



General Motors LLC  
Tonawanda Engine Plant  
2995 River Road  
Buffalo, NY 14207-1099

April 23, 2015

J.R. Smythe  
Division of Water  
NYS Dept. of Environmental Conservation  
270 Michigan Avenue  
Buffalo, New York 14203-2999

Re: GM Powertrain Tonawanda Engine Plant  
SPDES Permit NY0000574  
1st Quarter 2015 Monitoring Well Results

RECEIVED

APR 28 2015

NYS DEC  
REGION 9

Dear Mr. Smythe:

Per our current permit, PCBs are sampled quarterly in the monitoring wells and the regular parameters sampled semi-annually. Please find the analytical results for PCB samples collected during the first quarter of 2015. The full semi-annual report will be submitted in the second quarter.

Please call Casey Essary at 716-867-2530, if you have any questions.

"I certify under the penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gathered and evaluated the information submitted. Based on my inquiry of the person or persons who managed the system, or those persons directly responsible for gathering the information, the information submitted is to the best of my knowledge and belief, true, accurate and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fines and imprisonment for knowing violations."

Sincerely,

Steven C. Finch  
Plant Manager

Attachment

CC:  
Andrea Skalski- NYSDEC, Buffalo  
Brian Baker- NYSDEC, Albany



April 13, 2015

GM - Tonawanda Engine Plant  
Attn: Mr. Casey Essary  
2995 River Road  
Buffalo, NY 14207-1099

**Project: Program 2 - Quarterly SPDES Wells**

Dear Mr. Casey Essary,

Enclosed is a copy of the laboratory report for the following work order(s) received by TriMatrix Laboratories:

| <b>Work Order</b> | <b>Received</b> | <b>Description</b>  |
|-------------------|-----------------|---------------------|
| 1503402           | 03/30/2015      | Laboratory Services |

This report relates only to the sample(s) as received. Test results are in compliance with the requirements of the National Environmental Laboratory Accreditation Program (NELAP) and/or one of the following certification programs:

ACCLASS DoD-ELAP/ISO17025 (#ADE-1542); Arkansas DEP (#88-0730/13-049-0); Florida DEP (#E87622-24); Georgia EPD (#E87622-24); Illinois DEP (#200026/003329); Kansas DPH (#E-10302); Kentucky DEP (#0021); Louisiana DEP (#103068); Michigan DPH (#0034); Minnesota DPH (#491715); New York ELAP (#11776/48855); North Carolina DNRE (#659); Virginia DCLS (#460153/2592); Wisconsin DNR (#999472650); USDA Soil Import Permit (#P330-12-00236).

Any qualification or narration of results, including sample acceptance requirements and test exceptions to the above referenced programs, is presented in the Statement of Data Qualifications and Project Technical Narrative sections of this report. Estimates of analytical uncertainties and certification documents for the test results contained within this report are available upon request.

If you have any questions or require further information, please do not hesitate to contact me.

Sincerely,

A handwritten signature in black ink that reads "Jennifer L. Rice". The signature is fluid and cursive, with the first name being the most prominent.

Jennifer L. Rice  
Project Chemist



## PROJECT TECHNICAL NARRATIVE(s)

### Polychlorinated Biphenyls (PCBs) by EPA Method 608

**Narrative:** The RL for this analysis was elevated due to insufficient sample volume or weight received.

Analysis: USEPA-608

Sample/Analyte: 1503402-02 Monitoring Well 2

1503402-03 Monitoring Well 3



## STATEMENT OF DATA QUALIFICATIONS

All analyses have been validated and comply with our Quality Control Program.  
No Qualification is required.



