (mg/L)			
Cyanide Non-Amenable	<0.0050	0.0073 J	1.1
HEXAVALENT CHROMIUM SM3500-CR D (mg/L)			
Hexavalent Chromium	0.38	<0.0050	2.7
TOTAL SUSPENDED SOLIDS E160.2 (mg/L)			
Total suspended solids	<4.0	<4.0	50
NOTES: MDL = Method detection limit mg/L = Milligram(s) per liter RL = Reporting limit J = Result is less than RL but greater than or equal to the MDL and the concentration is an approximate value All analytical data results provided by Eurofins TestAmerica.			

Table 1 Treatment System Analytical Results (November 2020)

Parameters List	System Influent	System Effluent	Effluent Limitations and Monitoring Requirements
INDUCTIVELY COUPLED PLASMA METALS E200.7 (mg/L)			
Arsenic	<0.0056	<0.0056	0.15
Cadmium	<0.00050	<0.00050	0.03
Chromium	0.63	0.13	0.5
Copper	0.0030 J	<0.0016	0.5
Iron	0.034 J	<0.019	4.0
Lead	<0.0030	<0.0030	0.4
Nickel	0.0098 J	0.0072 J	1.3
Selenium	<0.0087	<0.0087	0.07
Zinc	0.0061 J	0.0034 J	0.4
CYANIDE AMENABLE TO CHLORINATION SM 4500CN_G (mg/L)			
Cyanide Non-Amenable	0.0130	<0.0050	1.1
HEXAVALENT CHROMIUM SM3500-CR D (mg/L)			
Hexavalent Chromium	0.56	<0.0050	2.7
TOTAL SUSPENDED SOLIDS E160.2 (mg/L)			
Total suspended solids	4.0	<4.0	50
NOTES: MDL = Method detection limit mg/L = Milligram(s) per liter RL = Reporting limit J = Result is less than RL but greater than or equal to the MDL and the concentration is an approximate value All analytical data results provided by Eurofins TestAmerica.			

Table 1 Treatment System Analytical Results (December 2020)

Parameters List	System Influent	System Effluent	Effluent Limitations and Monitoring Requirements
INDUCTIVELY COUPLED PLASMA METALS E200.7 (mg/L)			
Arsenic	<0.0056	<0.0056	0.15
Cadmium	<0.00050	<0.00050	0.03
Chromium	0.73	0.15	0.5
Copper	0.0022 J	<0.0016	0.5
Iron	0.027 J	<0.019	4.0
Lead	<0.0030	<0.0030	0.4
Nickel	0.0069 J	0.0069 J	1.3
Selenium	<0.0087	<0.0087	0.07
Zinc	0.0050 J	0.0034 J	0.4
CYANIDE AMENABLE TO CHLORINATION SM 4500CN_G (mg/L)			
Cyanide Non-Amenable	0.019	<0.0050	1.1
HEXAVALENT CHROMIUM SM3500-CR D (mg/L)			
Hexavalent Chromium	0.71	<0.0050	2.7
TOTAL SUSPENDED SOLIDS E160.2 (mg/L)			
Total suspended solids	<4.0	<4.0	50
NOTES: MDL = Method detection limit mg/L = Milligram(s) per liter RL = Reporting limit J = Result is less than RL but greater than or equal to the MDL and the concentration is an approximate value All analytical data results provided by Eurofins TestAmerica.			

Table 2 Daily Mass Removal Results (October 2020)

Parameter	Discharge Limitations	Influent		Effluent		Amount Removed
	Daily Max ^(a)	October 2020 ^(b)				
	mg/L	lb/day	mg/L	lb/day	mg/L	lb/day
INDUCTIVELY COUPLED PLASMA METALS E200.7						
Arsenic	0.15	ND	<0.0056	ND	<0.0056	ND
Cadmium	0.03	ND	<0.00050	ND	<0.00050	ND
Chromium	0.5	0.0117	0.450	0.0042	0.160	0.0000
Copper	0.5	ND	<0.0016	ND	<0.0016	ND
Iron	4.0	0.0017	0.066	ND	<0.019	0.0017
Lead	0.4	ND	<0.0030	ND	<0.0030	ND
Nickel	1.3	0.000229	0.0088	0.000149	0.0057	0.000081
Selenium	0.07	ND	<0.0087	ND	<0.0087	ND
Zinc	0.4	0.00020	0.0078	0.00006	0.0022	0.000000
CYANIDE AMENABLE TO CHLORINATION SM 4500CN_G						
Cyanide Non-Amenable	1.1	ND	<0.0050	0.0002	0.0073	0.00019
HEXAVALENT CHROMIUM SM3500-CR D						
Hexavalent Chromium	2.7	0.0099	0.38	ND	<0.0050	0.00991
TOTAL SUSPENDED SOLIDS E160.2						
Total suspended solids	50.0	ND	<4.0	ND	<4.0	ND
				GPD		
Total Flow				3126		
				MGD		
				0.0031		
(a) Daily Maximum of Effluent Limitations and Monitoring Requirements.						
(b) Average system flowrate during the period (October - December 2020) was 3126 gallons per day.						
NOTES:						
lb/day = Pound(s) per day		GPD = Gallon(s) per day				
mg/L = Milligram(s) per liter		MGD = Million(s) of gallon(s) per day				
ND = Not detected						

Table 2 Daily Mass Removal Results (November 2020)

Parameter	Discharge Limitations	Influent		Effluent		Amount Removed
	Daily Max ^(a)	November 2020 ^(b)				
	mg/L	lb/day	mg/L	lb/day	mg/L	lb/day
INDUCTIVELY COUPLED PLASMA METALS E200.7						
Arsenic	0.15	ND	<0.0056	ND	<0.0056	ND
Cadmium	0.03	ND	<0.00050	ND	<0.00050	ND
Chromium	0.5	0.0164	0.63	0.0034	0.13	0.0130
Copper	0.5	0.00008	0.0030	ND	<0.0016	0.00008
Iron	4.0	0.00089	0.0340	ND	<0.019	0.00089
Lead	0.4	ND	<0.0030	ND	<0.0030	ND
Nickel	1.3	0.00026	0.0098	0.00019	0.0072	0.000068
Selenium	0.07	ND	<0.0087	ND	<0.0087	ND
Zinc	0.4	0.00016	0.0061	0.00009	0.0034	0.00007
CYANIDE AMENABLE TO CHLORINATION SM 4500CN_G						
Cyanide Non-Amenable	1.1	0.0003	0.013	ND	<0.005	0.0003
HEXAVALENT CHROMIUM SM3500-CR D						
Hexavalent Chromium	2.7	0.0146	0.56	ND	<0.005	0.0146
TOTAL SUSPENDED SOLIDS E160.2						
Total suspended solids	50.0	0.1043	4.0	ND	<4.0	0.1043
				GPD		
Total Flow				3126		
				MGD		
				0.0031		
(a) Daily Maximum of Effluent Limitations and Monitoring Requirements.						
(b) Average system flowrate during the period (October - December 2020) was 3126 gallons per day.						
NOTES:						
lb/day = Pound(s) per day		GPD = Gallon(s) per day				
mg/L = Milligram(s) per liter		MGD = Million(s) of gallon(s) per day				
ND = Not detected						

Table 2 Daily Mass Removal Results (December 2020)

Parameter	Discharge Limitations	Influent		Effluent		Amount Removed
	Daily Max ^(a)	December 2020 ^(b)				
	mg/L	lb/day	mg/L	lb/day	mg/L	lb/day
INDUCTIVELY COUPLED PLASMA METALS E200.7						
Arsenic	0.15	ND	<0.0056	ND	<0.0056	ND
Cadmium	0.03	ND	<0.00050	ND	<0.00050	ND
Chromium	0.5	0.0190	0.73	0.0039	0.15	0.0151
Copper	0.5	0.00006	0.0022	ND	<0.0016	0.00006
Iron	4.0	0.00070	0.027	ND	<0.019	0.0007
Lead	0.4	ND	<0.0030	ND	<0.0030	ND
Nickel	1.3	0.000180	0.0069	0.000180	0.0069	0.000000
Selenium	0.07	ND	<0.0087	ND	<0.0087	ND
Zinc	0.4	0.00013	0.0050	0.00009	0.0034	0.00004
CYANIDE AMENABLE TO CHLORINATION SM 4500CN_G						
Cyanide Non-Amenable	1.1	0.0005	0.019	ND	<0.0050	0.000495
HEXAVALENT CHROMIUM SM3500-CR D						
Hexavalent Chromium	2.7	0.0185	0.71	ND	<0.0050	0.018509
TOTAL SUSPENDED SOLIDS E160.2						
Total suspended solids	50.0	ND	<4.0	ND	<4.0	ND
				GPD		
Total Flow				3126		
				MGD		
				0.0031		
(a) Daily Maximum of Effluent Limitations and Monitoring Requirements.						
(b) Average system flowrate during the period (October - December 2020) was 3126 gallons per day.						
NOTES:						
lb/day = Pound(s) per day		GPD = Gallon(s) per day				
mg/L = Milligram(s) per liter		MGD = Million(s) of gallon(s) per day				
ND = Not detected						

Table 3 Hexavalent Chromium Groundwater Analytical Results (October 2020)

Parameters List	MW-CMT-1	MW-CMT-3	MW-EE-4S	MW-EE-4D	MW-EE-5S	MW-EE-5D	MW-EA-7R*	NYSDEC AWQS Values (mg/L)
Chromium (Total, mg/L)	ND	0.0043	0.054	NS	10.10	NS	1.10	0.05
Cr (Hexavalent, mg/L)	0.0052 J	ND	0.057	NS	19.60	NS	0.95	0.05
Parameters List	MW-ESE-9R*	MW-EA-10S	MW-EA-11S	MW-EA-12S	MW-EA-13S	MW-EE-2D	DUP-1120	NYSDEC AWQS Values (mg/L)
Chromium (Total, mg/L)	0.290	0.026	0.150	0.0056	0.0021 J	NS	0.0027 J	0.05
Cr (Hexavalent, mg/L)	0.016	ND	ND	ND	ND	NS	ND	0.05
<p>*= MW-EA-7R and MW-ESE-9R were installed 08/15/2017; they replaced MW-EA-7 and MW-ESE-9, two wells abandoned by the Watervliet contractor. (a) Duplicate Sample collected from MW-EA-13S (b) MS/MSD collected at MW-EA-12S. NOTES: AWQS = Ambient Water Quality Standard NYSDEC = New State Department of Environmental Conservation mg/L = Milligram(s) per liter ND = The analyte was analyzed for, but was not detected above the sample reporting limit. J = Result is less than the reporting limit but greater or equal to the method detection limit, and the concentration is an approximate value. All analytical data results provided by Eurofins TestAmerica. Bold values indicate that the analyte was detected above the NYSDEC AWQS.</p>								

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Table 4 Historical Hexavalent Chromium Groundwater Analytical Results

Date	Overburden Monitoring Wells												Bedrock Monitoring Wells				NYSDEC AWQS Values
	MW-EE-4S	MW-EE-5S	MW-EE-6S	MW-EA-7R(c)	MW-EA-8	MW-CMT-1	MW-ESE-9R(c)	MW-CMT-3	MW-EA-10S	MW-EA-11S	MW-EA-12S	MW-EA-13S	MW-EE-4D	MW-EE-5D	MW-EE-6D	MW-EE-2D	
21-May-03	ND	40.8	ND	0.975	0.099	-	-	-	-	-	-	-	0.008	ND	ND	-	0.05
21-Aug-03	0.06	33.7	0.046	1.08	ND	-	-	-	-	-	-	-	0.129	ND	0.023	-	0.05
4-Dec-03	0.041	48.9	0.018	0.744	0.041	-	-	-	-	-	-	-	ND	0.004	ND	-	0.05
24-Feb-03	0.018	33.4	ND	0.857	ND	-	-	-	-	-	-	-	ND	ND	ND	-	0.05
12-May-04	0.049	37.4	ND	0.881	0.049	-	-	-	-	-	-	-	0.013	ND	ND	-	0.05
2-Sep-04	0.735	32.2	ND	1.04	ND	-	-	-	-	-	-	-	0.016	ND	0.075	-	0.05
2-Dec-04	0.06	11.8	ND	0.348	ND	-	-	-	-	-	-	-	0.007	0.034	ND	-	0.05
3-Feb-05	0.083	61.2	ND	0.83	ND	-	-	-	-	-	-	-	ND	0.021	ND	-	0.05
18-May-05	0.029	35	ND	0.63	ND	-	-	-	-	-	-	-	ND	0.031	ND	-	0.05
3-Aug-05	0.041	28.7	ND	0.62	ND	-	-	-	-	-	-	-	ND	0.037	ND	-	0.05
29-Nov-05	0.052	33.6	ND	0.24	ND	-	-	-	-	-	-	-	ND	ND	ND	-	0.05
9-Feb-06	0.11	24.9	ND	0.35	ND	-	-	-	-	-	-	-	ND	ND	ND	-	0.05
8-Apr-08	0.086	15	ND	0.34	0.049	ND	0.51 ^(a)	ND	-	-	-	-	ND	ND	ND	ND	0.05
21-Jul-09	0.049	19	ND	0.52	ND	ND	1.3	ND	-	-	-	-	ND	ND	ND	ND	0.05
12-Oct-10	0.062	17	ND	1	ND	ND	0.4	ND	-	-	-	-	ND	ND	ND	ND	0.05
1-Mar-12	0.039	17	ND	0.29	ND	ND	3.2	ND	-	-	-	-	ND	ND	ND	ND	0.05
11/12-Jun-13	0.042	13	ND	0.34	0.15	ND	3.7	ND	-	-	-	-	ND	ND	ND	ND	0.05
30-Aug-13	-	-	-	-	3.2 ^(b)	-	-	-	-	-	-	-	-	-	-	-	0.05
29-Oct-13	0.029	16	ND	0.37	ND	ND	-	-	-	-	-	-	-	-	-	-	0.05
15-Jan-14	0.045	13	ND	0.14	ND	ND	2.7	ND	-	-	-	-	-	-	-	-	0.05
29-Apr-14	0.061	24	ND	0.45	ND	ND	2.8	ND	ND	0.043	ND	ND	-	-	-	-	0.05
29-Jul-14	0.045	15	ND	0.43	ND	ND	0.48	ND	ND	0.098	ND	ND	-	-	-	-	0.05
2-Dec-14	0.045	16	ND	0.44	ND	ND	2.6	ND	ND	0.31	ND	ND	ND	ND	ND	ND	0.05
7-Apr-15	0.026	12	ND	0.22	ND	ND	ND	ND	ND	ND	ND	ND	-	-	-	-	0.05
7-Jul-15	0.031	*	ND	0.41	**	ND	1.7	ND	ND	0.1	ND	ND	-	-	-	-	0.05
8-Oct-15	0.052	25	ND	0.42	ND	ND	3.1	ND	ND	0.26	ND	ND	-	-	-	-	0.05
27-Jan-16	0.036	12	ND	ND	ND	ND	2.9	ND	ND	ND	ND	ND	ND	ND	ND	ND	0.05
18-Apr-16	0.035	12	ND	0.33	ND	ND	2.4	ND	ND	0.22	ND	ND	-	-	-	-	0.05
16-Aug-16	ND	12	ND	0.33	ND	ND	2.6	ND	ND	0.52	ND	ND	-	-	-	-	0.05
9-Nov-16	0.043	14	NS	NS	NS	ND	NS	ND	ND	ND	ND	ND	-	-	-	-	0.05
27-Feb-17	0.028	11	NS	NS	NS	ND	NS	ND	ND	0.23	ND	ND	ND	ND	NS	ND	0.05
26-Jun-17	0.045	8.3	NS	NS	NS	ND	NS	ND	ND	0.41	ND	ND	-	-	-	-	0.05
13-Sep-17	0.034	8.2	NS	1.8	NS	ND	ND	ND	ND	ND	ND	ND	-	-	-	-	0.05
19-Dec-17	0.033	9.3	NS	1.3	NS	ND	0.21	ND	ND	ND	ND	ND	-	-	-	-	0.05
12-Feb-18	0.034	**	NS	1.4	NS	ND	ND	ND	ND	ND	ND	ND	ND	ND	NS	ND	0.05
16-Aug-18	0.053	22	NS	1.8	NS	ND	0.22	ND	ND	0.33	ND	ND	-	-	-	-	0.05
4-Jun-19	ND	8.8	NS	0.75	NS	ND	0.14	ND	ND	ND	ND	ND	ND	ND	NS	ND	0.05
15-Jul-19	0.025	4.7	NS	0.78	NS	ND	ND	ND	ND	0.19	ND	ND	NS	NS	NS	NS	0.05
1-Oct-19	0.034	8.5	NS	0.89	NS	ND	ND	ND	ND	ND	ND	ND	NS	NS	NS	NS	0.05
19-Feb-20	0.031	9.3	NS	0.92	NS	ND	ND	ND	ND	ND	ND	ND	NS	NS	NS	NS	0.05
23-Apr-20	0.027	7.4	NS	0.75	NS	ND	ND	ND	ND	ND	ND	ND	NS	NS	NS	NS	0.05
13-Jul-20	0.028	6.7	NS	0.79	NS	ND	0.092	ND	ND	ND	ND	ND	0.011	0.011	NS	0.018	0.05
27-Oct-20	0.057	19.6	NS	0.95	NS	0.0052	0.016	ND	ND	ND	ND	ND	NS	NS	NS	NS	0.05
All samples reported in (mg/L). * = It is believed that MW-EE-5D was inadvertently sampled instead of MW-EE-5S. ** = Sample container was broken during shipment and no results are available. ***= Sample taken 28-Feb-17 (a) Sample was collected on 14 January 2009. (b) Grab sample collected to confirm June 2013 results. Five gallons of water was removed from the monitoring well prior to collecting the sample. Sample was analyzed by Test America Laboratories. (c) MW-EA-7R and MW-ESE-9R were installed 08/15/2017 to replace two (2) of the five (5) wells decommissioned by the contractor working for the Watervliet property. The decommissioned wells included MW-EE-6S, MW-EE-6D, MW-EA-7, MW-EA-8, and MW-ESE-9. AWQS = Ambient Water Quality Standard (mg/L) ND = Non detect NS = Not sampled NYSDEC = New State Department of Environmental Conservation Bold values indicate that the analyte was detected greater than the NYSDEC AWQS.																	