## ANALYTICAL REPORT

Client: **GM - Tonawanda Engine Plant**  
Project: Program 2 - Quarterly SPDES Wells  
Client Sample ID: **Monitoring Well 1**  
Lab Sample ID: **1503402-01**  
Matrix: Ground Water  
Unit: ug/L  
Dilution Factor: 1  
QC Batch: 1502850

Work Order: **1503402**  
Description: Laboratory Services  
Sampled: 03/27/15 09:55  
Sampled By: P. Hagerty  
Received: 03/30/15 09:15  
Prepared: 03/30/15 12:08 By: ALK  
Analyzed: 04/02/15 18:57 By: MSZ  
Analytical Batch: 5D03019

### Polychlorinated Biphenyls (PCBs) by EPA Method 608

| CAS Number | Analyte  | Analytical Result | RL   | MDL   |
|------------|----------|-------------------|------|-------|
| 12674-11-2 | PCB-1016 | 0.10U             | 0.10 | 0.027 |
| 11104-28-2 | PCB-1221 | 0.10U             | 0.10 | 0.050 |
| 11141-16-5 | PCB-1232 | 0.10U             | 0.10 | 0.035 |
| 53469-21-9 | PCB-1242 | 0.10U             | 0.10 | 0.018 |
| 12672-29-6 | PCB-1248 | 0.10U             | 0.10 | 0.017 |
| 11097-69-1 | PCB-1254 | 0.10U             | 0.10 | 0.040 |
| 11096-82-5 | PCB-1260 | 0.10U             | 0.10 | 0.034 |

**Surrogates:**

*Decachlorobiphenyl*  
*Tetrachloro-m-xylene*

**% Recovery**

*82*  
*61*

**Control Limits**

*30-138*  
*29-117*



## ANALYTICAL REPORT

|                   |                                    |                   |                        |
|-------------------|------------------------------------|-------------------|------------------------|
| Client:           | <b>GM - Tonawanda Engine Plant</b> | Work Order:       | <b>1503402</b>         |
| Project:          | Program 2 - Quarterly SPDES Wells  | Description:      | Laboratory Services    |
| Client Sample ID: | <b>Monitoring Well 2</b>           | Sampled:          | 03/27/15 09:40         |
| Lab Sample ID:    | <b>1503402-02</b>                  | Sampled By:       | P. Hagerty             |
| Matrix:           | Ground Water                       | Received:         | 03/30/15 09:15         |
| Unit:             | ug/L                               | Prepared:         | 03/30/15 12:08 By: ALK |
| Dilution Factor:  | 1                                  | Analyzed:         | 04/07/15 14:32 By: MSZ |
| QC Batch:         | 1502850                            | Analytical Batch: | 5D08007                |

### Polychlorinated Biphenyls (PCBs) by EPA Method 608

| CAS Number | Analyte  | Analytical Result | RL   | MDL   |
|------------|----------|-------------------|------|-------|
| 12674-11-2 | PCB-1016 | 0.11U             | 0.11 | 0.029 |
| 11104-28-2 | PCB-1221 | 0.11U             | 0.11 | 0.054 |
| 11141-16-5 | PCB-1232 | 0.11U             | 0.11 | 0.038 |
| 53469-21-9 | PCB-1242 | 0.11U             | 0.11 | 0.019 |
| 12672-29-6 | PCB-1248 | 0.11U             | 0.11 | 0.019 |
| 11097-69-1 | PCB-1254 | 0.11U             | 0.11 | 0.044 |
| 11096-82-5 | PCB-1260 | 0.11U             | 0.11 | 0.037 |

#### Surrogates:

Decachlorobiphenyl  
Tetrachloro-m-xylene

#### % Recovery

94  
66

#### Control Limits

30-138  
29-117



## ANALYTICAL REPORT

Client: **GM - Tonawanda Engine Plant**  
Project: Program 2 - Quarterly SPDES Wells  
Client Sample ID: **Monitoring Well 3**  
Lab Sample ID: **1503402-03**  
Matrix: Ground Water  
Unit: ug/L  
Dilution Factor: 1  
QC Batch: 1502850

Work Order: **1503402**  
Description: Laboratory Services  
Sampled: 03/27/15 09:20  
Sampled By: P. Hagerty  
Received: 03/30/15 09:15  
Prepared: 03/30/15 12:08 By: ALK  
Analyzed: 04/02/15 19:52 By: MSZ  
Analytical Batch: 5D03019