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Appendix A

Treatment System Monitoring Logs

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Month Sept, Oct 'Year 20

PERFECTION PLATING Treatment System Operational / Inspection Checklist

Item Description	Required Frequency	Unit	Date of Inspection				
			9/22/20	9/25/20	9/29/20	10/2/20	10/6/20
Effluent sample collected	Weekly	Yes / No	NO	NO	NO	NO	YES
Influent sample collected	Monthly	Yes / No	NO	NO	NO	NO	YES
Flow Rate (gallons per minute)	Weekly	gpm	2.3	3.07	1.58	1.40	1.76
Total Volume Treated (gallons)	Weekly	gal	1311.7	1371.20	1421.72	1463.70	1532.17
Effluent pH	Weekly	SI	4.8	6.87	6.80	6.89	4.92
Specific conductivity reading (milliseconds/centimeter)	Weekly	ms/cm	—	—	—	—	—
Performed required equipment maintenance (Note below)	As per Manf.	Yes / No	YES	YES	YES	YES	YES
Note spare parts or supplies needed	Weekly	Yes / No	YES	YES	YES	YES	YES
Second ion exchange drum effluent sample collected	Monthly	Yes / No	NO	NO	NO	NO	NO
Empty Sump pump	Weekly	Yes / No	NO	NO	NO	NO	NO
Replace ion removal filter fabric and filter sludge	As needed	Yes / No	NO	NO	NO	NO	NO
Replace ion exchange vessels/ make valve adjustments	As needed	Yes / No	NO	NO	NO	NO	NO
Inspected catch basin for sediment	As needed	Yes / No	YES OK	YES OK	YES OK	YES OK	YES OK
Inspected collection sump and record condition	Monthly	Yes / No	YES OK	YES OK	YES OK	YES OK	YES OK
Tested eye wash station	Semi-annual	Yes / No	NO	NO	NO	NO	NO
Tested fire extinguisher	Yearly	Yes / No	NO	NO	NO	NO	NO
Replenished first aid kit supplies	After use	Yes / No	NO	NO	NO	NO	NO
Tested the backflow preventer	Yearly	Yes / No	NO	NO	NO	NO	NO
Reported backflow preventer test results to Latham Water district	Yearly	Yes / No	NO	NO	NO	NO	NO

Comments: Note Treatment System Equipment and Building Conditions.

Date 9/22/20 System Running on Arrival, take System Readings. Top off Acid Barrel and Perform System Maint. System Running ok on departure.

Date 9/25/20 System Running on Arrival, take System Readings. Top off Acid Barrel and Perform System Maint. System Running ok on departure, well level low!!!

Date 9/29/20 System down, High PH Effluent. Restart and Calibrate. Water level in well low so I have Influent flow lower to keep system running. Top off Acid Barrel and Perform System Maint System Running ok on departure.

Date 10/2/20 System Running on Arrival, take System Readings, Top off Acid Barrel and Recal Probes. System Running ok on departure.

Date 10/6/20 System Running on Arrival, take System Readings. Top off Acid Barrel and Perform System Maint. Take System Samples, System Running ok on departure

Month Oct

PERFECTION PLATING

'Year 20

Treatment System Operational / Inspection Checklist

Item Description	Required Frequency	Unit	Date of Inspection				
			10/9/20	10/14/20	10/16/20	10/21/20	10/23/20
Effluent sample collected	Weekly	Yes / No	NO	NO	NO	NO	NO
Influent sample collected	Monthly	Yes / No	NO	NO	NO	NO	NO
Flow Rate (gallons per minute)	Weekly	gpm	1.70	2.23	2.16	2.40	2.24
Total Volume Treated (gallons)	Weekly	gal	159453	166006	171535	183926	189771
Effluent pH	Weekly	SI	6.87	6.89	6.71	6.84	6.73
Specific conductivity reading (milliseconds/centimeter)	Weekly	ms/cm	—	—	—	—	—
Performed required equipment maintenance (Note below)	As per Manf.	Yes / No	Yes	Yes	Yes	Yes	Yes
Note spare parts or supplies needed	Weekly	Yes / No	Yes	Yes	Yes	Yes	Yes
Second ion exchange drum effluent sample collected	Monthly	Yes / No	NO	NO	NO	NO	NO
Empty Sump pump	Weekly	Yes / No	NO	NO	NO	NO	NO
Replace ion removal filter fabric and filter sludge	As needed	Yes / No	NO	NO	NO	NO	NO
Replace ion exchange vessels/ make valve adjustments	As needed	Yes / No	NO	NO	NO	NO	NO
Inspected catch basin for sediment	As needed	Yes / No	Yes/ok	Yes/ok	Yes/ok	Yes/ok	Yes/ok
Inspected collection sump and record condition	Monthly	Yes / No	Yes/ok	Yes/ok	Yes/ok	Yes/ok	Yes/ok
Tested eye wash station	Semi-annual	Yes / No	NO	NO	NO	NO	NO
Tested fire extinguisher	Yearly	Yes / No	NO	NO	NO	NO	NO
Replenished first aid kit supplies	After use	Yes / No	NO	NO	NO	NO	NO
Tested the backflow preventer	Yearly	Yes / No	NO	NO	NO	NO	NO
Reported backflow preventer test results to Latham Water district	Yearly	Yes / No	NO	NO	NO	NO	NO

Comments: Note Treatment System Equipment and Building Conditions.

Date 10/9/20 System Running on Arrival, take System Readings. Top off Acid Barrel and Recalibrate Probes. Performed System Maint, System Running ok on departure.

Date 10/14/20 System Running on Arrival, take System Readings. Top off Acid Barrel and Perform System Maint, System Running ok on departure.

Date 10/16/20 System Running on Arrival take System Readings. Top off Acid Barrel and Perform System Maint, System Running ok on departure.

Date 10/21/20 System Running on Arrival, take System Reading. Top off Acid Barrel and Perform System Maint. System Running ok on departure.

Date 10/23/20 System Running on Arrival, take System Readings. Top off Acid Barrel and Perform System Maint. System Running ok on departure.

Month Oct/Nov **PERFECTION PLATING** 'Year 20

Treatment System Operational / Inspection Checklist

Item Description	Required		Date of Inspection				
	Frequency	Unit	10/27/20	10/30/20	11/3/20	11/6/20	11/10/20
Effluent sample collected	Weekly	Yes / No	NO	NO	YES	NO	NO
Influent sample collected	Monthly	Yes / No	NO	NO	YES	NO	NO
Flow Rate (gallons per minute)	Weekly	gpm	2.24	2.25	2.82	3.01	2.70
Total Volume Treated (gallons)	Weekly	gal	199268	207021	218830	227441	245133
Effluent pH	Weekly	SI	6.70	6.90	6.76	6.70	6.67
Specific conductivity reading (milliseconds/centimeter)	Weekly	ms/cm	—	—	—	—	—
Performed required equipment maintenance (Note below)	As per Manf.	Yes / No	Yes	Yes	Yes	Yes	Yes
Note spare parts or supplies needed	Weekly	Yes / No	Yes	Yes	Yes	Yes	Yes
Second ion exchange drum effluent sample collected	Monthly	Yes / No	NO	NO	NO	NO	NO
Empty Sump pump	Weekly	Yes / No	NO	NO	NO	NO	NO
Replace ion removal filter fabric and filter sludge	As needed	Yes / No	NO	NO	NO	NO	NO
Replace ion exchange vessels/ make valve adjustments	As needed	Yes / No	NO	YES	NO	NO	NO
Inspected catch basin for sediment	As needed	Yes / No	NO	NO	NO	NO	NO
Inspected collection sump and record condition	As needed	Yes / No	Yes! OK	Yes! OK	Yes! OK	Yes! OK	Yes! OK
Tested eye wash station	Monthly	Yes / No	Yes! OK	Yes! OK	Yes! OK	Yes! OK	Yes! OK
Tested fire extinguisher	Semi-annual	Yes / No	NO	NO	NO	NO	NO
Replenished first aid kit supplies	Yearly	Yes / No	NO	NO	NO	NO	NO
Tested the backflow preventer	After use	Yes / No	NO	NO	NO	NO	NO
Reported backflow preventer test results to Latham Water district	Yearly	Yes / No	NO	NO	NO	NO	NO

Comments: Note Treatment System Equipment and Building Conditions.

Date 10/27/20 System Running on Arrival take System Readings. Top off Acid Barrel and Calibrate PH Probes. Perform System Maint. System Running OK on departure.

Date 10/30/20 System Running on Arrival take System Readings. Top off Acid Barrel and Perform System Maint.

Date 11/3/20 System Running on Arrival take System Readings. Top off Acid Barrel and Calibrate PH Probes and take System Samples

Date 11/6/20 System Running on Arrival take System Readings. Top off Acid Barrel and Perform System Maint. System Running OK on departure. Cleaned flow meter due to not working on Arrival

Date 11/10/20 System Running on Arrival take System Readings. Top off Acid Barrel and Perform System Maint. System Running OK on departure.

PERFECTION PLATING			Treatment System Operational / Inspection Checklist					
Month	Nov/Dec	Year	20					
Item Description	Required Frequency	Unit	Date of Inspection					
			11/13/20	11/17/20	11/20/20	11/25/20	12/1/20	
Effluent sample collected	Weekly	Yes / No	NO	NO	NO	NO	NO	
Influent sample collected	Monthly	Yes / No	NO	NO	NO	NO	NO	
Flow Rate (gallons per minute)	Weekly	gpm	2.81	3.11	3.14	2.26	3.03	
Total Volume Treated (gallons)	Weekly	gal	2526734	272119	285097	304588	320941	
Effluent pH	Weekly	SI	6.86	6.80	6.78	6.78	6.89	
Specific conductivity reading (milliseconds/centimeter)	Weekly	ms/cm						
Performed required equipment maintenance (Note below)	As per Manf.	Yes / No	Yes	Yes	Yes	Yes	Yes	
Note spare parts or supplies needed	Weekly	Yes / No	Yes	Yes	Yes	Yes	Yes	
Second ion exchange drum effluent sample collected	Monthly	Yes / No	NO	NO	NO	NO	NO	
Empty Sump pump	Weekly	Yes / No	NO	NO	NO	NO	NO	
Replace ion removal filter fabric and filter sludge	As needed	Yes / No	NO	NO	NO	NO	NO	
Replace ion exchange vessels/ make valve adjustments	As needed	Yes / No	NO	NO	NO	NO	NO	
Inspected catch basin for sediment	As needed	Yes / No	Yes/OK	Yes/OK	Yes/OK	Yes/OK	Yes/OK	
Inspected collection sump and record condition	Monthly	Yes / No	Yes/OK	Yes/OK	Yes/OK	Yes/OK	Yes/OK	
Tested eye wash station	Semi-annual	Yes / No	NO	NO	NO	NO	NO	
Tested fire extinguisher	Yearly	Yes / No	NO	NO	NO	NO	NO	
Replenished first aid kit supplies	After use	Yes / No	NO	NO	NO	NO	NO	
Tested the backflow preventer	Yearly	Yes / No	NO	NO	NO	NO	NO	
Reported backflow preventer test results to Latham Water district	Yearly	Yes / No	NO	NO	NO	NO	NO	

Comments: Note Treatment System Equipment and Building Conditions.

Date 11/13/20 System running on Arrival, take System Readings. Top off Acid and Perform System Maint. System Running OK on departure.
Date 11/17/20 System Running on Arrival take System Readings. Top off Acid Barrel and Perform System Maint. System Running OK on departure.
Date 11/20/20 System Running on Arrival, take System Readings. Top off Acid Barrel and Perform System Maint. System Running OK on departure
Date 11/25/20 SYSTEM RUNNING ON ARRIVAL. TAKE SYSTEM READINGS, TOP OFF ACID BARREL AND DO SYSTEM MAINT. SYSTEM RUNNING ON DEPARTURE
Date 12/1/20 System down on Arrival, Restart Adjust Flow and Recalibrate PH Probes. Top off Acid Barrel and Perform System Maint. System Running OK on departure.

PERFECTION PLATING

Treatment System Operational / Inspection Checklist

Month Dec

'Year 20

Item Description	Required Frequency	Unit	Date of Inspection				
			12/4/20	12/8/20	12/11/20	12/15/20	12/18/2020
Effluent sample collected	Weekly	Yes / No	NO	Yes	NO	NO	NO
Influent sample collected	Monthly	Yes / No	NO	Yes	NO	NO	NO
Flow Rate (gallons per minute)	Weekly	gpm	2.59	2.91	2.77	2.52	2.41
Total Volume Treated (gallons)	Weekly	gal	332745	347145	339233	374634	385804
Effluent pH	Weekly	SI	6.87	6.89	6.84	6.85	6.75
Specific conductivity reading (milliseconds/centimeter)	Weekly	ms/cm					
Performed required equipment maintenance (Note below)	As per Manf.	Yes / No	Yes	Yes	Yes	Yes	Yes
Note spare parts or supplies needed	Weekly	Yes / No	Yes	Yes	Yes	Yes	Yes
Second ion exchange drum effluent sample collected	Monthly	Yes / No	NO	NO	NO	NO	NO
Empty Sump pump	Weekly	Yes / No	NO	NO	NO	NO	NO
Replace ion removal filter fabric and filter sludge	As needed	Yes / No	NO	NO	NO	NO	NO
Replace ion exchange vessels/ make valve adjustments	As needed	Yes / No	NO	NO	NO	NO	NO
Inspected catch basin for sediment	As needed	Yes / No	Yes/OK	Yes/OK	Yes/OK	Yes/OK	Yes/OK
Inspected collection sump and record condition	Monthly	Yes / No	Yes/OK	Yes/OK	Yes/OK	Yes/OK	Yes/OK
Tested eye wash station	Semi-annual	Yes / No	NO	NO	NO	NO	NO
Tested fire extinguisher	Yearly	Yes / No	NO	NO	NO	NO	NO
Replenished first aid kit supplies	After use	Yes / No	NO	NO	NO	NO	NO
Tested the backflow preventer	Yearly	Yes / No	NO	NO	NO	NO	NO
Reported backflow preventer test results to Latham Water district	Yearly	Yes / No	NO	NO	NO	NO	NO

Comments; Note Treatment System Equipment and Building Conditions.

FZ

FZ

FZ

AT

Date 12/4/20 System Running on Arrival, take System Readings and Perform System Maint. Top off Acid Barrel and Cal off Pit Probe. System Running OK on departure.

Date 12/8/20 System Running on Arrival. Take System Readings and top off Acid Barrel. Perform System Maint and take system samples. deliver to lab. System Running OK on departure.

Date 12/11/20 System Running on Arrival, take System Readings. Top of acid Barrel and Perform System Maint. Chemical delivery on ~~Wed~~ Tues. System Running OK on departure.

Date 12/15/20 System running on arrival, take system readings. Top off acid barrel and perform system maintenance. Receive chemical delivery. System running OK on departure

Date 12/18/2020 System running on arrival. Took system readings and performed system maintenance. Topped off acid barrel. System running on departure

PERFECTION PLATING

Treatment System Operational / Inspection Checklist

Month December Year 2020

Item Description	Required Frequency	Unit	Date of Inspection				
			12/22/2020	12/29/20	12/31/20	1/4/21	1/8/21
Effluent sample collected	Weekly	Yes / No	NO	NO	NO	NO	NO
Influent sample collected	Monthly	Yes / No	NO	NO	NO	NO	NO
Flow Rate (gallons per minute)	Weekly	gpm	2.64	2.2	2.4	2.47	2.59
Total Volume Treated (gallons)	Weekly	gal	401521	426103	432868	446195	460053
Effluent pH	Weekly	SI	6.77	7.1	6.6	6.84	6.80
Specific conductivity reading (milliseconds/centimeter)	Weekly	ms/cm	—	—	—	—	—
Performed required equipment maintenance (Note below)	As per Manf.	Yes / No	Yes	Yes	Yes	Yes	Yes
Note spare parts or supplies needed	Weekly	Yes / No	Yes	Yes	Yes	Yes	Yes
Second ion exchange drum effluent sample collected	Monthly	Yes / No	NO	NO	NO	NO	NO
Empty Sump pump	Weekly	Yes / No	NO	NO	NO	NO	NO
Replace ion removal filter fabric and filter sludge	As needed	Yes / No	NO	NO	NO	NO	Yes
Replace ion exchange vessels/ make valve adjustments	As needed	Yes / No	NO	NO	NO	NO	NO
Inspected catch basin for sediment	As needed	Yes / No	Yes/OK	Yes/OK	Yes/OK	Yes/OK	Yes/OK
Inspected collection sump and record condition	Monthly	Yes / No	Yes/OK	Yes/OK	Yes/OK	Yes/OK	Yes/OK
Tested eye wash station	Semi-annual	Yes / No	NO	NO	NO	NO	NO
Tested fire extinguisher	Yearly	Yes / No	NO	NO	NO	NO	NO
Replenished first aid kit supplies	After use	Yes / No	NO	NO	NO	NO	NO
Tested the backflow preventer	Yearly	Yes / No	NO	NO	NO	NO	NO
Reported backflow preventer test results to Latham Water district	Yearly	Yes / No	NO	NO	NO	NO	NO

Comments: Note Treatment System Equipment and Building Conditions.

Date 12/22/2020 System running on arrival. Repaired blower exhaust flex pipe. Took system readings. Topped off Acid barrel. System running on departure.

Date 12/29/20 SYSTEM RUNNING ON ARRIVAL TOP OFF ACID BARREL. PERFORM SYSTEM MAINT. SYSTEM RUNNING ON DEPARTURE.

Date 12/31/20 SYSTEM RUNNING ON ARRIVAL PERFORM SYSTEM MAINT. SYSTEM RUNNING ON DEPARTURE.

Date 1/4/21 System Running on Arrival, take System Readings and Perform System Maint. Top off Acid Barrel and Change out Base Barrel. System Running OK on departure.

Date 1/8/21 System Running on Arrival, take System Readings. Top off Acid Barrel and Perform System Maint. System Running OK on departure.

Appendix B

Treatment System Laboratory Analytical Data

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ANALYTICAL REPORT

Eurofins TestAmerica, Buffalo
10 Hazelwood Drive
Amherst, NY 14228-2298
Tel: (716)691-2600

Laboratory Job ID: 480-176066-1

Client Project/Site: Perfection Plating #401037

For:

New York State D.E.C.
1115 Route 86
PO BOX 296
Ray Brook, New York 12977

Attn: Samantha Salotto



Authorized for release by:
10/9/2020 2:23:39 PM

Judy Stone, Senior Project Manager
(484)685-0868
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This report has been electronically signed and authorized by the signatory. Electronic signature is intended to be the legally binding equivalent of a traditionally handwritten signature.

Results relate only to the items tested and the sample(s) as received by the laboratory.

I certify that this data package is in compliance with the terms and conditions of the contract, both technically and for completeness, for other than the conditions detailed within the body of this report. Release of the data contained in this sample data package and in the electronic data deliverable has been authorized by the Laboratory Manager or his/her designee, as verified by the following signature.



Judy Stone
Senior Project Manager
10/9/2020 2:23:39 PM

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Definitions/Glossary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-176066-1

Qualifiers

Metals

Qualifier	Qualifier Description
J	Result is less than the RL but greater than or equal to the MDL and the concentration is an approximate value.