### Polychlorinated Biphenyls (PCBs) by EPA Method 608

| CAS Number | Analyte  | Analytical Result | RL   | MDL   |
|------------|----------|-------------------|------|-------|
| 12674-11-2 | PCB-1016 | 0.11U             | 0.11 | 0.029 |
| 11104-28-2 | PCB-1221 | 0.11U             | 0.11 | 0.055 |
| 11141-16-5 | PCB-1232 | 0.11U             | 0.11 | 0.038 |
| 53469-21-9 | PCB-1242 | 0.11U             | 0.11 | 0.019 |
| 12672-29-6 | PCB-1248 | 0.11U             | 0.11 | 0.019 |
| 11097-69-1 | PCB-1254 | 0.11U             | 0.11 | 0.044 |
| 11096-82-5 | PCB-1260 | 0.11U             | 0.11 | 0.037 |

**Surrogates:**

*Decachlorobiphenyl*  
*Tetrachloro-m-xylene*

**% Recovery**

*84*  
*63*

**Control Limits**

*30-138*  
*29-117*



## ANALYTICAL REPORT

Client: **GM - Tonawanda Engine Plant**  
Project: Program 2 - Quarterly SPDES Wells  
Client Sample ID: **Monitoring Well 4**  
Lab Sample ID: **1503402-04**  
Matrix: Ground Water  
Unit: ug/L  
Dilution Factor: 1  
QC Batch: 1502850

Work Order: **1503402**  
Description: Laboratory Services  
Sampled: 03/27/15 10:15  
Sampled By: P. Hagerty  
Received: 03/30/15 09:15  
Prepared: 03/30/15 12:08 By: ALK  
Analyzed: 04/02/15 21:14 By: MSZ  
Analytical Batch: 5D03019

### Polychlorinated Biphenyls (PCBs) by EPA Method 608

| CAS Number         | Analyte                     | Analytical Result | RL                    | MDL   |
|--------------------|-----------------------------|-------------------|-----------------------|-------|
| 12674-11-2         | PCB-1016                    | 0.10U             | 0.10                  | 0.027 |
| 11104-28-2         | PCB-1221                    | 0.10U             | 0.10                  | 0.050 |
| 11141-16-5         | PCB-1232                    | 0.10U             | 0.10                  | 0.035 |
| 53469-21-9         | PCB-1242                    | 0.10U             | 0.10                  | 0.018 |
| 12672-29-6         | PCB-1248                    | 0.10U             | 0.10                  | 0.017 |
| 11097-69-1         | PCB-1254                    | 0.10U             | 0.10                  | 0.040 |
| 11096-82-5         | PCB-1260                    | 0.10U             | 0.10                  | 0.034 |
| <b>Surrogates:</b> |                             |                   |                       |       |
|                    |                             | <b>% Recovery</b> | <b>Control Limits</b> |       |
|                    | <i>Decachlorobiphenyl</i>   | 90                | 30-138                |       |
|                    | <i>Tetrachloro-m-xylene</i> | 70                | 29-117                |       |



## QUALITY CONTROL REPORT

### Polychlorinated Biphenyls (PCBs) by EPA Method 608

| Analyte | Sample Conc. | Spike Qty. | Result | Spike % Rec. | Control Limits | RPD | RPD Limits | RL | MDL |
|---------|--------------|------------|--------|--------------|----------------|-----|------------|----|-----|
|---------|--------------|------------|--------|--------------|----------------|-----|------------|----|-----|