General Chemistry

Qualifier	Qualifier Description
J	Result is less than the RL but greater than or equal to the MDL and the concentration is an approximate value.

Glossary

Abbreviation	These commonly used abbreviations may or may not be present in this report.
□	Listed under the "D" column to designate that the result is reported on a dry weight basis
%R	Percent Recovery
CFL	Contains Free Liquid
CFU	Colony Forming Unit
CNF	Contains No Free Liquid
DER	Duplicate Error Ratio (normalized absolute difference)
Dil Fac	Dilution Factor
DL	Detection Limit (DoD/DOE)
DL, RA, RE, IN	Indicates a Dilution, Re-analysis, Re-extraction, or additional Initial metals/anion analysis of the sample
DLC	Decision Level Concentration (Radiochemistry)
EDL	Estimated Detection Limit (Dioxin)
LOD	Limit of Detection (DoD/DOE)
LOQ	Limit of Quantitation (DoD/DOE)
MCL	EPA recommended "Maximum Contaminant Level"
MDA	Minimum Detectable Activity (Radiochemistry)
MDC	Minimum Detectable Concentration (Radiochemistry)
MDL	Method Detection Limit
ML	Minimum Level (Dioxin)
MPN	Most Probable Number
MQL	Method Quantitation Limit
NC	Not Calculated
ND	Not Detected at the reporting limit (or MDL or EDL if shown)
NEG	Negative / Absent
POS	Positive / Present
PQL	Practical Quantitation Limit
PRES	Presumptive
QC	Quality Control
RER	Relative Error Ratio (Radiochemistry)
RL	Reporting Limit or Requested Limit (Radiochemistry)
RPD	Relative Percent Difference, a measure of the relative difference between two points
TEF	Toxicity Equivalent Factor (Dioxin)
TEQ	Toxicity Equivalent Quotient (Dioxin)
TNTC	Too Numerous To Count

Case Narrative

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-176066-1

Job ID: 480-176066-1

Laboratory: Eurofins TestAmerica, Buffalo

Narrative

Job Narrative
480-176066-1

Receipt

The samples were received on 10/7/2020 8:00 AM; the samples arrived in good condition, and where required, properly preserved and on ice. The temperature of the cooler at receipt was 2.5° C.

Metals

No analytical or quality issues were noted, other than those described in the Definitions/Glossary page.

General Chemistry

No analytical or quality issues were noted, other than those described in the Definitions/Glossary page.

Client Sample Results

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-176066-1

Client Sample ID: INFLUENT

Lab Sample ID: 480-176066-1

Date Collected: 10/06/20 11:10

Matrix: Water

Date Received: 10/07/20 08:00

Method: 200.7 Rev 4.4 - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	ND		0.015	0.0056	mg/L		10/08/20 09:02	10/08/20 18:15	1
Cadmium	ND		0.0020	0.00050	mg/L		10/08/20 09:02	10/08/20 18:15	1
Chromium	0.45		0.0040	0.0010	mg/L		10/08/20 09:02	10/08/20 18:15	1
Copper	ND		0.010	0.0016	mg/L		10/08/20 09:02	10/08/20 18:15	1
Iron	0.066		0.050	0.019	mg/L		10/08/20 09:02	10/08/20 18:15	1
Lead	ND		0.010	0.0030	mg/L		10/08/20 09:02	10/08/20 18:15	1
Nickel	0.0088	J	0.010	0.0013	mg/L		10/08/20 09:02	10/08/20 18:15	1
Selenium	ND		0.025	0.0087	mg/L		10/08/20 09:02	10/08/20 18:15	1
Zinc	0.0078	J	0.010	0.0015	mg/L		10/08/20 09:02	10/08/20 18:15	1

General Chemistry

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	0.38		0.010	0.0050	mg/L			10/07/20 10:25	1
Cyanide, Non-amenable	ND		0.010	0.0050	mg/L		10/07/20 18:14	10/08/20 13:17	1
Analyte	Result	Qualifier	RL	RL	Unit	D	Prepared	Analyzed	Dil Fac
Total Suspended Solids	ND		4.0	4.0	mg/L			10/07/20 20:04	1

Client Sample ID: EFFLUENT

Lab Sample ID: 480-176066-2

Date Collected: 10/06/20 11:00

Matrix: Water

Date Received: 10/07/20 08:00

Method: 200.7 Rev 4.4 - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	ND		0.015	0.0056	mg/L		10/08/20 09:02	10/08/20 18:00	1
Cadmium	ND		0.0020	0.00050	mg/L		10/08/20 09:02	10/08/20 18:00	1
Chromium	0.16		0.0040	0.0010	mg/L		10/08/20 09:02	10/08/20 18:00	1
Copper	ND		0.010	0.0016	mg/L		10/08/20 09:02	10/08/20 18:00	1
Iron	ND		0.050	0.019	mg/L		10/08/20 09:02	10/08/20 18:00	1
Lead	ND		0.010	0.0030	mg/L		10/08/20 09:02	10/08/20 18:00	1
Nickel	0.0057	J	0.010	0.0013	mg/L		10/08/20 09:02	10/08/20 18:00	1
Selenium	ND		0.025	0.0087	mg/L		10/08/20 09:02	10/08/20 18:00	1
Zinc	0.0022	J	0.010	0.0015	mg/L		10/08/20 09:02	10/08/20 18:00	1

General Chemistry

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	ND		0.010	0.0050	mg/L			10/07/20 10:25	1
Cyanide, Non-amenable	0.0073	J	0.010	0.0050	mg/L		10/07/20 18:14	10/08/20 13:20	1
Analyte	Result	Qualifier	RL	RL	Unit	D	Prepared	Analyzed	Dil Fac
Total Suspended Solids	ND		4.0	4.0	mg/L			10/07/20 20:04	1

Lab Chronicle

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-176066-1

Client Sample ID: INFLUENT

Lab Sample ID: 480-176066-1

Date Collected: 10/06/20 11:10

Matrix: Water

Date Received: 10/07/20 08:00

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	200.7			552944	10/08/20 09:02	KMP	TAL BUF
Total/NA	Analysis	200.7 Rev 4.4		1	553231	10/08/20 18:15	AMH	TAL BUF
Total/NA	Analysis	SM 2540D		1	552905	10/07/20 20:04	E1T	TAL BUF
Total/NA	Analysis	SM 3500 CR B		1	552839	10/07/20 10:25	CLT	TAL BUF
Total/NA	Prep	SM 4500 CN C			552895	10/07/20 18:14	CRK	TAL BUF
Total/NA	Analysis	SM 4500 CN G		1	553077	10/08/20 13:17	CRK	TAL BUF

Client Sample ID: EFFLUENT

Lab Sample ID: 480-176066-2

Date Collected: 10/06/20 11:00

Matrix: Water

Date Received: 10/07/20 08:00

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	200.7			552944	10/08/20 09:02	KMP	TAL BUF
Total/NA	Analysis	200.7 Rev 4.4		1	553231	10/08/20 18:00	AMH	TAL BUF
Total/NA	Analysis	SM 2540D		1	552905	10/07/20 20:04	E1T	TAL BUF
Total/NA	Analysis	SM 3500 CR B		1	552839	10/07/20 10:25	CLT	TAL BUF
Total/NA	Prep	SM 4500 CN C			552895	10/07/20 18:14	CRK	TAL BUF
Total/NA	Analysis	SM 4500 CN G		1	553077	10/08/20 13:20	CRK	TAL BUF

Laboratory References:

TAL BUF = Eurofins TestAmerica, Buffalo, 10 Hazelwood Drive, Amherst, NY 14228-2298, TEL (716)691-2600

Accreditation/Certification Summary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-176066-1

Laboratory: Eurofins TestAmerica, Buffalo

Unless otherwise noted, all analytes for this laboratory were covered under each accreditation/certification below.

Authority	Program	Identification Number	Expiration Date
New York	NELAP	10026	04-01-21

The following analytes are included in this report, but the laboratory is not certified by the governing authority. This list may include analytes for which the agency does not offer certification.

Analysis Method	Prep Method	Matrix	Analyte
SM 4500 CN G	SM 4500 CN C	Water	Cyanide, Non-amenable

Method Summary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-176066-1

Method	Method Description	Protocol	Laboratory
200.7 Rev 4.4	Metals (ICP)	EPA	TAL BUF
SM 2540D	Solids, Total Suspended (TSS)	SM	TAL BUF
SM 3500 CR B	Chromium, Hexavalent	SM	TAL BUF
SM 4500 CN G	Cyanide, Amenable	SM	TAL BUF
200.7	Preparation, Total Metals	EPA	TAL BUF
SM 4500 CN C	Cyanide, Distillation	SM	TAL BUF

Protocol References:

EPA = US Environmental Protection Agency
SM = "Standard Methods For The Examination Of Water And Wastewater"

Laboratory References:

TAL BUF = Eurofins TestAmerica, Buffalo, 10 Hazelwood Drive, Amherst, NY 14228-2298, TEL (716)691-2600

Sample Summary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-176066-1

Lab Sample ID	Client Sample ID	Matrix	Collected	Received	Asset ID
480-176066-1	INFLUENT	Water	10/06/20 11:10	10/07/20 08:00	
480-176066-2	EFFLUENT	Water	10/06/20 11:00	10/07/20 08:00	

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Login Sample Receipt Checklist

Client: New York State D.E.C.

Job Number: 480-176066-1

Login Number: 176066

List Source: Eurofins TestAmerica, Buffalo

List Number: 1

Creator: Yeager, Brian A

Question	Answer	Comment
Radioactivity either was not measured or, if measured, is at or below background	True	
The cooler's custody seal, if present, is intact.	True	
The cooler or samples do not appear to have been compromised or tampered with.	True	
Samples were received on ice.	True	
Cooler Temperature is acceptable.	True	
Cooler Temperature is recorded.	True	
COC is present.	True	
COC is filled out in ink and legible.	True	
COC is filled out with all pertinent information.	True	
Is the Field Sampler's name present on COC?	True	
There are no discrepancies between the sample IDs on the containers and the COC.	True	
Samples are received within Holding Time (Excluding tests with immediate HTs)..	True	
Sample containers have legible labels.	True	
Containers are not broken or leaking.	True	
Sample collection date/times are provided.	True	
Appropriate sample containers are used.	True	
Sample bottles are completely filled.	True	
Sample Preservation Verified	True	
There is sufficient vol. for all requested analyses, incl. any requested MS/MSDs	True	
VOA sample vials do not have headspace or bubble is <6mm (1/4") in diameter.	N/A	
If necessary, staff have been informed of any short hold time or quick TAT needs	True	
Multiphasic samples are not present.	True	
Samples do not require splitting or compositing.	True	
Sampling Company provided.	True	AZTECH
Samples received within 48 hours of sampling.	True	
Samples requiring field filtration have been filtered in the field.	True	
Chlorine Residual checked.	N/A	

ANALYTICAL REPORT

Eurofins TestAmerica, Buffalo
10 Hazelwood Drive
Amherst, NY 14228-2298
Tel: (716)691-2600

Laboratory Job ID: 480-177501-1

Client Project/Site: Perfection Plating #401037

For:

New York State D.E.C.
1115 Route 86
PO BOX 296
Ray Brook, New York 12977

Attn: Samantha Salotto



Authorized for release by:
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Results relate only to the items tested and the sample(s) as received by the laboratory.

I certify that this data package is in compliance with the terms and conditions of the contract, both technically and for completeness, for other than the conditions detailed within the body of this report. Release of the data contained in this sample data package and in the electronic data deliverable has been authorized by the Laboratory Manager or his/her designee, as verified by the following signature.



Judy Stone
Senior Project Manager
11/25/2020 4:54:55 PM



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Definitions/Glossary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177501-1

Qualifiers

Metals

Qualifier	Qualifier Description
J	Result is less than the RL but greater than or equal to the MDL and the concentration is an approximate value.

Glossary

Abbreviation	These commonly used abbreviations may or may not be present in this report.
□	Listed under the "D" column to designate that the result is reported on a dry weight basis
%R	Percent Recovery
CFL	Contains Free Liquid
CFU	Colony Forming Unit
CNF	Contains No Free Liquid
DER	Duplicate Error Ratio (normalized absolute difference)
Dil Fac	Dilution Factor
DL	Detection Limit (DoD/DOE)
DL, RA, RE, IN	Indicates a Dilution, Re-analysis, Re-extraction, or additional Initial metals/anion analysis of the sample
DLC	Decision Level Concentration (Radiochemistry)
EDL	Estimated Detection Limit (Dioxin)
LOD	Limit of Detection (DoD/DOE)
LOQ	Limit of Quantitation (DoD/DOE)
MCL	EPA recommended "Maximum Contaminant Level"
MDA	Minimum Detectable Activity (Radiochemistry)
MDC	Minimum Detectable Concentration (Radiochemistry)
MDL	Method Detection Limit
ML	Minimum Level (Dioxin)
MPN	Most Probable Number
MQL	Method Quantitation Limit
NC	Not Calculated
ND	Not Detected at the reporting limit (or MDL or EDL if shown)
NEG	Negative / Absent
POS	Positive / Present
PQL	Practical Quantitation Limit
PRES	Presumptive
QC	Quality Control
RER	Relative Error Ratio (Radiochemistry)
RL	Reporting Limit or Requested Limit (Radiochemistry)
RPD	Relative Percent Difference, a measure of the relative difference between two points
TEF	Toxicity Equivalent Factor (Dioxin)
TEQ	Toxicity Equivalent Quotient (Dioxin)
TNTC	Too Numerous To Count

Case Narrative

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177501-1

Job ID: 480-177501-1

Laboratory: Eurofins TestAmerica, Buffalo

Narrative

Job Narrative 480-177501-1

Receipt

The samples were received on 11/4/2020 8:00 AM; the samples arrived in good condition, and where required, properly preserved and on ice. The temperature of the cooler at receipt was 1.6° C.

Metals

No analytical or quality issues were noted, other than those described in the Definitions/Glossary page.

General Chemistry

No analytical or quality issues were noted, other than those described in the Definitions/Glossary page.

Client Sample Results

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177501-1

Client Sample ID: INFLUENT

Lab Sample ID: 480-177501-1

Date Collected: 11/03/20 10:45

Matrix: Water

Date Received: 11/04/20 08:00

Method: 200.7 Rev 4.4 - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	ND		0.015	0.0056	mg/L		11/19/20 08:47	11/20/20 20:05	1
Cadmium	ND		0.0020	0.00050	mg/L		11/19/20 08:47	11/20/20 20:05	1
Chromium	0.63		0.0040	0.0010	mg/L		11/19/20 08:47	11/20/20 20:05	1
Copper	0.0030	J	0.010	0.0016	mg/L		11/19/20 08:47	11/20/20 20:05	1
Iron	0.034	J	0.050	0.019	mg/L		11/19/20 08:47	11/20/20 20:05	1
Lead	ND		0.010	0.0030	mg/L		11/19/20 08:47	11/20/20 20:05	1
Nickel	0.0098	J	0.010	0.0013	mg/L		11/19/20 08:47	11/20/20 20:05	1
Selenium	ND		0.025	0.0087	mg/L		11/19/20 08:47	11/20/20 20:05	1
Zinc	0.0061	J	0.010	0.0015	mg/L		11/19/20 08:47	11/20/20 20:05	1

General Chemistry

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	0.56		0.020	0.010	mg/L			11/04/20 09:15	2
Cyanide, Non-amenable	0.013		0.010	0.0050	mg/L		11/16/20 18:27	11/17/20 13:26	1
Analyte	Result	Qualifier	RL	RL	Unit	D	Prepared	Analyzed	Dil Fac
Total Suspended Solids	4.0		4.0	4.0	mg/L			11/07/20 15:14	1

Client Sample ID: EFFLUENT

Lab Sample ID: 480-177501-2

Date Collected: 11/03/20 10:30

Matrix: Water

Date Received: 11/04/20 08:00

Method: 200.7 Rev 4.4 - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	ND		0.015	0.0056	mg/L		11/19/20 08:47	11/20/20 20:16	1
Cadmium	ND		0.0020	0.00050	mg/L		11/19/20 08:47	11/20/20 20:16	1
Chromium	0.13		0.0040	0.0010	mg/L		11/19/20 08:47	11/20/20 20:16	1
Copper	ND		0.010	0.0016	mg/L		11/19/20 08:47	11/20/20 20:16	1
Iron	ND		0.050	0.019	mg/L		11/19/20 08:47	11/20/20 20:16	1
Lead	ND		0.010	0.0030	mg/L		11/19/20 08:47	11/20/20 20:16	1
Nickel	0.0072	J	0.010	0.0013	mg/L		11/19/20 08:47	11/20/20 20:16	1
Selenium	ND		0.025	0.0087	mg/L		11/19/20 08:47	11/20/20 20:16	1
Zinc	0.0034	J	0.010	0.0015	mg/L		11/19/20 08:47	11/20/20 20:16	1

General Chemistry

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	ND		0.010	0.0050	mg/L			11/04/20 09:15	1
Cyanide, Non-amenable	ND		0.010	0.0050	mg/L		11/16/20 18:27	11/17/20 13:39	1
Analyte	Result	Qualifier	RL	RL	Unit	D	Prepared	Analyzed	Dil Fac
Total Suspended Solids	ND		4.0	4.0	mg/L			11/07/20 15:14	1

Lab Chronicle

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177501-1

Client Sample ID: INFLUENT

Lab Sample ID: 480-177501-1

Date Collected: 11/03/20 10:45

Matrix: Water

Date Received: 11/04/20 08:00

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	200.7			559889	11/19/20 08:47	KMP	TAL BUF
Total/NA	Analysis	200.7 Rev 4.4		1	560297	11/20/20 20:05	LMH	TAL BUF
Total/NA	Analysis	SM 2540D		1	557976	11/07/20 15:14	CSS	TAL BUF
Total/NA	Analysis	SM 3500 CR B		2	557522	11/04/20 09:15	BEF	TAL BUF
Total/NA	Prep	SM 4500 CN C			559370	11/16/20 18:27	ALT	TAL BUF
Total/NA	Analysis	SM 4500 CN G		1	559507	11/17/20 13:26	CRK	TAL BUF

Client Sample ID: EFFLUENT

Lab Sample ID: 480-177501-2

Date Collected: 11/03/20 10:30

Matrix: Water

Date Received: 11/04/20 08:00

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	200.7			559889	11/19/20 08:47	KMP	TAL BUF
Total/NA	Analysis	200.7 Rev 4.4		1	560297	11/20/20 20:16	LMH	TAL BUF
Total/NA	Analysis	SM 2540D		1	557976	11/07/20 15:14	CSS	TAL BUF
Total/NA	Analysis	SM 3500 CR B		1	557522	11/04/20 09:15	BEF	TAL BUF
Total/NA	Prep	SM 4500 CN C			559370	11/16/20 18:27	ALT	TAL BUF
Total/NA	Analysis	SM 4500 CN G		1	559507	11/17/20 13:39	CRK	TAL BUF

Laboratory References:

TAL BUF = Eurofins TestAmerica, Buffalo, 10 Hazelwood Drive, Amherst, NY 14228-2298, TEL (716)691-2600

Accreditation/Certification Summary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177501-1

Laboratory: Eurofins TestAmerica, Buffalo

Unless otherwise noted, all analytes for this laboratory were covered under each accreditation/certification below.

Authority	Program	Identification Number	Expiration Date
New York	NELAP	10026	04-01-21

The following analytes are included in this report, but the laboratory is not certified by the governing authority. This list may include analytes for which the agency does not offer certification.

Analysis Method	Prep Method	Matrix	Analyte
SM 4500 CN G	SM 4500 CN C	Water	Cyanide, Non-amenable

Method Summary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177501-1

Method	Method Description	Protocol	Laboratory
200.7 Rev 4.4	Metals (ICP)	EPA	TAL BUF
SM 2540D	Solids, Total Suspended (TSS)	SM	TAL BUF
SM 3500 CR B	Chromium, Hexavalent	SM	TAL BUF
SM 4500 CN G	Cyanide, Amenable	SM	TAL BUF
200.7	Preparation, Total Metals	EPA	TAL BUF
SM 4500 CN C	Cyanide, Distillation	SM	TAL BUF

Protocol References:

EPA = US Environmental Protection Agency

SM = "Standard Methods For The Examination Of Water And Wastewater"

Laboratory References:

TAL BUF = Eurofins TestAmerica, Buffalo, 10 Hazelwood Drive, Amherst, NY 14228-2298, TEL (716)691-2600

Sample Summary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177501-1

Lab Sample ID	Client Sample ID	Matrix	Collected	Received	Asset ID
480-177501-1	INFLUENT	Water	11/03/20 10:45	11/04/20 08:00	
480-177501-2	EFFLUENT	Water	11/03/20 10:30	11/04/20 08:00	

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Client Information Client Contact: Andrew Talbot Company: Aztech Technologies Inc. Address: 5 McCrea Hill Road City: Ballston Spa State, Zip: NY, 12020 Phone: 518-597-1241 (Tel) Email: atalbot@aztechenv.com Project Name: Perfection Plating #401037 Site:		Lab PM: Stone, Judy L E-Mail: Judy.Stone@Eurofinset.com Lab Tracking No(s): 480-145916-29001.1 Page: 1 of 1 Job #:		Analysis Requested Preservation Codes: A - HCL M - Hexane B - NaOH N - None C - Zn Acetate O - AsNaO2 D - Nitric Acid P - Na2O4S E - NaHSO4 Q - Na2SO3 F - MeOH R - Na2S2O3 G - Amchlor S - H2SO4 H - Ascorbic Acid T - TSP Dodecahydrate I - Isc U - Acetone V - MCA	
Due Date Requested: TAT Requested (days): PO #: Callout ID: 136401 WO #:		Field Filtered Sample (Yes or No) Perform MS/MSD (Yes or No) 200.7 - (MOD) Copy Analyses 2540D - TSS 4500 CN, G - CN Non-amenable 3500 CR, B - Cr+6			
Sample Identification Influent Effluent		Sample Date 11/3/20 11/3/20		Sample Time 10:45 10:30	
Sample Type (C=Comp, G=grab)		Preservation Code:		Matrix (W=water, S=solid, O=organic, A=air) Water Water	
Special Instructions/Note:		Special Instructions/Note:			
Analysis Results (Grid area with handwritten data and calculations)		Analysis Results (Grid area with handwritten data and calculations)			
Possible Hazard Identification <input type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown <input type="checkbox"/> Radiological		Sample Disposal (A fee may be assessed if samples are retained longer than 1 month) <input type="checkbox"/> Return To Client <input type="checkbox"/> Disposal By Lab <input type="checkbox"/> Archive For Months			
Deliverable Requested: I, II, III, IV, Other (specify)		Special Instructions/QC Requirements:			
Empty Kit Relinquished by:		Method of Shipment:			
Relinquished by:		Received by:		Date/Time:	
Relinquished by:		Received by:		Date/Time:	
Relinquished by:		Received by:		Date/Time:	
Custody Seals Intact: Yes No		Cooler Temperature(s) °C and Other Remarks:			

Login Sample Receipt Checklist

Client: New York State D.E.C.

Job Number: 480-177501-1

Login Number: 177501

List Source: Eurofins TestAmerica, Buffalo

List Number: 1

Creator: Yeager, Brian A

Question	Answer	Comment
Radioactivity either was not measured or, if measured, is at or below background	True	
The cooler's custody seal, if present, is intact.	True	
The cooler or samples do not appear to have been compromised or tampered with.	True	
Samples were received on ice.	True	
Cooler Temperature is acceptable.	True	
Cooler Temperature is recorded.	True	
COC is present.	True	
COC is filled out in ink and legible.	True	
COC is filled out with all pertinent information.	True	
Is the Field Sampler's name present on COC?	True	
There are no discrepancies between the sample IDs on the containers and the COC.	True	
Samples are received within Holding Time (Excluding tests with immediate HTs)..	True	
Sample containers have legible labels.	True	
Containers are not broken or leaking.	True	
Sample collection date/times are provided.	True	
Appropriate sample containers are used.	True	
Sample bottles are completely filled.	True	
Sample Preservation Verified	True	
There is sufficient vol. for all requested analyses, incl. any requested MS/MSDs	True	
VOA sample vials do not have headspace or bubble is <6mm (1/4") in diameter.	N/A	
If necessary, staff have been informed of any short hold time or quick TAT needs	True	
Multiphasic samples are not present.	True	
Samples do not require splitting or compositing.	True	
Sampling Company provided.	True	LABELLA
Samples received within 48 hours of sampling.	True	
Samples requiring field filtration have been filtered in the field.	True	
Chlorine Residual checked.	N/A	

ANALYTICAL REPORT

Eurofins TestAmerica, Buffalo
10 Hazelwood Drive
Amherst, NY 14228-2298
Tel: (716)691-2600

Laboratory Job ID: 480-179132-1

Client Project/Site: Perfection Plating #401037

For:

New York State D.E.C.
1115 Route 86
PO BOX 296
Ray Brook, New York 12977

Attn: Samantha Salotto



Authorized for release by:
12/15/2020 7:21:06 PM

Judy Stone, Senior Project Manager
(484)685-0868
Judy.Stone@Eurofinset.com

LINKS

Review your project
results through
TotalAccess

Have a Question?



Visit us at:

www.eurofinsus.com/Env

The test results in this report meet all 2003 NELAC, 2009 TNI, and 2016 TNI requirements for accredited parameters, exceptions are noted in this report. This report may not be reproduced except in full, and with written approval from the laboratory. For questions please contact the Project Manager at the e-mail address or telephone number listed on this page.

This report has been electronically signed and authorized by the signatory. Electronic signature is intended to be the legally binding equivalent of a traditionally handwritten signature.

Results relate only to the items tested and the sample(s) as received by the laboratory.

I certify that this data package is in compliance with the terms and conditions of the contract, both technically and for completeness, for other than the conditions detailed within the body of this report. Release of the data contained in this sample data package and in the electronic data deliverable has been authorized by the Laboratory Manager or his/her designee, as verified by the following signature.



Judy Stone
Senior Project Manager
12/15/2020 7:21:06 PM

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Definitions/Glossary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-179132-1

Qualifiers

Metals

Qualifier	Qualifier Description
J	Result is less than the RL but greater than or equal to the MDL and the concentration is an approximate value.

Glossary

Abbreviation	These commonly used abbreviations may or may not be present in this report.
□	Listed under the "D" column to designate that the result is reported on a dry weight basis
%R	Percent Recovery
CFL	Contains Free Liquid
CFU	Colony Forming Unit
CNF	Contains No Free Liquid
DER	Duplicate Error Ratio (normalized absolute difference)
Dil Fac	Dilution Factor
DL	Detection Limit (DoD/DOE)
DL, RA, RE, IN	Indicates a Dilution, Re-analysis, Re-extraction, or additional Initial metals/anion analysis of the sample
DLC	Decision Level Concentration (Radiochemistry)
EDL	Estimated Detection Limit (Dioxin)
LOD	Limit of Detection (DoD/DOE)
LOQ	Limit of Quantitation (DoD/DOE)
MCL	EPA recommended "Maximum Contaminant Level"
MDA	Minimum Detectable Activity (Radiochemistry)
MDC	Minimum Detectable Concentration (Radiochemistry)
MDL	Method Detection Limit
ML	Minimum Level (Dioxin)
MPN	Most Probable Number
MQL	Method Quantitation Limit
NC	Not Calculated
ND	Not Detected at the reporting limit (or MDL or EDL if shown)
NEG	Negative / Absent
POS	Positive / Present
PQL	Practical Quantitation Limit
PRES	Presumptive
QC	Quality Control
RER	Relative Error Ratio (Radiochemistry)
RL	Reporting Limit or Requested Limit (Radiochemistry)
RPD	Relative Percent Difference, a measure of the relative difference between two points
TEF	Toxicity Equivalent Factor (Dioxin)
TEQ	Toxicity Equivalent Quotient (Dioxin)
TNTC	Too Numerous To Count

Case Narrative

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-179132-1

Job ID: 480-179132-1

Laboratory: Eurofins TestAmerica, Buffalo

Narrative

Job Narrative 480-179132-1

Receipt

The samples were received on 12/9/2020 8:00 AM; the samples arrived in good condition, and where required, properly preserved and on ice. The temperature of the cooler at receipt was 2.3° C.

Metals

No analytical or quality issues were noted, other than those described in the Definitions/Glossary page.

General Chemistry

No analytical or quality issues were noted, other than those described in the Definitions/Glossary page.

Client Sample Results

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-179132-1

Client Sample ID: INFLUENT

Lab Sample ID: 480-179132-1

Date Collected: 12/08/20 10:15

Matrix: Water

Date Received: 12/09/20 08:00

Method: 200.7 Rev 4.4 - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	ND		0.015	0.0056	mg/L		12/11/20 09:50	12/12/20 02:14	1
Cadmium	ND		0.0020	0.00050	mg/L		12/11/20 09:50	12/12/20 02:14	1
Chromium	0.73		0.0040	0.0010	mg/L		12/11/20 09:50	12/12/20 02:14	1
Copper	0.0022	J	0.010	0.0016	mg/L		12/11/20 09:50	12/12/20 02:14	1
Iron	0.027	J	0.050	0.019	mg/L		12/11/20 09:50	12/12/20 02:14	1
Lead	ND		0.010	0.0030	mg/L		12/11/20 09:50	12/12/20 02:14	1
Nickel	0.0069	J	0.010	0.0013	mg/L		12/11/20 09:50	12/12/20 02:14	1
Selenium	ND		0.025	0.0087	mg/L		12/11/20 09:50	12/12/20 02:14	1
Zinc	0.0050	J	0.010	0.0015	mg/L		12/11/20 09:50	12/12/20 02:14	1

General Chemistry

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	0.71		0.050	0.025	mg/L			12/09/20 09:45	5
Cyanide, Non-amenable	0.019		0.010	0.0050	mg/L		12/09/20 17:49	12/10/20 15:53	1
Analyte	Result	Qualifier	RL	RL	Unit	D	Prepared	Analyzed	Dil Fac
Total Suspended Solids	ND		4.0	4.0	mg/L			12/10/20 17:01	1

Client Sample ID: EFFLUENT

Lab Sample ID: 480-179132-2

Date Collected: 12/08/20 10:25

Matrix: Water

Date Received: 12/09/20 08:00

Method: 200.7 Rev 4.4 - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Arsenic	ND		0.015	0.0056	mg/L		12/11/20 09:50	12/12/20 02:17	1
Cadmium	ND		0.0020	0.00050	mg/L		12/11/20 09:50	12/12/20 02:17	1
Chromium	0.15		0.0040	0.0010	mg/L		12/11/20 09:50	12/12/20 02:17	1
Copper	ND		0.010	0.0016	mg/L		12/11/20 09:50	12/12/20 02:17	1
Iron	ND		0.050	0.019	mg/L		12/11/20 09:50	12/12/20 02:17	1
Lead	ND		0.010	0.0030	mg/L		12/11/20 09:50	12/12/20 02:17	1
Nickel	0.0069	J	0.010	0.0013	mg/L		12/11/20 09:50	12/12/20 02:17	1
Selenium	ND		0.025	0.0087	mg/L		12/11/20 09:50	12/12/20 02:17	1
Zinc	0.0034	J	0.010	0.0015	mg/L		12/11/20 09:50	12/12/20 02:17	1

General Chemistry

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	ND		0.010	0.0050	mg/L			12/09/20 09:45	1
Cyanide, Non-amenable	ND		0.010	0.0050	mg/L		12/09/20 17:49	12/10/20 15:55	1
Analyte	Result	Qualifier	RL	RL	Unit	D	Prepared	Analyzed	Dil Fac
Total Suspended Solids	ND		4.0	4.0	mg/L			12/10/20 17:01	1

Lab Chronicle

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-179132-1

Client Sample ID: INFLUENT

Lab Sample ID: 480-179132-1

Date Collected: 12/08/20 10:15

Matrix: Water

Date Received: 12/09/20 08:00

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	200.7			562803	12/11/20 09:50	ADM	TAL BUF
Total/NA	Analysis	200.7 Rev 4.4		1	563102	12/12/20 02:14	LMH	TAL BUF
Total/NA	Analysis	SM 2540D		1	562784	12/10/20 17:01	CSS	TAL BUF
Total/NA	Analysis	SM 3500 CR B		5	562507	12/09/20 09:45	CLT	TAL BUF
Total/NA	Prep	SM 4500 CN C			562589	12/09/20 17:49	ALT	TAL BUF
Total/NA	Analysis	SM 4500 CN G		1	562774	12/10/20 15:53	ALT	TAL BUF

Client Sample ID: EFFLUENT

Lab Sample ID: 480-179132-2

Date Collected: 12/08/20 10:25

Matrix: Water

Date Received: 12/09/20 08:00

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	200.7			562803	12/11/20 09:50	ADM	TAL BUF
Total/NA	Analysis	200.7 Rev 4.4		1	563102	12/12/20 02:17	LMH	TAL BUF
Total/NA	Analysis	SM 2540D		1	562784	12/10/20 17:01	CSS	TAL BUF
Total/NA	Analysis	SM 3500 CR B		1	562507	12/09/20 09:45	CLT	TAL BUF
Total/NA	Prep	SM 4500 CN C			562589	12/09/20 17:49	ALT	TAL BUF
Total/NA	Analysis	SM 4500 CN G		1	562774	12/10/20 15:55	ALT	TAL BUF

Laboratory References:

TAL BUF = Eurofins TestAmerica, Buffalo, 10 Hazelwood Drive, Amherst, NY 14228-2298, TEL (716)691-2600

Accreditation/Certification Summary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-179132-1

Laboratory: Eurofins TestAmerica, Buffalo

Unless otherwise noted, all analytes for this laboratory were covered under each accreditation/certification below.

Authority	Program	Identification Number	Expiration Date
New York	NELAP	10026	04-01-21

The following analytes are included in this report, but the laboratory is not certified by the governing authority. This list may include analytes for which the agency does not offer certification.

Analysis Method	Prep Method	Matrix	Analyte
SM 4500 CN G	SM 4500 CN C	Water	Cyanide, Non-amenable

Method Summary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-179132-1

Method	Method Description	Protocol	Laboratory
200.7 Rev 4.4	Metals (ICP)	EPA	TAL BUF
SM 2540D	Solids, Total Suspended (TSS)	SM	TAL BUF
SM 3500 CR B	Chromium, Hexavalent	SM	TAL BUF
SM 4500 CN G	Cyanide, Amenable	SM	TAL BUF
200.7	Preparation, Total Metals	EPA	TAL BUF
SM 4500 CN C	Cyanide, Distillation	SM	TAL BUF

Protocol References:

EPA = US Environmental Protection Agency

SM = "Standard Methods For The Examination Of Water And Wastewater"

Laboratory References:

TAL BUF = Eurofins TestAmerica, Buffalo, 10 Hazelwood Drive, Amherst, NY 14228-2298, TEL (716)691-2600

Sample Summary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-179132-1

Lab Sample ID	Client Sample ID	Matrix	Collected	Received	Asset ID
480-179132-1	INFLUENT	Water	12/08/20 10:15	12/09/20 08:00	
480-179132-2	EFFLUENT	Water	12/08/20 10:25	12/09/20 08:00	

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Phone: 716-691-2600 Fax: 716-691-7991

Chain of Custody Record

Albany

#224



Environment Testing
America

[illegible]

Ver. 01/16/2019

Login Sample Receipt Checklist

Client: New York State D.E.C.

Job Number: 480-179132-1

Login Number: 179132

List Source: Eurofins TestAmerica, Buffalo

List Number: 1

Creator: Yeager, Brian A

Question	Answer	Comment
Radioactivity either was not measured or, if measured, is at or below background	True	
The cooler's custody seal, if present, is intact.	True	
The cooler or samples do not appear to have been compromised or tampered with.	True	
Samples were received on ice.	True	
Cooler Temperature is acceptable.	True	
Cooler Temperature is recorded.	True	2.3 #1 ICE
COC is present.	True	
COC is filled out in ink and legible.	True	
COC is filled out with all pertinent information.	True	
Is the Field Sampler's name present on COC?	True	
There are no discrepancies between the sample IDs on the containers and the COC.	True	
Samples are received within Holding Time (Excluding tests with immediate HTs)..	True	
Sample containers have legible labels.	True	
Containers are not broken or leaking.	True	
Sample collection date/times are provided.	True	
Appropriate sample containers are used.	True	
Sample bottles are completely filled.	True	
Sample Preservation Verified	True	
There is sufficient vol. for all requested analyses, incl. any requested MS/MSDs	True	
VOA sample vials do not have headspace or bubble is <6mm (1/4") in diameter.	N/A	
If necessary, staff have been informed of any short hold time or quick TAT needs	True	
Multiphasic samples are not present.	True	
Samples do not require splitting or compositing.	True	
Sampling Company provided.	True	AZTECH
Samples received within 48 hours of sampling.	True	
Samples requiring field filtration have been filtered in the field.	True	
Chlorine Residual checked.	N/A	

Appendix C

Effluent Limitations and Monitoring Requirements

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MEMORANDUM

TO: David Harrington, PE, Chief, Remedial Section A, Bureau E
FROM: Percival Miller, DOW, Bureau of Water Permits
SUBJECT: Perfection Plating, Site # 4-01-037
DRAINAGE BASIN: Lower Hudson River
DATE: May 7, 2020

In response to your request dated April 27, 2020, attached please find effluent limitations and monitoring requirements for the above noted remediation discharge.