**QC Batch: 1502850** 608 Liquid/Liquid Extraction/USEPA-608

#### Method Blank

Unit: ug/L

Analyzed: 04/02/2015 By: MSZ

Analytical Batch: 5D03019

|          |  |  |        |  |  |    |  |      |       |
|----------|--|--|--------|--|--|----|--|------|-------|
| PCB-1016 |  |  | 0.10 U |  |  | -- |  | 0.10 | 0.027 |
| PCB-1221 |  |  | 0.10 U |  |  |    |  | 0.10 | 0.050 |
| PCB-1232 |  |  | 0.10 U |  |  |    |  | 0.10 | 0.035 |
| PCB-1242 |  |  | 0.10 U |  |  |    |  | 0.10 | 0.018 |
| PCB-1248 |  |  | 0.10 U |  |  |    |  | 0.10 | 0.017 |
| PCB-1254 |  |  | 0.10 U |  |  |    |  | 0.10 | 0.040 |
| PCB-1260 |  |  | 0.10 U |  |  | -- |  | 0.10 | 0.034 |

#### Surrogates:

Decachlorobiphenyl

89 30-138

Tetrachloro-m-xylene

68 29-117

#### Laboratory Control Sample

Unit: ug/L

Analyzed: 04/02/2015 By: MSZ

Analytical Batch: 5D03019

|          |  |       |              |     |        |    |  |      |       |
|----------|--|-------|--------------|-----|--------|----|--|------|-------|
| PCB-1016 |  | 0.600 | <b>0.554</b> | 92  | 50-114 | -- |  | 0.10 | 0.027 |
| PCB-1260 |  | 0.600 | <b>0.635</b> | 106 | 8-127  | -- |  | 0.10 | 0.034 |

#### Surrogates:

Decachlorobiphenyl

93 30-138

Tetrachloro-m-xylene

70 29-117

#### Matrix Spike 1503402-04 Monitoring Well 4

Unit: ug/L

Analyzed: 04/02/2015 By: MSZ

Analytical Batch: 5D03019

|          |        |       |              |     |        |    |  |      |       |
|----------|--------|-------|--------------|-----|--------|----|--|------|-------|
| PCB-1016 | 0.10 U | 0.612 | <b>0.578</b> | 94  | 55-117 | -- |  | 0.10 | 0.027 |
| PCB-1260 | 0.10 U | 0.612 | <b>0.671</b> | 110 | 46-132 | -- |  | 0.10 | 0.034 |

#### Surrogates:

Decachlorobiphenyl

97 30-138

Tetrachloro-m-xylene

76 29-117

#### Matrix Spike Duplicate 1503402-04 Monitoring Well 4

Unit: ug/L

Analyzed: 04/02/2015 By: MSZ

Analytical Batch: 5D03019

|          |        |       |              |     |        |   |    |      |       |
|----------|--------|-------|--------------|-----|--------|---|----|------|-------|
| PCB-1016 | 0.11 U | 0.638 | <b>0.607</b> | 95  | 55-117 | 5 | 20 | 0.11 | 0.028 |
| PCB-1260 | 0.11 U | 0.638 | <b>0.691</b> | 108 | 46-132 | 3 | 20 | 0.11 | 0.036 |

#### Surrogates:

Decachlorobiphenyl

97 30-138

Tetrachloro-m-xylene

81 29-117



# Chain of Custody Record

COC No. 141242352

**For Lab Use Only**

Cart: 60

VOA Rack/Tray

Receipt Log No. 9.2

Project Chemist  
Jennifer Rice

Work Order No. 1503402

5560 Corporate Exchange Court SE, Grand Rapids, MI 49512  
Phone (616) 975-4500 Fax (616) 942-7463 www.trimatrixlabs.com**Analyses Requested**

Pg. 1 of 1

Client Name  
GM - Tonawanda Engine Plant  
Address  
2995 River RoadCity, State Zip  
Buffalo, NY 14207-1099Phone: 716-879-5638 Fax 716-879-5425  
Email casey.essary@gm.comProject Name  
Program 2 - Qtly SPDES Wells  
Client Project No. / P.O. No.Invoice To ☒ Client  
☐ Other (comments)Contact/Report To  
Casey Essary

| A | PCBs - 608 | Field pH | Field Temp |
|---|------------|----------|------------|
|   |            |          |            |
| 2 |            |          |            |