The DOW does not have any regulatory authority over a discharge from a State, PRP, or Federal Superfund Site. DER will be responsible for ensuring compliance with the attached effluent limitations and monitoring requirements, and approval of all engineering submissions. Footnote 1 identifies the appropriate DER Section Chief as the place to send all effluent results, engineering submissions, and modification requests. The Regional Water Engineer should be kept appraised of the status of this discharge and, in accordance with the attached criteria, receive a copy of the effluent results for informational purposes.

If you have any questions, please call me at (518) 402-8120.

Attachment (Effluent Limitations and Monitoring Requirements)

cc: Derek Thorsland, R4 RWE (via email, w/attach)
Brian Baker, Section Chief, DOW (via email, w/attach)
BWRM Section Chief, DOW (w/attach)

EFFLUENT LIMITATIONS AND MONITORING REQUIREMENTS

During the period beginning **May 1, 2020** and lasting until **April 30, 2025** the discharges from the wastewater treatment facility at **Latitude 42° 43' 24.11"**, **Longitude -73° 41' 40.58"**, via the Watervliet Storm Sewer to the Hudson River, **Water Index Number (WIN) H-224**, Class C; shall be limited and monitored by the operator as specified below:

Outfall Number and Parameter	Discharge Limitations		Units	Minimum Monitoring Requirements	
	Monthly Avg.	Daily Max		Measurement Frequency	Sample Type
Outfall 001 - Treated Remediation Discharge:					
Flow	Monitor	Monitor	GPD	Continuous	Recorder
pH (Range)	6.0 – 9.0		SU	Monthly	Grab
Total Suspended Solids	Monitor	50	mg/l	Monthly	Grab
Oil & Grease	Monitor	15	mg/l	Monthly	Grab
Cyanide, Amendable	Monitor	1.1	mg/l	Monthly	Grab
Arsenic, Total	Monitor	0.15	mg/l	Monthly	Grab
Cadmium, Total	Monitor	0.03	mg/l	Monthly	Grab
Chromium, Hexavalent	Monitor	2.7	mg/l	Monthly	Grab
Copper	Monitor	0.5	mg/l	Monthly	Grab
Chromium, Total	Monitor	0.5	mg/l	Monthly	Grab
Iron, Total	Monitor	4.0	mg/l	Monthly	Grab
Lead, Total	Monitor	0.4	mg/l	Monthly	Grab
Nickel, Total	Monitor	1.3	mg/l	Monthly	Grab
Selenium, Total	Monitor	0.07	mg/l	Monthly	Grab
Zinc, Total	Monitor	0.4	mg/l	Monthly	Grab
1,2-Dichloroethylene	Monitor	0.003	mg/l	Monthly	Grab
Vinyl Chloride	Monitor	0.005	mg/l	Monthly	Grab

Additional Conditions:

1. Discharge is not authorized until such time as an engineering submission showing the method of treatment is approved by the Department. The discharge rate may not exceed the effective or design treatment system capacity. All monitoring data, engineering submissions and modification requests must be submitted to:

David K. Harrington, PE, Chief
Division of Environmental Remediation, Remedial Section A – Bureau E
NYSDEC, 625 Broadway, Albany, New York 12233-7017, 518-402-9813.

With a copy sent to:

Regional Water Engineer, Region 4
1130 West Westcott Road
Schenectady, NY 12561
derek.thorsland@dec.ny.gov
518-357-2219

2. Only site generated wastewater is authorized for treatment and discharge.
3. Authorization to discharge is valid only for the period noted above but may be renewed if appropriate. A request for renewal must be received 6 months prior to the expiration date to allow for a review of monitoring data and reassessment of monitoring requirements.
4. Both concentration (mg/l or µg/l) and mass loadings (lbs/day) must be reported to the Department for all parameters except flow and pH.
5. Any use of corrosion/scale inhibitors, biocidal-type compounds, or other water treatment chemicals used in the treatment process must be approved by the department prior to use.
6. This discharge and administration of this discharge must comply with the substantive requirements of 6NYCRR Part 750.
7. Samples and measurements to comply with the monitoring requirements specified above shall be taken from the treatment system effluent, prior to discharge into the Hudson River.
8. The minimum measurement frequency for all parameters, except Flow, shall be monthly, following a period of 8 consecutive weekly sampling events showing no exceedance of the stated discharge limitations. If a discharge limit for any parameter is exceeded, all parameters are then to be measured again on a weekly basis; until no exceedances are shown for four (4) consecutive sampling events then monthly monitoring may be resumed.

Site Description

The site is a State Superfund Site, for which a copy of the DER Remedial Investigation (RI) report may be obtained from the DER Project Manager, at (518) 402-9903. This permit equivalent includes a discharge location and) latitude and longitude coordinates. A location map is attached to the permit.

The name, telephone number, and email address of the responsible DER project manager to contact if there are questions or the need to borrow a copy of the RI report are: Samantha Salotto, Environmental Engineer, at 518-402-9903, samantha.salotto@dec.ny.gov. The DER contact/address where compliance monitoring data is to be sent. Samantha Salotto, 625 Broadway, Albany, NY 12233-7017.

Treatment System

Contaminated groundwater collected in a trench is pumped by a submersible pump to an aerator, at an average flow rate of 2.60 GPM (3,744 GPD). Gravity flow from the aerator enters a plate iron filter, for removal of suspended solids and oxidized iron. From the iron filter the (gravity) water flow is to a 90-gallon retention tank, where pH is adjusted to between 4.5 to 5.0. Water from the acid adjustment tank is transferred by a centrifugal pump to the anion exchangers, at an average flow rate of 2.60 GPM. When there is a breakthrough of hexavalent chromium (Cr VI), the first anion exchanger is removed and a fresh exchanger unit is put in its place: this allows the former second unit to be the first flow unit followed by the original third and the freshly installed unit. From the anion exchangers the water flows to a 90-gallon retention tank, where the pH is adjusted to between 6.4-6.7. The water then flows under gravity to a storm water catch basin. Discharges will be continuous for the duration of the project.

Term of Remedial Action

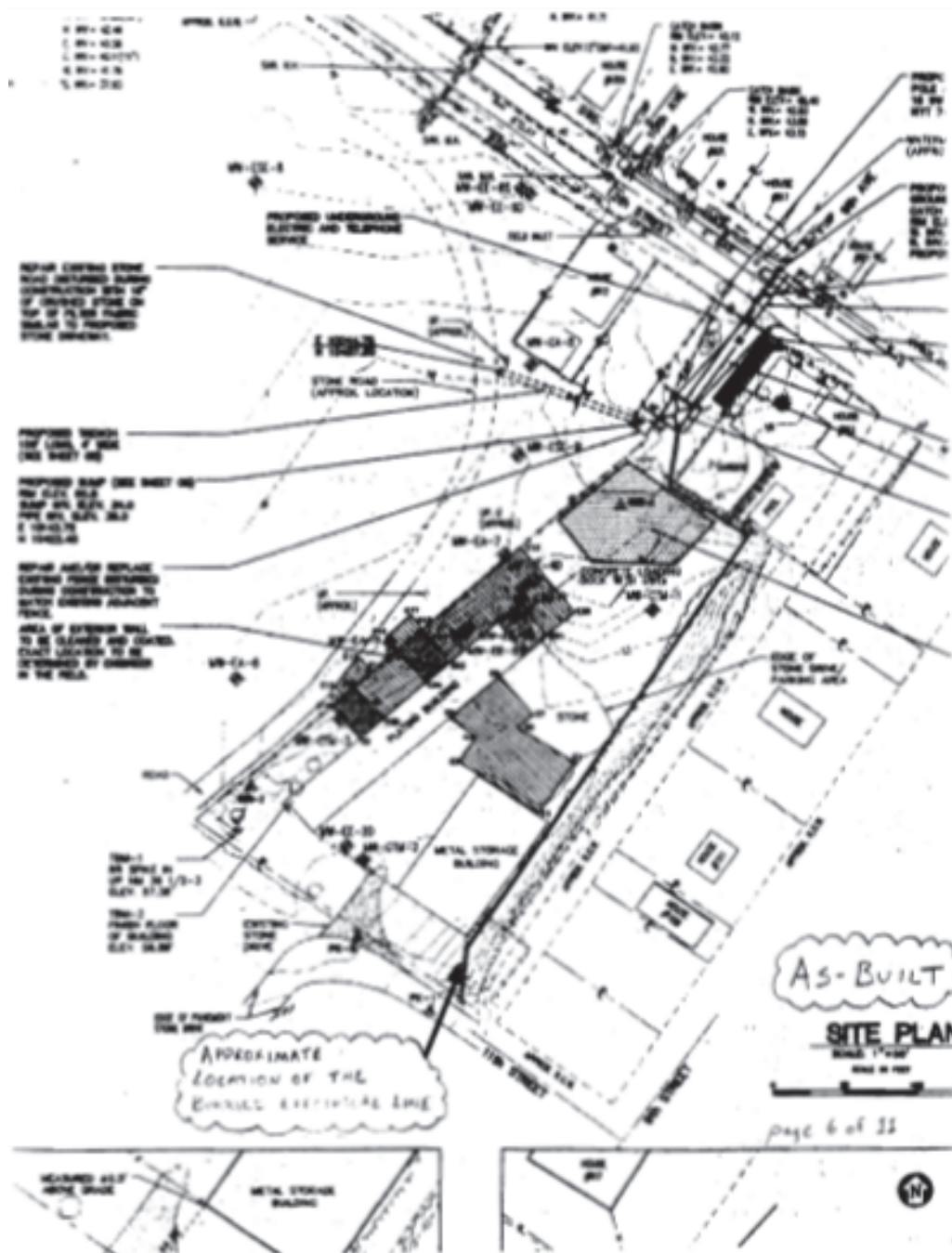
Source removal is planned for 2021. Treatment of the source at the Perfection Plating Site # 4-01-037 site is estimated to take 3-6 months. Groundwater monitoring will then continue afterwards, to evaluate effectiveness of the treatment, and to determine if continued operation of the treatment system will be necessary.

Perfection Plating Site # 4-01-037 – Discharge Location



Location - Perfection Plating Site No. 4-01-037

Perfection Plating – Site Plan



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Appendix D

Groundwater Laboratory Analytical Data

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ANALYTICAL REPORT

Eurofins TestAmerica, Buffalo
10 Hazelwood Drive
Amherst, NY 14228-2298
Tel: (716)691-2600

Laboratory Job ID: 480-177205-1

Client Project/Site: Perfection Plating #401037

For:

New York State D.E.C.
1115 Route 86
PO BOX 296
Ray Brook, New York 12977

Attn: Samantha Salotto



Authorized for release by:
11/6/2020 2:10:50 PM

Judy Stone, Senior Project Manager
(484)685-0868
Judy.Stone@Eurofinset.com

LINKS

Review your project
results through
TotalAccess

Have a Question?



Visit us at:

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This report has been electronically signed and authorized by the signatory. Electronic signature is intended to be the legally binding equivalent of a traditionally handwritten signature.

Results relate only to the items tested and the sample(s) as received by the laboratory.

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I certify that this data package is in compliance with the terms and conditions of the contract, both technically and for completeness, for other than the conditions detailed within the body of this report. Release of the data contained in this sample data package and in the electronic data deliverable has been authorized by the Laboratory Manager or his/her designee, as verified by the following signature.



Judy Stone
Senior Project Manager
11/6/2020 2:10:50 PM

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Definitions/Glossary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177205-1

Qualifiers

Metals

Qualifier	Qualifier Description
J	Result is less than the RL but greater than or equal to the MDL and the concentration is an approximate value.

General Chemistry

Qualifier	Qualifier Description
H	Sample was prepped or analyzed beyond the specified holding time
H3	Sample was received and analyzed past holding time.
J	Result is less than the RL but greater than or equal to the MDL and the concentration is an approximate value.

Glossary

Abbreviation	These commonly used abbreviations may or may not be present in this report.
□	Listed under the "D" column to designate that the result is reported on a dry weight basis
%R	Percent Recovery
CFL	Contains Free Liquid
CFU	Colony Forming Unit
CNF	Contains No Free Liquid
DER	Duplicate Error Ratio (normalized absolute difference)
Dil Fac	Dilution Factor
DL	Detection Limit (DoD/DOE)
DL, RA, RE, IN	Indicates a Dilution, Re-analysis, Re-extraction, or additional Initial metals/anion analysis of the sample
DLC	Decision Level Concentration (Radiochemistry)
EDL	Estimated Detection Limit (Dioxin)
LOD	Limit of Detection (DoD/DOE)
LOQ	Limit of Quantitation (DoD/DOE)
MCL	EPA recommended "Maximum Contaminant Level"
MDA	Minimum Detectable Activity (Radiochemistry)
MDC	Minimum Detectable Concentration (Radiochemistry)
MDL	Method Detection Limit
ML	Minimum Level (Dioxin)
MPN	Most Probable Number
MQL	Method Quantitation Limit
NC	Not Calculated
ND	Not Detected at the reporting limit (or MDL or EDL if shown)
NEG	Negative / Absent
POS	Positive / Present
PQL	Practical Quantitation Limit
PRES	Presumptive
QC	Quality Control
RER	Relative Error Ratio (Radiochemistry)
RL	Reporting Limit or Requested Limit (Radiochemistry)
RPD	Relative Percent Difference, a measure of the relative difference between two points
TEF	Toxicity Equivalent Factor (Dioxin)
TEQ	Toxicity Equivalent Quotient (Dioxin)
TNTC	Too Numerous To Count

Case Narrative

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177205-1

Job ID: 480-177205-1

Laboratory: Eurofins TestAmerica, Buffalo

Narrative

Job Narrative
480-177205-1

Receipt

The samples were received on 10/28/2020 10:00 AM; the samples arrived in good condition, and where required, properly preserved and on ice. The temperature of the cooler at receipt was 2.5° C.

Metals

No analytical or quality issues were noted, other than those described in the Definitions/Glossary page.

General Chemistry

Methods 7196A, SM 3500 CR B: The following sample was received outside of holding time: 401037-DUP-1120 (480-177205-11).

No additional analytical or quality issues were noted, other than those described above or in the Definitions/Glossary page.

Detection Summary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177205-1

Client Sample ID: 401037-MW-CMT-1

Lab Sample ID: 480-177205-1

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Chromium, hexavalent	0.0052	J	0.010	0.0050	mg/L	1		SM 3500 CR B	Total/NA

Client Sample ID: 401037-MW-CMT-3

Lab Sample ID: 480-177205-2

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Chromium	0.0043		0.0040	0.0010	mg/L	1		200.7 Rev 4.4	Total/NA

Client Sample ID: 401037-MW-EE-4S

Lab Sample ID: 480-177205-3

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Chromium	0.054		0.0040	0.0010	mg/L	1		200.7 Rev 4.4	Total/NA
Chromium, hexavalent	0.057		0.010	0.0050	mg/L	1		SM 3500 CR B	Total/NA

Client Sample ID: 401037-MW-EE-5S

Lab Sample ID: 480-177205-4

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Chromium	10.1		0.0080	0.0020	mg/L	2		200.7 Rev 4.4	Total/NA
Chromium, hexavalent	19.6		10.0	5.0	mg/L	1000		SM 3500 CR B	Total/NA

Client Sample ID: 401037-MW-EA-7R

Lab Sample ID: 480-177205-5

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Chromium	1.1		0.0040	0.0010	mg/L	1		200.7 Rev 4.4	Total/NA
Chromium, hexavalent	0.95		0.050	0.025	mg/L	5		SM 3500 CR B	Total/NA

Client Sample ID: 401037-MW-ESE-9R

Lab Sample ID: 480-177205-6

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Chromium	0.29		0.0040	0.0010	mg/L	1		200.7 Rev 4.4	Total/NA
Chromium, hexavalent	0.016		0.010	0.0050	mg/L	1		SM 3500 CR B	Total/NA

Client Sample ID: 401037-MW-EA-10S

Lab Sample ID: 480-177205-7

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Chromium	0.026		0.0040	0.0010	mg/L	1		200.7 Rev 4.4	Total/NA

Client Sample ID: 401037-MW-EA-11S

Lab Sample ID: 480-177205-8

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Chromium	0.15		0.0040	0.0010	mg/L	1		200.7 Rev 4.4	Total/NA

Client Sample ID: 401037-MW-EA-12S

Lab Sample ID: 480-177205-9

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Chromium	0.0056		0.0040	0.0010	mg/L	1		200.7 Rev 4.4	Total/NA

Client Sample ID: 401037-MW-EA-13S

Lab Sample ID: 480-177205-10

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Chromium	0.0021	J	0.0040	0.0010	mg/L	1		200.7 Rev 4.4	Total/NA

Client Sample ID: 401037-DUP-1120

Lab Sample ID: 480-177205-11

Analyte	Result	Qualifier	RL	MDL	Unit	Dil Fac	D	Method	Prep Type
Chromium	0.0027	J	0.0040	0.0010	mg/L	1		200.7 Rev 4.4	Total/NA

This Detection Summary does not include radiochemical test results.

Eurofins TestAmerica, Buffalo

Client Sample Results

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177205-1

Client Sample ID: 401037-MW-CMT-1

Lab Sample ID: 480-177205-1

Date Collected: 10/27/20 15:20

Matrix: Water

Date Received: 10/28/20 10:00

Method: 200.7 Rev 4.4 - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium	ND		0.0040	0.0010	mg/L		10/30/20 16:15	11/02/20 20:45	1

General Chemistry

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	0.0052	J	0.010	0.0050	mg/L			10/28/20 10:46	1

Client Sample ID: 401037-MW-CMT-3

Lab Sample ID: 480-177205-2

Date Collected: 10/27/20 15:41

Matrix: Water

Date Received: 10/28/20 10:00

Method: 200.7 Rev 4.4 - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium	0.0043		0.0040	0.0010	mg/L		10/30/20 16:15	11/02/20 20:49	1

General Chemistry

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	ND		0.010	0.0050	mg/L			10/28/20 10:46	1

Client Sample ID: 401037-MW-EE-4S

Lab Sample ID: 480-177205-3

Date Collected: 10/27/20 15:05

Matrix: Water

Date Received: 10/28/20 10:00

Method: 200.7 Rev 4.4 - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium	0.054		0.0040	0.0010	mg/L		10/30/20 16:15	11/02/20 20:52	1

General Chemistry

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	0.057		0.010	0.0050	mg/L			10/28/20 10:46	1

Client Sample ID: 401037-MW-EE-5S

Lab Sample ID: 480-177205-4

Date Collected: 10/27/20 15:50

Matrix: Water

Date Received: 10/28/20 10:00

Method: 200.7 Rev 4.4 - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium	10.1		0.0080	0.0020	mg/L		10/30/20 16:15	11/03/20 11:59	2

General Chemistry

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	19.6		10.0	5.0	mg/L			10/28/20 10:46	1000

Client Sample ID: 401037-MW-EA-7R

Lab Sample ID: 480-177205-5

Date Collected: 10/27/20 14:30

Matrix: Water

Date Received: 10/28/20 10:00

Method: 200.7 Rev 4.4 - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium	1.1		0.0040	0.0010	mg/L		10/30/20 16:15	11/02/20 21:11	1

General Chemistry

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	0.95		0.050	0.025	mg/L			10/28/20 10:46	5

Eurofins TestAmerica, Buffalo

Client Sample Results

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177205-1

Client Sample ID: 401037-MW-ESE-9R

Lab Sample ID: 480-177205-6

Date Collected: 10/27/20 14:58

Matrix: Water

Date Received: 10/28/20 10:00

Method: 200.7 Rev 4.4 - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium	0.29		0.0040	0.0010	mg/L		10/30/20 16:15	11/02/20 21:15	1

General Chemistry

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	0.016		0.010	0.0050	mg/L			10/28/20 10:46	1

Client Sample ID: 401037-MW-EA-10S

Lab Sample ID: 480-177205-7

Date Collected: 10/27/20 14:55

Matrix: Water

Date Received: 10/28/20 10:00

Method: 200.7 Rev 4.4 - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium	0.026		0.0040	0.0010	mg/L		10/30/20 16:15	11/02/20 21:18	1

General Chemistry

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	ND		0.010	0.0050	mg/L			10/28/20 10:46	1

Client Sample ID: 401037-MW-EA-11S

Lab Sample ID: 480-177205-8

Date Collected: 10/27/20 13:47

Matrix: Water

Date Received: 10/28/20 10:00

Method: 200.7 Rev 4.4 - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium	0.15		0.0040	0.0010	mg/L		10/30/20 16:15	11/02/20 21:22	1

General Chemistry

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	ND		0.010	0.0050	mg/L			10/28/20 10:46	1

Client Sample ID: 401037-MW-EA-12S

Lab Sample ID: 480-177205-9

Date Collected: 10/27/20 14:12

Matrix: Water

Date Received: 10/28/20 10:00

Method: 200.7 Rev 4.4 - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium	0.0056		0.0040	0.0010	mg/L		10/30/20 16:15	11/02/20 21:26	1

General Chemistry

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	ND		0.010	0.0050	mg/L			10/28/20 10:46	1

Client Sample ID: 401037-MW-EA-13S

Lab Sample ID: 480-177205-10

Date Collected: 10/27/20 15:30

Matrix: Water

Date Received: 10/28/20 10:00

Method: 200.7 Rev 4.4 - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium	0.0021	J	0.0040	0.0010	mg/L		10/30/20 16:15	11/02/20 21:55	1

General Chemistry

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	ND		0.010	0.0050	mg/L			10/28/20 10:46	1

Eurofins TestAmerica, Buffalo

Client Sample Results

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177205-1

Client Sample ID: 401037-DUP-1120

Lab Sample ID: 480-177205-11

Date Collected: 10/27/20 00:00

Matrix: Water

Date Received: 10/28/20 10:00

Method: 200.7 Rev 4.4 - Metals (ICP)

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium	0.0027	J	0.0040	0.0010	mg/L		10/30/20 16:15	11/02/20 21:59	1

General Chemistry

Analyte	Result	Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	ND	H H3	0.010	0.0050	mg/L			10/28/20 10:46	1

QC Sample Results

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177205-1

Method: 200.7 Rev 4.4 - Metals (ICP)

Lab Sample ID: MB 480-556722/1-A
Matrix: Water
Analysis Batch: 557090

Client Sample ID: Method Blank
Prep Type: Total/NA
Prep Batch: 556722

Analyte	MB Result	MB Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium	ND		0.0040	0.0010	mg/L		10/30/20 16:15	11/02/20 20:38	1

Lab Sample ID: LCS 480-556722/2-A
Matrix: Water
Analysis Batch: 557090

Client Sample ID: Lab Control Sample
Prep Type: Total/NA
Prep Batch: 556722

Analyte	Spike Added	LCS Result	LCS Qualifier	Unit	D	%Rec	%Rec. Limits
Chromium	0.200	0.215		mg/L		107	85 - 115

Lab Sample ID: 480-177205-9 MS
Matrix: Water
Analysis Batch: 557090

Client Sample ID: 401037-MW-EA-12S
Prep Type: Total/NA
Prep Batch: 556722

Analyte	Sample Result	Sample Qualifier	Spike Added	MS Result	MS Qualifier	Unit	D	%Rec	%Rec. Limits
Chromium	0.0056		0.200	0.235		mg/L		115	70 - 130

Lab Sample ID: 480-177205-9 MSD
Matrix: Water
Analysis Batch: 557090

Client Sample ID: 401037-MW-EA-12S
Prep Type: Total/NA
Prep Batch: 556722

Analyte	Sample Result	Sample Qualifier	Spike Added	MSD Result	MSD Qualifier	Unit	D	%Rec	%Rec. Limits	RPD	RPD Limit
Chromium	0.0056		0.200	0.210		mg/L		102	70 - 130	11	20

Method: SM 3500 CR B - Chromium, Hexavalent

Lab Sample ID: MB 480-556315/27
Matrix: Water
Analysis Batch: 556315

Client Sample ID: Method Blank
Prep Type: Total/NA

Analyte	MB Result	MB Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	ND		0.010	0.0050	mg/L			10/28/20 10:46	1

Lab Sample ID: MB 480-556315/3
Matrix: Water
Analysis Batch: 556315

Client Sample ID: Method Blank
Prep Type: Total/NA

Analyte	MB Result	MB Qualifier	RL	MDL	Unit	D	Prepared	Analyzed	Dil Fac
Chromium, hexavalent	ND		0.010	0.0050	mg/L			10/28/20 10:46	1

Lab Sample ID: LCS 480-556315/28
Matrix: Water
Analysis Batch: 556315

Client Sample ID: Lab Control Sample
Prep Type: Total/NA

Analyte	Spike Added	LCS Result	LCS Qualifier	Unit	D	%Rec	%Rec. Limits
Chromium, hexavalent	0.0500	0.0509		mg/L		102	85 - 115

QC Sample Results

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177205-1

Method: SM 3500 CR B - Chromium, Hexavalent (Continued)

Lab Sample ID: LCS 480-556315/4

Matrix: Water

Analysis Batch: 556315

Client Sample ID: Lab Control Sample

Prep Type: Total/NA

Analyte	Spike Added	LCS Result	LCS Qualifier	Unit	D	%Rec	%Rec. Limits
Chromium, hexavalent	0.0500	0.0497		mg/L		99	85 - 115

Lab Sample ID: 480-177205-9 MS

Matrix: Water

Analysis Batch: 556315

Client Sample ID: 401037-MW-EA-12S

Prep Type: Total/NA

Analyte	Sample Result	Sample Qualifier	Spike Added	MS Result	MS Qualifier	Unit	D	%Rec	%Rec. Limits
Chromium, hexavalent	ND		0.0500	0.0521		mg/L		104	85 - 115

Lab Sample ID: 480-177205-9 MSD

Matrix: Water

Analysis Batch: 556315

Client Sample ID: 401037-MW-EA-12S

Prep Type: Total/NA

Analyte	Sample Result	Sample Qualifier	Spike Added	MSD Result	MSD Qualifier	Unit	D	%Rec	%Rec. Limits	RPD	RPD Limit
Chromium, hexavalent	ND		0.0500	0.0497		mg/L		99	85 - 115	5	15

Lab Sample ID: 480-177205-11 MS

Matrix: Water

Analysis Batch: 556315

Client Sample ID: 401037-DUP-1120

Prep Type: Total/NA

Analyte	Sample Result	Sample Qualifier	Spike Added	MS Result	MS Qualifier	Unit	D	%Rec	%Rec. Limits
Chromium, hexavalent	ND	H H3	0.0500	0.0449		mg/L		90	85 - 115

Lab Sample ID: 480-177205-8 DU

Matrix: Water

Analysis Batch: 556315

Client Sample ID: 401037-MW-EA-11S

Prep Type: Total/NA

Analyte	Sample Result	Sample Qualifier	DU Result	DU Qualifier	Unit	D	RPD	RPD Limit
Chromium, hexavalent	ND		ND		mg/L		NC	15

QC Association Summary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177205-1

Metals

Prep Batch: 556722

Lab Sample ID	Client Sample ID	Prep Type	Matrix	Method	Prep Batch
480-177205-1	401037-MW-CMT-1	Total/NA	Water	200.7	
480-177205-2	401037-MW-CMT-3	Total/NA	Water	200.7	
480-177205-3	401037-MW-EE-4S	Total/NA	Water	200.7	
480-177205-4	401037-MW-EE-5S	Total/NA	Water	200.7	
480-177205-5	401037-MW-EA-7R	Total/NA	Water	200.7	
480-177205-6	401037-MW-ESE-9R	Total/NA	Water	200.7	
480-177205-7	401037-MW-EA-10S	Total/NA	Water	200.7	
480-177205-8	401037-MW-EA-11S	Total/NA	Water	200.7	
480-177205-9	401037-MW-EA-12S	Total/NA	Water	200.7	
480-177205-10	401037-MW-EA-13S	Total/NA	Water	200.7	
480-177205-11	401037-DUP-1120	Total/NA	Water	200.7	
MB 480-556722/1-A	Method Blank	Total/NA	Water	200.7	
LCS 480-556722/2-A	Lab Control Sample	Total/NA	Water	200.7	
480-177205-9 MS	401037-MW-EA-12S	Total/NA	Water	200.7	
480-177205-9 MSD	401037-MW-EA-12S	Total/NA	Water	200.7	

Analysis Batch: 557090

Lab Sample ID	Client Sample ID	Prep Type	Matrix	Method	Prep Batch
480-177205-1	401037-MW-CMT-1	Total/NA	Water	200.7 Rev 4.4	556722
480-177205-2	401037-MW-CMT-3	Total/NA	Water	200.7 Rev 4.4	556722
480-177205-3	401037-MW-EE-4S	Total/NA	Water	200.7 Rev 4.4	556722
480-177205-5	401037-MW-EA-7R	Total/NA	Water	200.7 Rev 4.4	556722
480-177205-6	401037-MW-ESE-9R	Total/NA	Water	200.7 Rev 4.4	556722
480-177205-7	401037-MW-EA-10S	Total/NA	Water	200.7 Rev 4.4	556722
480-177205-8	401037-MW-EA-11S	Total/NA	Water	200.7 Rev 4.4	556722
480-177205-9	401037-MW-EA-12S	Total/NA	Water	200.7 Rev 4.4	556722
480-177205-10	401037-MW-EA-13S	Total/NA	Water	200.7 Rev 4.4	556722
480-177205-11	401037-DUP-1120	Total/NA	Water	200.7 Rev 4.4	556722
MB 480-556722/1-A	Method Blank	Total/NA	Water	200.7 Rev 4.4	556722
LCS 480-556722/2-A	Lab Control Sample	Total/NA	Water	200.7 Rev 4.4	556722
480-177205-9 MS	401037-MW-EA-12S	Total/NA	Water	200.7 Rev 4.4	556722
480-177205-9 MSD	401037-MW-EA-12S	Total/NA	Water	200.7 Rev 4.4	556722

Analysis Batch: 557158

Lab Sample ID	Client Sample ID	Prep Type	Matrix	Method	Prep Batch
480-177205-4	401037-MW-EE-5S	Total/NA	Water	200.7 Rev 4.4	556722

General Chemistry

Analysis Batch: 556315

Lab Sample ID	Client Sample ID	Prep Type	Matrix	Method	Prep Batch
480-177205-1	401037-MW-CMT-1	Total/NA	Water	SM 3500 CR B	
480-177205-2	401037-MW-CMT-3	Total/NA	Water	SM 3500 CR B	
480-177205-3	401037-MW-EE-4S	Total/NA	Water	SM 3500 CR B	
480-177205-4	401037-MW-EE-5S	Total/NA	Water	SM 3500 CR B	
480-177205-5	401037-MW-EA-7R	Total/NA	Water	SM 3500 CR B	
480-177205-6	401037-MW-ESE-9R	Total/NA	Water	SM 3500 CR B	
480-177205-7	401037-MW-EA-10S	Total/NA	Water	SM 3500 CR B	
480-177205-8	401037-MW-EA-11S	Total/NA	Water	SM 3500 CR B	
480-177205-9	401037-MW-EA-12S	Total/NA	Water	SM 3500 CR B	
480-177205-10	401037-MW-EA-13S	Total/NA	Water	SM 3500 CR B	

Eurofins TestAmerica, Buffalo

QC Association Summary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177205-1

General Chemistry (Continued)

Analysis Batch: 556315 (Continued)

Lab Sample ID	Client Sample ID	Prep Type	Matrix	Method	Prep Batch
480-177205-11	401037-DUP-1120	Total/NA	Water	SM 3500 CR B	
MB 480-556315/27	Method Blank	Total/NA	Water	SM 3500 CR B	
MB 480-556315/3	Method Blank	Total/NA	Water	SM 3500 CR B	
LCS 480-556315/28	Lab Control Sample	Total/NA	Water	SM 3500 CR B	
LCS 480-556315/4	Lab Control Sample	Total/NA	Water	SM 3500 CR B	
480-177205-9 MS	401037-MW-EA-12S	Total/NA	Water	SM 3500 CR B	
480-177205-9 MSD	401037-MW-EA-12S	Total/NA	Water	SM 3500 CR B	
480-177205-11 MS	401037-DUP-1120	Total/NA	Water	SM 3500 CR B	
480-177205-8 DU	401037-MW-EA-11S	Total/NA	Water	SM 3500 CR B	

Lab Chronicle

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177205-1

Client Sample ID: 401037-MW-CMT-1

Lab Sample ID: 480-177205-1

Date Collected: 10/27/20 15:20

Matrix: Water

Date Received: 10/28/20 10:00

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	200.7			556722	10/30/20 16:15	ASD	TAL BUF
Total/NA	Analysis	200.7 Rev 4.4		1	557090	11/02/20 20:45	LMH	TAL BUF
Total/NA	Analysis	SM 3500 CR B		1	556315	10/28/20 10:46	CRK	TAL BUF

Client Sample ID: 401037-MW-CMT-3

Lab Sample ID: 480-177205-2

Date Collected: 10/27/20 15:41

Matrix: Water

Date Received: 10/28/20 10:00

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	200.7			556722	10/30/20 16:15	ASD	TAL BUF
Total/NA	Analysis	200.7 Rev 4.4		1	557090	11/02/20 20:49	LMH	TAL BUF
Total/NA	Analysis	SM 3500 CR B		1	556315	10/28/20 10:46	CRK	TAL BUF

Client Sample ID: 401037-MW-EE-4S

Lab Sample ID: 480-177205-3

Date Collected: 10/27/20 15:05

Matrix: Water

Date Received: 10/28/20 10:00

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	200.7			556722	10/30/20 16:15	ASD	TAL BUF
Total/NA	Analysis	200.7 Rev 4.4		1	557090	11/02/20 20:52	LMH	TAL BUF
Total/NA	Analysis	SM 3500 CR B		1	556315	10/28/20 10:46	CRK	TAL BUF

Client Sample ID: 401037-MW-EE-5S

Lab Sample ID: 480-177205-4

Date Collected: 10/27/20 15:50

Matrix: Water

Date Received: 10/28/20 10:00

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	200.7			556722	10/30/20 16:15	ASD	TAL BUF
Total/NA	Analysis	200.7 Rev 4.4		2	557158	11/03/20 11:59	LMH	TAL BUF
Total/NA	Analysis	SM 3500 CR B		1000	556315	10/28/20 10:46	CRK	TAL BUF

Client Sample ID: 401037-MW-EA-7R

Lab Sample ID: 480-177205-5

Date Collected: 10/27/20 14:30

Matrix: Water

Date Received: 10/28/20 10:00

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	200.7			556722	10/30/20 16:15	ASD	TAL BUF
Total/NA	Analysis	200.7 Rev 4.4		1	557090	11/02/20 21:11	LMH	TAL BUF
Total/NA	Analysis	SM 3500 CR B		5	556315	10/28/20 10:46	CRK	TAL BUF

Lab Chronicle

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177205-1

Client Sample ID: 401037-MW-ESE-9R

Lab Sample ID: 480-177205-6

Date Collected: 10/27/20 14:58

Matrix: Water

Date Received: 10/28/20 10:00

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	200.7			556722	10/30/20 16:15	ASD	TAL BUF
Total/NA	Analysis	200.7 Rev 4.4		1	557090	11/02/20 21:15	LMH	TAL BUF
Total/NA	Analysis	SM 3500 CR B		1	556315	10/28/20 10:46	CRK	TAL BUF

Client Sample ID: 401037-MW-EA-10S

Lab Sample ID: 480-177205-7

Date Collected: 10/27/20 14:55

Matrix: Water

Date Received: 10/28/20 10:00

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	200.7			556722	10/30/20 16:15	ASD	TAL BUF
Total/NA	Analysis	200.7 Rev 4.4		1	557090	11/02/20 21:18	LMH	TAL BUF
Total/NA	Analysis	SM 3500 CR B		1	556315	10/28/20 10:46	CRK	TAL BUF

Client Sample ID: 401037-MW-EA-11S

Lab Sample ID: 480-177205-8

Date Collected: 10/27/20 13:47

Matrix: Water

Date Received: 10/28/20 10:00

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	200.7			556722	10/30/20 16:15	ASD	TAL BUF
Total/NA	Analysis	200.7 Rev 4.4		1	557090	11/02/20 21:22	LMH	TAL BUF
Total/NA	Analysis	SM 3500 CR B		1	556315	10/28/20 10:46	CRK	TAL BUF

Client Sample ID: 401037-MW-EA-12S

Lab Sample ID: 480-177205-9

Date Collected: 10/27/20 14:12

Matrix: Water

Date Received: 10/28/20 10:00

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	200.7			556722	10/30/20 16:15	ASD	TAL BUF
Total/NA	Analysis	200.7 Rev 4.4		1	557090	11/02/20 21:26	LMH	TAL BUF
Total/NA	Analysis	SM 3500 CR B		1	556315	10/28/20 10:46	CRK	TAL BUF

Client Sample ID: 401037-MW-EA-13S

Lab Sample ID: 480-177205-10

Date Collected: 10/27/20 15:30

Matrix: Water

Date Received: 10/28/20 10:00

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	200.7			556722	10/30/20 16:15	ASD	TAL BUF
Total/NA	Analysis	200.7 Rev 4.4		1	557090	11/02/20 21:55	LMH	TAL BUF
Total/NA	Analysis	SM 3500 CR B		1	556315	10/28/20 10:46	CRK	TAL BUF

Lab Chronicle

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177205-1

Client Sample ID: 401037-DUP-1120

Lab Sample ID: 480-177205-11

Date Collected: 10/27/20 00:00

Matrix: Water

Date Received: 10/28/20 10:00

Prep Type	Batch Type	Batch Method	Run	Dilution Factor	Batch Number	Prepared or Analyzed	Analyst	Lab
Total/NA	Prep	200.7			556722	10/30/20 16:15	ASD	TAL BUF
Total/NA	Analysis	200.7 Rev 4.4		1	557090	11/02/20 21:59	LMH	TAL BUF
Total/NA	Analysis	SM 3500 CR B		1	556315	10/28/20 10:46	CRK	TAL BUF

Laboratory References:

TAL BUF = Eurofins TestAmerica, Buffalo, 10 Hazelwood Drive, Amherst, NY 14228-2298, TEL (716)691-2600

Accreditation/Certification Summary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177205-1

Laboratory: Eurofins TestAmerica, Buffalo

The accreditations/certifications listed below are applicable to this report.