## PRESERVATIVES

- A NONE pH~7
- B HNO<sub>3</sub> pH<2
- C H<sub>2</sub>SO<sub>4</sub> pH<2
- D 1+1 HCl pH<2
- E NaOH pH>12
- F ZnAc/NaOH pH>9
- G MeOH
- H Other (note below)

| Schedule | Matrix Code | Sample Number | Field Sample ID     | Cooler ID | Sample Date | Sample Time | COM | CR | AB | Matrix | 2 | Total       | Sample Comments |
|----------|-------------|---------------|---------------------|-----------|-------------|-------------|-----|----|----|--------|---|-------------|-----------------|
|          |             | 01            | 1 Monitoring Well 1 | TW 0410   | 03/21/15    | 6755        |     | X  | W  | 2      |   | 7.81 11.9 2 | Field pH/Temp.  |
|          |             | 02            | 2 Monitoring Well 2 |           |             | 0940        |     | X  | W  | 2      |   | 7.67 10.2 2 | Field pH/Temp.  |
|          |             | 03            | 3 Monitoring Well 3 |           |             | 0930        |     | X  | W  | 2      |   | 7.50 10.9 2 | Field pH/Temp.  |
|          |             | 04            | 4 Monitoring Well 4 | 1349      |             | 1015        |     | X  | W  | 2      | 1 | 7.32 9.7 2  | Field pH/Temp.  |
|          |             |               | 5                   |           |             |             |     |    |    |        |   |             |                 |
|          |             |               | 6                   |           |             |             |     |    |    |        |   |             |                 |
|          |             |               | 7                   |           |             |             |     |    |    |        |   |             |                 |
|          |             |               | 8                   |           |             |             |     |    |    |        |   |             |                 |
|          |             |               | 9                   |           |             |             |     |    |    |        |   |             |                 |
|          |             |               | 10                  |           |             |             |     |    |    |        |   |             |                 |

Sampled By (print)

Patrick J. Nagels

How Shipped?

Hand

Carrier Fed Ex

Comments

Sampler's Signature

Tracking No.

Company

Coke Chem.

1. Relinquished By

Date

Time

1. Received By

Date

Time

2. Relinquished By

Date

Time

2. Received By

Date

Time

3. Relinquished By

Date

Time

3. Received For Lab By

Date

Time

3:30:15 09/11

ORIGINAL - LABORATORY

COPY - SAMPLER

# SAMPLE RECEIVING / LOG-IN CHECKLIST



|                                                                       |                                                                                                             |
|-----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|
| Client: <u>Gm Tonawanda</u><br>Receipt Record Page/Line #: <u>9.2</u> | Work Order #: <u>1503402</u><br>New / Add To: <input type="checkbox"/><br>Project Chemist: <u>Sample #s</u> |
|-----------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------|

|                                                   |                                                                                                              |                           |                                                                                                                                                                              |                                                                 |
|---------------------------------------------------|--------------------------------------------------------------------------------------------------------------|---------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|
| Recorded by (Initials/Date):<br><u>WC 3-30-15</u> | <input checked="" type="checkbox"/> Cooler<br><input type="checkbox"/> Box<br><input type="checkbox"/> Other | Qty Received:<br><u>2</u> | Thermometer Used: <input checked="" type="checkbox"/> IR Gun (#202)<br><input type="checkbox"/> Digital Thermometer (#54)<br><input type="checkbox"/> Other (# <u>    </u> ) | <input type="checkbox"/> See Additional Cooler Information Form |
|---------------------------------------------------|--------------------------------------------------------------------------------------------------------------|---------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-----------------------------------------------------------------|