Authority	Program	Identification Number	Expiration Date
New York	NELAP	10026	04-01-21

1
2
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Method Summary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177205-1

Method	Method Description	Protocol	Laboratory
200.7 Rev 4.4	Metals (ICP)	EPA	TAL BUF
SM 3500 CR B	Chromium, Hexavalent	SM	TAL BUF
200.7	Preparation, Total Metals	EPA	TAL BUF

Protocol References:

EPA = US Environmental Protection Agency

SM = "Standard Methods For The Examination Of Water And Wastewater"

Laboratory References:

TAL BUF = Eurofins TestAmerica, Buffalo, 10 Hazelwood Drive, Amherst, NY 14228-2298, TEL (716)691-2600

Sample Summary

Client: New York State D.E.C.
Project/Site: Perfection Plating #401037

Job ID: 480-177205-1

Lab Sample ID	Client Sample ID	Matrix	Collected	Received	Asset ID
480-177205-1	401037-MW-CMT-1	Water	10/27/20 15:20	10/28/20 10:00	
480-177205-2	401037-MW-CMT-3	Water	10/27/20 15:41	10/28/20 10:00	
480-177205-3	401037-MW-EE-4S	Water	10/27/20 15:05	10/28/20 10:00	
480-177205-4	401037-MW-EE-5S	Water	10/27/20 15:50	10/28/20 10:00	
480-177205-5	401037-MW-EA-7R	Water	10/27/20 14:30	10/28/20 10:00	
480-177205-6	401037-MW-ESE-9R	Water	10/27/20 14:58	10/28/20 10:00	
480-177205-7	401037-MW-EA-10S	Water	10/27/20 14:55	10/28/20 10:00	
480-177205-8	401037-MW-EA-11S	Water	10/27/20 13:47	10/28/20 10:00	
480-177205-9	401037-MW-EA-12S	Water	10/27/20 14:12	10/28/20 10:00	
480-177205-10	401037-MW-EA-13S	Water	10/27/20 15:30	10/28/20 10:00	
480-177205-11	401037-DUP-1120	Water	10/27/20 00:00	10/28/20 10:00	

Chain of Custody Record



Regulatory Program: ☐ DW ☐ NPDES ☐ RCRA ☐ Other:

TestAmerica Laboratories, Inc. db/a Eurofins TestAmerica

Project Manager: Emily Cunningham Email: ecunning@eurofins.com Tel/Fax: 800 304 3837		Site Contact: Emily Cunningham Lab Contact: Emily Cunningham		Date: 10/27/2020 Carrier: FedEx		COC No.: _____ of _____ COCs					
Analysis Turnaround Time <input checked="" type="checkbox"/> CALENDAR DAYS <input type="checkbox"/> WORKING DAYS TAT if different from Below _____ <input checked="" type="checkbox"/> 2 weeks <input type="checkbox"/> 1 week <input type="checkbox"/> 2 days <input type="checkbox"/> 1 day		For Lab Use Only: Walk-in Client: _____ Lab Sampling: _____ Job / SDG No.: _____		Sample Specific Notes: 480-177205 Chain of Custody							
Sample Identification		Sample Date		Sample Time		Sample Type (C=Comp, G=Grab)		Matrix		# of Cont.	
401037-MW-CMT-1		10/27/20		1520		G		G		2	
401037-MW-CMT-3		10/27/20		1541		G		G		2	
401037-MW-EE-415				1555							
401037-MW-EE-55				1550							
401037-MW-EE-712				1430							
401037-MW-EE-912				1458							
401037-MW-EE-101				1455							
401037-MW-EE-115				1347							
401037-MW-EE-125				1412							
401037-MW-EE-135				1530							
401037-DUP-1120				-							
Preservation Used: 1= Ice, 2= HCl; 3= H2SO4; 4= HNO3; 5= NaOH; 6= Other											
Possible Hazard Identification: Are any samples from a listed EPA Hazardous Waste? Please List any EPA Waste Codes for the sample in the Comments Section if the lab is to dispose of the sample.											
<input type="checkbox"/> Non-Hazard <input type="checkbox"/> Flammable <input type="checkbox"/> Skin Irritant <input type="checkbox"/> Poison B <input type="checkbox"/> Unknown											
Special Instructions/QC Requirements & Comments:											
Custody Seals Intact: <input type="checkbox"/> Yes <input type="checkbox"/> No		Custody Seal No.:		Cooler Temp. (°C): Obs'd: _____		Corr'd: _____		Therm ID No.: _____		Date/Time: 10/28/20 1000	
Relinquished by: Emily Cunningham		Company: EA		Received by: Emily Cunningham		Company: 1713		Date/Time: 10/28/20 1000		Date/Time:	
Relinquished by:		Company:		Received by:		Company:		Date/Time:		Date/Time:	
Relinquished by:		Company:		Received in Laboratory by:		Company:		Date/Time:		Date/Time:	

Login Sample Receipt Checklist

Client: New York State D.E.C.

Job Number: 480-177205-1

Login Number: 177205

List Source: Eurofins TestAmerica, Buffalo

List Number: 1

Creator: Wallace, Cameron

Question	Answer	Comment
Radioactivity either was not measured or, if measured, is at or below background	True	
The cooler's custody seal, if present, is intact.	True	
The cooler or samples do not appear to have been compromised or tampered with.	True	
Samples were received on ice.	True	
Cooler Temperature is acceptable.	True	
Cooler Temperature is recorded.	True	
COC is present.	True	
COC is filled out in ink and legible.	True	
COC is filled out with all pertinent information.	True	
Is the Field Sampler's name present on COC?	True	
There are no discrepancies between the sample IDs on the containers and the COC.	True	
Samples are received within Holding Time (Excluding tests with immediate HTs)..	True	
Sample containers have legible labels.	True	
Containers are not broken or leaking.	True	
Sample collection date/times are provided.	True	
Appropriate sample containers are used.	True	
Sample bottles are completely filled.	True	
Sample Preservation Verified	True	
There is sufficient vol. for all requested analyses, incl. any requested MS/MSDs	True	
VOA sample vials do not have headspace or bubble is <6mm (1/4") in diameter.	N/A	
If necessary, staff have been informed of any short hold time or quick TAT needs	True	
Multiphasic samples are not present.	True	
Samples do not require splitting or compositing.	True	
Sampling Company provided.	True	
Samples received within 48 hours of sampling.	True	
Samples requiring field filtration have been filtered in the field.	True	
Chlorine Residual checked.	N/A	

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Appendix E

Daily Field Reports and Entry/Exit Logs

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Entry/Exit Log with COVID-19 Acknowledgement

Project Name: Perfection Plating

Project #: 401037

New York State Department of Environmental Conservation's (DEC) objective is to provide a safe and healthy workplace. In response to COVID-19, DEC is prohibiting access to our work areas by those who pose an elevated risk of spreading COVID-19. By completing this site Entry/Exit log, you acknowledge your understanding of this policy and confirm that your health and travel history is NOT in one of the prohibited access groups listed below, and to the best of your knowledge, you do not pose an elevated risk of transmitting COVID-19 to others. Please leave the site immediately and follow recommendations from public health agencies and your healthcare provider if you fall into one of the prohibited access groups listed below:

- You are experiencing flu-like symptoms including but not limited to fever, chills, cough, sore throat, diarrhea, vomiting, runny/stuffy nose, muscle or body aches, headaches, fatigue.
- You have traveled to CDC-restricted destinations in the last 2 weeks including China, South Korea, Iran, United Kingdom & Ireland, all European Union countries, Switzerland and regions within the U.S. for which public health agencies have prohibited travel.
- You had direct contact with a person diagnosed with COVID-19 or suspected of having COVID-19 during the last 2 weeks.

Name	Initials	Affiliation	Date	Time In	Time Out
Frank Zabel	FZ	Aztech	9/15/20	8:00	
Jeff Munn	Jm	Aztech	9/15/20	8:00	
Frank Zabel	FZ	Aztech	9/18/20	8:00	
John STUTZKE	J.S.	Aztech	9/18/20	8:00	
Frank Zabel	FZ	Aztech	9/22/20	8:00	
Jon Brooks	JB	Aztech	9/22/20	8:00	
Frank Zabel	FZ	Aztech	9/25/20	8:00	
Jon Brooks	JB	Aztech	9/25/20	8:00	
Austin Armbruster	AA	Aztech	9/29/2020	8:00	
Frank Zabel	FZ	Aztech	9/29/20	8:00	
Frank Zabel	FZ	Aztech	10/2/20	8:00	
John STUTZKE	J.S.	Aztech	10/2/20	8:00	
GARRETT COLLEEN	GC	Aztech	10/6/20	8:00	
Frank Zabel	FZ	Aztech	10/6/20	8:00	
Frank Zabel	FZ	Aztech	10/9/20	8:00	
Zachary Condon	ZC	Aztech	10/9/20	8:00	



Entry/Exit Log with COVID-19 Acknowledgement

Project Name: Perfection Plating

Project #: 401037

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- You have traveled to CDC-restricted destinations in the last 2 weeks including China, South Korea, Iran, United Kingdom & Ireland, all European Union countries, Switzerland and regions within the U.S. for which public health agencies have prohibited travel.
- You had direct contact with a person diagnosed with COVID-19 or suspected of having COVID-19 during the last 2 weeks.

Name	Initials	Affiliation	Date	Time In	Time Out
Frank Zabel	FZ	Aztech	10/14/20	8:00	11:30
Jason Natalie	JW	Aztech	10/14/20	8:00	11:30
Frank Zabel	FZ	Aztech	10/16/20	8:00	11:30
Mike Dyette	MD	Aztech	10/16/20	8:00	11:30
Frank Zabel	FZ	Aztech	10/20/20	8:00	11:30
John Stutzke	J.S.	Aztech	10/20/20	8:00	11:30
Stephen Lemieux	SL	Aztech	10/23/20	8:00	11:30
Frank Zabel	FZ	Aztech	10/23/20	8:00	11:30
Stephen Lemieux	SL	Aztech	10/27/20	8:00	11:30
Frank Zabel	FZ	Aztech	10/27/20	8:00	11:30
Frank Zabel	FZ	Aztech	10/30/20	8:00	11:30
GARRETT CORPENT	GC	Aztech	10/30/20	8:00	11:30
Frank Zabel	FZ	Aztech	11/3/20	8:00	11:30
Jason Natalie	JW	Aztech	11/3/20	8:00	11:30



Entry/Exit Log with COVID-19 Acknowledgement

Project Name: Perfection Plating

Project #: 401037

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- You have traveled to CDC-restricted destinations in the last 2 weeks including China, South Korea, Iran, United Kingdom & Ireland, all European Union countries, Switzerland and regions within the U.S. for which public health agencies have prohibited travel.
- You had direct contact with a person diagnosed with COVID-19 or suspected of having COVID-19 during the last 2 weeks.

Name	Initials	Affiliation	Date	Time In	Time Out
S Brooks	JB	Aztech	11/6/20	7:30	11:30
F Zabel	FZ	Aztech	11/6/20	7:30	11:30
Elley Carter	EC	Aztech	11/10/20	8:00	11:30
Frank Zabel	FZ	Aztech	11/10/20	8:00	11:30
Frank Zabel	FZ	Aztech	11/13/20	8:00	11:30
Evon Consolati	EC	Aztech	11/13/20	8:00	11:30
Frank Zabel	FZ	Aztech	11/17/20	8:00	11:30
Frank Zabel	FZ	Aztech	11/24/20	8:00	11:30
Evon Consolati	EC	Aztech	11/24/20	8:00	11:30
C Aldrich	CA	Aztech	11/25	8:00	11:30
F Zabel	FZ	Aztech	12/1/20	8:00	11:30
Elley Carter	EC	Aztech	12/1/20	8:00	11:30
GARRETT CORLEIN	GC	AZTECH	12/4/20	0800	1130
Frank Zabel	FZ	Aztech	12/4/20	0800	11:30



Entry/Exit Log with COVID-19 Acknowledgement

Project Name: Perfection Plating

Project #: 401037

New York State Department of Environmental Conservation's (DEC) objective is to provide a safe and healthy workplace. In response to COVID-19, DEC is prohibiting access to our work areas by those who pose an elevated risk of spreading COVID-19. By completing this site Entry/Exit log, you acknowledge your understanding of this policy and confirm that your health and travel history is NOT in one of the prohibited access groups listed below, and to the best of your knowledge, you do not pose an elevated risk of transmitting COVID-19 to others. Please leave the site immediately and follow recommendations from public health agencies and your healthcare provider if you fall into one of the prohibited access groups listed below:

- You are experiencing flu-like symptoms including but not limited to fever, chills, cough, sore throat, diarrhea, vomiting, runny/stuffy nose, muscle or body aches, headaches, fatigue.
- You have traveled to CDC-restricted destinations in the last 2 weeks including China, South Korea, Iran, United Kingdom & Ireland, all European Union countries, Switzerland and regions within the U.S. for which public health agencies have prohibited travel.
- You had direct contact with a person diagnosed with COVID-19 or suspected of having COVID-19 during the last 2 weeks.

Name	Initials	Affiliation	Date	Time In	Time Out
Frank Zabel	FZ	Aztech	12/8/20	8:00	11:30
Stephen Lemieux	SL	Aztech	12/8/20	8:00	11:30
Frank Zabel	FZ	Aztech	12/11/20	8:00	11:30
Zachary Condon	ZC	Aztech	12/11/20	8:00	11:30
Andrew Talbot	AT	LaBella	12/15/20	8:00	11:30
Ellie Carter	EC	Aztech	12/15/20	8:00	11:30
Frank Zabel	FZ	Aztech	12/18/20	8:00	11:30
Austin Ambrosio	AA	Aztech	12/18/20	8:00	11:30
Ben Strickland	BS	Aztech	12/27/20	8:00	11:30
Austin Ambrosio	AA	Aztech	12/22/20	8:00	11:30
GARRETT CORBIN	GC	LABELLA	12/29/20	8:00	11:30
C Aldrich	CA	LABELLA	12/29/20	8:00	11:30
C Aldrich	CA	LABELLA	12/31/20	8:00	11:30
Austin Ambrosio	AA	Aztech	12/31/20	8:00	11:30

Report No. Perfection Plating - NYSDEC Site No. 401037

Date: 10/2/20 Page 1 of 9



NEW YORK STATE
Department of
Environmental
Conservation

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DAILY INSPECTION REPORT

Page 8 of 9

Report No. **Perfection Plating - NYSDEC Site No. 401037**Date: 10/20/20**DAILY HEALTH CHECKLIST**

Is social distancing being practiced?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is the tail gate safety meeting held outdoors?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are remote/call in job meetings being held in lieu of meeting in person where possible?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Were personal protective gloves, masks, and eye protection being used?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are sanitizing wipes, wash stations or spray available?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Have any workers/visitors been excluded based on close contact with individuals diagnosed with COVID-19, have recently traveled to restricted areas or countries, or are symptomatic (fever, chills, cough/shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Comments:</u>		

REMEDIAL ACTIVITIES AT PROPERTIES

1. Have anyone at this location been tested and confirmed to have COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2. Is anyone at this location isolated or quarantined for COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
3. Has anyone at this locaton had contact with anyone known to have COVID-19 in the past 14 days?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
4. Does anyone at this locaton have any symptoms of a respiratory infection (e.g., cough, sore throat, fever, or shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
5. Does the Department and its contractors have your permission to enter the property at this time?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If Yes to <u>any</u> of 1-4 above:		
<ul style="list-style-type: none">If it is <u>not</u> critical that service/entry be carried out immediately and can be postponed until the risk of COVID-19 is lower, or can be accomplished remotely/without entry, postpone or conduct service without entry.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<ul style="list-style-type: none">If it <u>is</u> critical that service/entry be carried out immediately, advise occupants that as a precaution and for our own protection, project personnel will be donning appropriate PPE* (including respiratory protection) - and do so prior to entry.		
<u>Comments:</u>		

Report No. Perfection Plating - NYSDEC Site No. 401037

Date: 10/6/20 Page 1 of 9

[illegible]

DAILY INSPECTION REPORTReport No. **Perfection Plating - NYSDEC Site No. 401037**Date: 10/6/20 Page 8 of 9**DAILY HEALTH CHECKLIST**

Is social distancing being practiced?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is the tail gate safety meeting held outdoors?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are remote/call in job meetings being held in lieu of meeting in person where possible?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Were personal protective gloves, masks, and eye protection being used?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are sanitizing wipes, wash stations or spray available?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Have any workers/visitors been excluded based on close contact with individuals diagnosed with COVID-19, have recently traveled to restricted areas or countries, or are symptomatic (fever, chills, cough/shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Comments:		

REMEDIAL ACTIVITIES AT PROPERTIES

1. Have anyone at this location been tested and confirmed to have COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2. Is anyone at this location isolated or quarantined for COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
3. Has anyone at this locaton had contact with anyone known to have COVID-19 in the past 14 days?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
4. Does anyone at this locaton have any symptoms of a respiratory infection (e.g., cough, sore throat, fever, or shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
5. Does the Department and its contractors have your permission to enter the property at this time?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If Yes to <u>any</u> of 1-4 above:		
<ul style="list-style-type: none"> If it is <u>not</u> critical that service/entry be carried out immediately and can be postponed until the risk of COVID-19 is lower, or can be accomplished remotely/without entry, postpone or conduct service without entry. If it <u>is</u> critical that service/entry be carried out immediately, advise occupants that as a precaution and for our own protection, project personnel will be donning appropriate PPE* (including respiratory protection) - and do so prior to entry. 	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Comments:		

DAILY INSPECTION REPORT

Report No. Perfection Plating - NYSDEC Site No. 401037

Date: 10/9/20

[illegible]

DAILY INSPECTION REPORTReport No. **Perfection Plating - NYSDEC Site No. 401037**Page 8 of 9
Date: 10/9/20**DAILY HEALTH CHECKLIST**

Is social distancing being practiced?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is the tail gate safety meeting held outdoors?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are remote/call in job meetings being held in lieu of meeting in person where possible?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Were personal protective gloves, masks, and eye protection being used?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are sanitizing wipes, wash stations or spray available?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Have any workers/visitors been excluded based on close contact with individuals diagnosed with COVID-19, have recently traveled to restricted areas or countries, or are symptomatic (fever, chills, cough/shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Comments:		

REMEDIAL ACTIVITIES AT PROPERTIES

1. Have anyone at this location been tested and confirmed to have COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2. Is anyone at this location isolated or quarantined for COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
3. Has anyone at this locaton had contact with anyone known to have COVID-19 in the past 14 days?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
4. Does anyone at this locaton have any symptoms of a respiratory infection (e.g., cough, sore throat, fever, or shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
5. Does the Department and its contractors have your permission to enter the property at this time?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If Yes to <u>any</u> of 1-4 above:		
<ul style="list-style-type: none">If it is <u>not</u> critical that service/entry be carried out immediately and can be postponed until the risk of COVID-19 is lower, or can be accomplished remotely/without entry, postpone or conduct service without entry.	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<ul style="list-style-type: none">If it <u>is</u> critical that service/entry be carried out immediately, advise occupants that as a precaution and for our own protection, project personnel will be donning appropriate PPE* (including respiratory protection) - and do so prior to entry.		
Comments:		

Report No. Perfection Plating - NYSDEC Site No. 401037

Date: 10/14/20



NEW YORK STATE
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DAILY INSPECTION REPORTReport No. **Perfection Plating - NYSDEC Site No. 401037**Page 8 of 9
Date: 10/14/20**DAILY HEALTH CHECKLIST**

Is social distancing being practiced?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is the tail gate safety meeting held outdoors?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are remote/call in job meetings being held in lieu of meeting in person where possible?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Were personal protective gloves, masks, and eye protection being used?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are sanitizing wipes, wash stations or spray available?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Have any workers/visitors been excluded based on close contact with individuals diagnosed with COVID-19, have recently traveled to restricted areas or countries, or are symptomatic (fever, chills, cough/shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Comments:</u> 		

REMEDIAL ACTIVITIES AT PROPERTIES

1. Have anyone at this location been tested and confirmed to have COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2. Is anyone at this location isolated or quarantined for COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
3. Has anyone at this locaton had contact with anyone known to have COVID-19 in the past 14 days?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
4. Does anyone at this locaton have any symptoms of a respiratory infection (e.g., cough, sore throat, fever, or shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
5. Does the Department and its contractors have your permission to enter the property at this time?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If Yes to <u>any</u> of 1-4 above: <ul style="list-style-type: none">If it is <u>not</u> critical that service/entry be carried out immediately and can be postponed until the risk of COVID-19 is lower, or can be accomplished remotely/without entry, postpone or conduct service without entry.If it is <u>critical</u> that service/entry be carried out immediately, advise occupants that as a precaution and for our own protection, project personnel will be donning appropriate PPE* (including respiratory protection) - and do so prior to entry.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<u>Comments:</u> 		

Report No. **Perfection Plating - NYSDEC Site No. 401037**

Date: 10/16/20



NEW YORK STATE
Department of
Environmental
Conservation

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DAILY INSPECTION REPORTReport No. **Perfection Plating - NYSDEC Site No. 401037**Date: 10/16/20 Page 8 of 9**DAILY HEALTH CHECKLIST**

Is social distancing being practiced?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is the tail gate safety meeting held outdoors?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are remote/call in job meetings being held in lieu of meeting in person where possible?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Were personal protective gloves, masks, and eye protection being used?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are sanitizing wipes, wash stations or spray available?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Have any workers/visitors been excluded based on close contact with individuals diagnosed with COVID-19, have recently traveled to restricted areas or countries, or are symptomatic (fever, chills, cough/shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Comments:		

REMEDIAL ACTIVITIES AT PROPERTIES

1. Have anyone at this location been tested and confirmed to have COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2. Is anyone at this location isolated or quarantined for COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
3. Has anyone at this locaton had contact with anyone known to have COVID-19 in the past 14 days?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
4. Does anyone at this locaton have any symptoms of a respiratory infection (e.g., cough, sore throat, fever, or shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
5. Does the Department and its contractors have your permission to enter the property at this time?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If Yes to <u>any</u> of 1-4 above:		
<ul style="list-style-type: none"> If it is <u>not</u> critical that service/entry be carried out immediately and can be postponed until the risk of COVID-19 is lower, or can be accomplished remotely/without entry, postpone or conduct service without entry. If it <u>is</u> critical that service/entry be carried out immediately, advise occupants that as a precaution and for our own protection, project personnel will be donning appropriate PPE* (including respiratory protection) - and do so prior to entry. 	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Comments:		

Report No. Perfection Plating - NYSDEC Site No. 401037

Date: 10/21/20 Page 1 of 9



NEW YORK STATE Department of Environmental Conservation 50

DAILY INSPECTION REPORTReport No. **Perfection Plating - NYSDEC Site No. 401037**Date: 10/21/20 Page 8 of 9**DAILY HEALTH CHECKLIST**

Is social distancing being practiced?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is the tail gate safety meeting held outdoors?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are remote/call in job meetings being held in lieu of meeting in person where possible?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Were personal protective gloves, masks, and eye protection being used?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are sanitizing wipes, wash stations or spray available?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Have any workers/visitors been excluded based on close contact with individuals diagnosed with COVID-19, have recently traveled to restricted areas or countries, or are symptomatic (fever, chills, cough/shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Comments:</u> 		

REMEDIAL ACTIVITIES AT PROPERTIES

1. Have anyone at this location been tested and confirmed to have COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2. Is anyone at this location isolated or quarantined for COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
3. Has anyone at this locaton had contact with anyone known to have COVID-19 in the past 14 days?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
4. Does anyone at this locaton have any symptoms of a respiratory infection (e.g., cough, sore throat, fever, or shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
5. Does the Department and its contractors have your permission to enter the property at this time?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If Yes to <u>any</u> of 1-4 above: <ul style="list-style-type: none">If it is <u>not</u> critical that service/entry be carried out immediately and can be postponed until the risk of COVID-19 is lower, or can be accomplished remotely/without entry, postpone or conduct service without entry.If it is critical that service/entry be carried out immediately, advise occupants that as a precaution and for our own protection, project personnel will be donning appropriate PPE* (including respiratory protection) - and do so prior to entry.	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<u>Comments:</u> 		

Report No. **Perfection Plating - NYSDEC Site No. 401037**

Date: 10/23/20



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DAILY INSPECTION REPORT

Report No. **Perfection Plating - NYSDEC Site No. 401037**

Page 8 of 9
Date: 10/23/20

DAILY HEALTH CHECKLIST

Is social distancing being practiced?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is the tail gate safety meeting held outdoors?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are remote/call in job meetings being held in lieu of meeting in person where possible?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Were personal protective gloves, masks, and eye protection being used?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are sanitizing wipes, wash stations or spray available?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Have any workers/visitors been excluded based on close contact with individuals diagnosed with COVID-19, have recently traveled to restricted areas or countries, or are symptomatic (fever, chills, cough/shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Comments:		

REMEDIAL ACTIVITIES AT PROPERTIES

1. Have anyone at this location been tested and confirmed to have COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2. Is anyone at this location isolated or quarantined for COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
3. Has anyone at this locaton had contact with anyone known to have COVID-19 in the past 14 days?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
4. Does anyone at this locaton have any symptoms of a respiratory infection (e.g., cough, sore throat, fever, or shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
5. Does the Department and its contractors have your permission to enter the property at this time?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
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Comments:		

Report No. Perfection Plating - NYSDEC Site No. 401037

Date: 10/27/20



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DAILY INSPECTION REPORTReport No. **Perfection Plating - NYSDEC Site No. 401037**Date: **10/27/20** Page 8 of 9**DAILY HEALTH CHECKLIST**

Is social distancing being practiced?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is the tail gate safety meeting held outdoors?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are remote/call in job meetings being held in lieu of meeting in person where possible?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Were personal protective gloves, masks, and eye protection being used?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are sanitizing wipes, wash stations or spray available?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Have any workers/visitors been excluded based on close contact with individuals diagnosed with COVID-19, have recently traveled to restricted areas or countries, or are symptomatic (fever, chills, cough/shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Comments:</u>		

REMEDIAL ACTIVITIES AT PROPERTIES

1. Have anyone at this location been tested and confirmed to have COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2. Is anyone at this location isolated or quarantined for COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
3. Has anyone at this locaton had contact with anyone known to have COVID-19 in the past 14 days?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
4. Does anyone at this locaton have any symptoms of a respiratory infection (e.g., cough, sore throat, fever, or shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
5. Does the Department and its contractors have your permission to enter the property at this time?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
If Yes to <u>any</u> of 1-4 above:		
<ul style="list-style-type: none"> If it is <u>not</u> critical that service/entry be carried out immediately and can be postponed until the risk of COVID-19 is lower, or can be accomplished remotely/without entry, postpone or conduct service without entry. If it is critical that service/entry be carried out immediately, advise occupants that as a precaution and for our own protection, project personnel will be donning appropriate PPE* (including respiratory protection) - and do so prior to entry. 	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
<u>Comments:</u>		

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 Report No. Perfection Plating - NYSDEC Site No. 401037 Date: 10/30/20

Date: 10/30/20 Page 1 of 9



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DAILY INSPECTION REPORTReport No. **Perfection Plating - NYSDEC Site No. 401037**Page 8 of 9
Date: 10/30/20**DAILY HEALTH CHECKLIST**

Is social distancing being practiced?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is the tail gate safety meeting held outdoors?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are remote/call in job meetings being held in lieu of meeting in person where possible?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Were personal protective gloves, masks, and eye protection being used?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are sanitizing wipes, wash stations or spray available?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Have any workers/visitors been excluded based on close contact with individuals diagnosed with COVID-19, have recently traveled to restricted areas or countries, or are symptomatic (fever, chills, cough/shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Comments:</u>		

REMEDIAL ACTIVITIES AT PROPERTIES

1. Have anyone at this location been tested and confirmed to have COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2. Is anyone at this location isolated or quarantined for COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
3. Has anyone at this locaton had contact with anyone known to have COVID-19 in the past 14 days?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
4. Does anyone at this locaton have any symptoms of a respiratory infection (e.g., cough, sore throat, fever, or shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
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<u>Comments:</u>		

Department of
Environmental
Conservation

Report No. **Perfection Plating - NYSDEC Site No. 401037**

Date: 11/3/20 Page 1 of 9

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DAILY INSPECTION REPORTReport No. **Perfection Plating - NYSDEC Site No. 401037**Date: 11/3/20 Page 8 of 9**DAILY HEALTH CHECKLIST**


Is social distancing being practiced?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is the tail gate safety meeting held outdoors?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are remote/call in job meetings being held in lieu of meeting in person where possible?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
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Have any workers/visitors been excluded based on close contact with individuals diagnosed with COVID-19, have recently traveled to restricted areas or countries, or are symptomatic (fever, chills, cough/shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Comments:		

REMEDIAL ACTIVITIES AT PROPERTIES

1. Have anyone at this location been tested and confirmed to have COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
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3. Has anyone at this locaton had contact with anyone known to have COVID-19 in the past 14 days?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
4. Does anyone at this locaton have any symptoms of a respiratory infection (e.g., cough, sore throat, fever, or shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
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Comments:		

Report No. **Perfection Plating - NYSDEC Site No. 401037**

Date: 11/6/20



NEW YORK STATE
Department of
Environmental
Conservation

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DAILY INSPECTION REPORT

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Report No. **Perfection Plating - NYSDEC Site No. 401037**

Date: 11/6/2020

DAILY HEALTH CHECKLIST

Is social distancing being practiced?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is the tail gate safety meeting held outdoors?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
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Comments:		

REMEDIAL ACTIVITIES AT PROPERTIES

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Comments:		

DAILY INSPECTION REPORT

Report No. Perfection Plating - NYSDEC Site No. 401037

Date: 11/10/20

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DAILY INSPECTION REPORTReport No. **Perfection Plating - NYSDEC Site No. 401037**Page 8 of 9
Date: 11/10/20**DAILY HEALTH CHECKLIST**

Is social distancing being practiced?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is the tail gate safety meeting held outdoors?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are remote/call in job meetings being held in lieu of meeting in person where possible?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
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Have any workers/visitors been excluded based on close contact with individuals diagnosed with COVID-19, have recently traveled to restricted areas or countries, or are symptomatic (fever, chills, cough/shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
<u>Comments:</u>		

REMEDIAL ACTIVITIES AT PROPERTIES

1. Have anyone at this location been tested and confirmed to have COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
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<u>Comments:</u>		

Department of
Environmental
Conservation

Report No. **Perfection Plating - NYSDEC Site No. 401037**

Date: 11/13/20 Page 1 of 9

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DAILY INSPECTION REPORTReport No. **Perfection Plating - NYSDEC Site No. 401037**Date: 11/13/20 Page 8 of 9**DAILY HEALTH CHECKLIST**

Is social distancing being practiced?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Is the tail gate safety meeting held outdoors?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are remote/call in job meetings being held in lieu of meeting in person where possible?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Were personal protective gloves, masks, and eye protection being used?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Are sanitizing wipes, wash stations or spray available?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
Have any workers/visitors been excluded based on close contact with individuals diagnosed with COVID-19, have recently traveled to restricted areas or countries, or are symptomatic (fever, chills, cough/shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
Comments:		

REMEDIAL ACTIVITIES AT PROPERTIES

1. Have anyone at this location been tested and confirmed to have COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
2. Is anyone at this location isolated or quarantined for COVID-19?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
3. Has anyone at this location had contact with anyone known to have COVID-19 in the past 14 days?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
4. Does anyone at this location have any symptoms of a respiratory infection (e.g., cough, sore throat, fever, or shortness of breath)?	Yes <input type="checkbox"/>	No <input checked="" type="checkbox"/>
5. Does the Department and its contractors have your permission to enter the property at this time?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
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Comments:		

Department of
Environmental
Conservation

DAILY INSPECTION REPORT

Report No. **Perfection Plating - NYSDEC Site No. 401037**

Date: 11/20/20 Page 1 of 9

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DAILY INSPECTION REPORTReport No. **Perfection Plating - NYSDEC Site No. 401037**Page 8 of 9
Date: 11/20/20**DAILY HEALTH CHECKLIST**

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Comments:		

DAILY INSPECTION REPORT Page 1 of 9
 Report No. Perfection Plating - NYSDEC Site No. 401037 Date: 12/1/20

Perfection Plating - NYSDEC Site No. 401037

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DAILY INSPECTION REPORTReport No. **Perfection Plating - NYSDEC Site No. 401037**

Date: 12/1/2020

DAILY HEALTH CHECKLIST

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<u>Comments:</u>		

DAILY INSPECTION REPORT Page 1 of 9
 Report No. Perfection Plating - NYSDEC Site No. 401037 Date: 12/4/20

Page 1 of 9
Date: 12/4/20



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DAILY INSPECTION REPORTReport No. **Perfection Plating - NYSDEC Site No. 401037**

Date: 12/4/2020 Page 8 of 9

DAILY HEALTH CHECKLIST

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Comments:		

Report No. (Site Name) - NYSDEC Site No.

Date: 12/8/20

NYSDEC
Division of Environmental Remediation

Department of
Environmental
Conservation

**NYSDEC Contract No.
D011107**

Superintendent:

NYSDEC PM:

Consultant PM:

Consultant Site Inspectors:

Site Location: *Perfection Plating, Watervliet NY*

Weather Conditions

General Description	overcast	AM		PM
Temperature	28°	AM		PM
Wind	NO	AM		PM

Health & Safety

If any box below is checked "Yes", provide explanation under "Health & Safety Comments".

Were there any changes to the Health & Safety Plan?	*Yes	No <input checked="" type="checkbox"/>	NA
Were there any exceedances of the perimeter air monitoring reported on this date?	*Yes	No <input checked="" type="checkbox"/>	NA
Were there any nuisance issues reported/observed on this date?	*Yes	No <input checked="" type="checkbox"/>	NA

Health & Safety Comments

Summary of Work Performed

Arrived at site:	8:00
------------------	------

Deparfed Site:

Cam

Equipment/Material Tracking

If any box below is checked "Yes", provide explanation under "Material Tracking Comments".

Were there any vehicles which did not display proper D.O.T numbers and placards?	*Yes	No	NA
Were there any vehicles which were not tarped?	* Yes	No	NA
Were there any vehicles which were not decontaminated prior to exiting the work site?	* Yes	No	NA

Personnel and Equipment

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Conservation

DAILY INSPECTION REPORT

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Report No. _____ (Site Name) - NYSDEC Site No. _____ Date: 12/8/20

DAILY HEALTH CHECKLIST

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Comments:		

Department of
Environmental
Conservation

DAILY INSPECTION REPORT
Report No. **Perfection Plating - NYSDEC Site No. 401037**

Date: 12/11/20



NEW YORK STATE
Department of
Environmental
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DAILY INSPECTION REPORT

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Report No. **Perfection Plating - NYSDEC Site No. 401037**

Date: 12/11/2020

DAILY HEALTH CHECKLIST

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<u>Comments:</u>		

DAILY INSPECTION REPORT
Report No. Perfection Plating - NYSDEC Site No. 401037

Date: 12/15/20 Page 1 of 9

[illegible]

DAILY INSPECTION REPORTReport No. **Perfection Plating - NYSDEC Site No. 401037**Date: 12/15/20 Page 8 of 9**DAILY HEALTH CHECKLIST**


Is social distancing being practiced?	Yes <input checked="" type="checkbox"/>	No <input type="checkbox"/>
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DAILY INSPECTION REPORT
Report No. **Perfection Plating - NYSDEC Site No. 401037**

Date: 12/22/20



NEW YORK STATE
Department of
Environmental
Conservation

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DAILY INSPECTION REPORT

Page 8 of 9

Report No. **Perfection Plating - NYSDEC Site No. 401037**Date: 12/22/2020**DAILY HEALTH CHECKLIST**

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DAILY INSPECTION REPORT
Report No. Perfection Plating - NYSDEC Site No. 401037

Date: 12/31/20 Page 1 of 9

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DAILY INSPECTION REPORTReport No. **Perfection Plating - NYSDEC Site No. 401037**Date: 12/31/20 Page 8 of 9**DAILY HEALTH CHECKLIST**

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