| Cooler #                                                                                                                                                                    | Time                 | Cooler #                                                                                                                                                                    | Time                                                                                            | Cooler #                                                                                                                                                         | Time       | Cooler #                                                                                                                                                         | Time                 |  |
|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|-----------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|------------|------------------------------------------------------------------------------------------------------------------------------------------------------------------|----------------------|--|
| <u>Im 1349</u>                                                                                                                                                              | <u>0958</u>          | <u>Im 0410</u>                                                                                                                                                              | <u>1000</u>                                                                                     |                                                                                                                                                                  |            |                                                                                                                                                                  |                      |  |
| Custody Seals:<br><input checked="" type="checkbox"/> None<br><input type="checkbox"/> Present / Intact<br><input type="checkbox"/> Present / Not Intact                    |                      | Custody Seals:<br><input checked="" type="checkbox"/> None<br><input type="checkbox"/> Present / Intact<br><input type="checkbox"/> Present / Not Intact                    |                                                                                                 | Custody Seals:<br><input type="checkbox"/> None<br><input type="checkbox"/> Present / Intact<br><input type="checkbox"/> Present / Not Intact                    |            | Custody Seals:<br><input type="checkbox"/> None<br><input type="checkbox"/> Present / Intact<br><input type="checkbox"/> Present / Not Intact                    |                      |  |
| Coolant Type:<br><input checked="" type="checkbox"/> Loose Ice<br><input type="checkbox"/> Bagged Ice<br><input type="checkbox"/> Blue Ice<br><input type="checkbox"/> None |                      | Coolant Type:<br><input checked="" type="checkbox"/> Loose Ice<br><input type="checkbox"/> Bagged Ice<br><input type="checkbox"/> Blue Ice<br><input type="checkbox"/> None |                                                                                                 | Coolant Type:<br><input type="checkbox"/> Loose Ice<br><input type="checkbox"/> Bagged Ice<br><input type="checkbox"/> Blue Ice<br><input type="checkbox"/> None |            | Coolant Type:<br><input type="checkbox"/> Loose Ice<br><input type="checkbox"/> Bagged Ice<br><input type="checkbox"/> Blue Ice<br><input type="checkbox"/> None |                      |  |
| Coolant Location:<br><input checked="" type="checkbox"/> Dispersed / <input type="checkbox"/> Top / <input type="checkbox"/> Middle / <input type="checkbox"/> Bottom       |                      | Coolant Location:<br><input checked="" type="checkbox"/> Dispersed / <input type="checkbox"/> Top / <input type="checkbox"/> Middle / <input type="checkbox"/> Bottom       |                                                                                                 | Coolant Location:<br><input type="checkbox"/> Dispersed / <input type="checkbox"/> Top / <input type="checkbox"/> Middle / <input type="checkbox"/> Bottom       |            | Coolant Location:<br><input type="checkbox"/> Dispersed / <input type="checkbox"/> Top / <input type="checkbox"/> Middle / <input type="checkbox"/> Bottom       |                      |  |
| Temp Blank Present: <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                |                      | Temp Blank Present: <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                                |                                                                                                 | Temp Blank Present: <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                     |            | Temp Blank Present: <input type="checkbox"/> Yes <input type="checkbox"/> No                                                                                     |                      |  |
| If Present, Temperature Blank Location is:<br><input type="checkbox"/> Representative <input type="checkbox"/> Not Representative                                           |                      | If Present, Temperature Blank Location is:<br><input type="checkbox"/> Representative <input type="checkbox"/> Not Representative                                           |                                                                                                 | If Present, Temperature Blank Location is:<br><input type="checkbox"/> Representative <input type="checkbox"/> Not Representative                                |            | If Present, Temperature Blank Location is:<br><input type="checkbox"/> Representative <input type="checkbox"/> Not Representative                                |                      |  |
| Observed °C                                                                                                                                                                 | Correction Factor °C | Actual °C                                                                                                                                                                   | Observed °C                                                                                     | Correction Factor °C                                                                                                                                             | Actual °C  | Observed °C                                                                                                                                                      | Correction Factor °C |  |
| Temp Blank                                                                                                                                                                  |                      |                                                                                                                                                                             | Temp Blank                                                                                      |                                                                                                                                                                  |            | Temp Blank                                                                                                                                                       |                      |  |
| Sample 1: <u>47</u>                                                                                                                                                         | <u>-</u>             | <u>47</u>                                                                                                                                                                   | Sample 1: <u>29</u>                                                                             | <u>-</u>                                                                                                                                                         | <u>29</u>  | Sample 1:                                                                                                                                                        |                      |  |
| Sample 2: <u>47</u>                                                                                                                                                         | <u>-</u>             | <u>47</u>                                                                                                                                                                   | Sample 2: <u>28</u>                                                                             | <u>-</u>                                                                                                                                                         | <u>28</u>  | Sample 2:                                                                                                                                                        |                      |  |
| Sample 3: <u>5.4</u>                                                                                                                                                        | <u>-</u>             | <u>5.4</u>                                                                                                                                                                  | Sample 3: <u>3.2</u>                                                                            | <u>-</u>                                                                                                                                                         | <u>3.2</u> | Sample 3:                                                                                                                                                        |                      |  |
| 3 Sample Average °C: <u>49</u>                                                                                                                                              |                      |                                                                                                                                                                             | 3 Sample Average °C: <u>3.0</u>                                                                 |                                                                                                                                                                  |            | 3 Sample Average °C: <u>    </u>                                                                                                                                 |                      |  |
| <input type="checkbox"/> Cooler ID on COC?<br><input type="checkbox"/> VOC Trip Blank received?                                                                             |                      |                                                                                                                                                                             | <input type="checkbox"/> Cooler ID on COC?<br><input type="checkbox"/> VOC Trip Blank received? |                                                                                                                                                                  |            | <input type="checkbox"/> Cooler ID on COC?<br><input type="checkbox"/> VOC Trip Blank received?                                                                  |                      |  |

**If any shaded areas checked, complete Sample Receiving Non-Conformance and/or Inventory Form**

|                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                              |                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                       |
|------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|-------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------|
| <b>Paperwork Received</b><br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> Chain of Custody record(s)? If No, Initiated By _____<br>Received for: Lab Signed/Date/Time? _____<br><input type="checkbox"/> Shipping document?<br><input type="checkbox"/> Other _____<br><b>COC Information</b><br><input checked="" type="checkbox"/> TriMatrix COC <input type="checkbox"/> Other _____<br>COC ID Numbers: _____                                                                                                                                                                                                                                      | <b>Check Sample Preservation</b><br>N/A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/><br><input checked="" type="checkbox"/> Temperature Blank OR average sample temperature, ≥6° C?<br><input type="checkbox"/> If either is ≥6° C, was thermal preservation required?<br>If "Yes", Project Chemist Approval Initials: _____<br>If "Yes" Completed Non-Con Cooler - Cont Inventory Form?<br><input checked="" type="checkbox"/> Completed Sample Preservation Verification Form?<br><input checked="" type="checkbox"/> Samples chemically preserved correctly?<br>If "No", added orange tag?<br><input type="checkbox"/> Received pre-preserved VOC soils?<br><input type="checkbox"/> NaOH <input type="checkbox"/> Na <sub>2</sub> SO <sub>4</sub> |
| <b>Check COC for Accuracy</b><br>Yes <input checked="" type="checkbox"/> No <input type="checkbox"/><br><input type="checkbox"/> Analysis Requested?<br><input checked="" type="checkbox"/> Sample ID matches COC?<br><input checked="" type="checkbox"/> Sample Date and Time matches COC?<br><input type="checkbox"/> Container type completed on COC?<br><input checked="" type="checkbox"/> All container types indicated are received?                                                                                                                                                                                                                                  | <b>Check for Short Hold-Time Prep/Analyses</b><br><input type="checkbox"/> Bacteriological<br><input type="checkbox"/> Air Bags<br><input type="checkbox"/> EnCores / Methanol Pre-Preserved<br><input type="checkbox"/> Formaldehyde/Aldehyde<br><input type="checkbox"/> Green-tagged containers<br><input type="checkbox"/> Yellow/White-tagged 1 L ambers (SV Prep-Lab)                                                                                                                                                                                                                                                                                                                                                                                                                           |
| <b>Sample Condition Summary</b><br>N/A <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/><br><input checked="" type="checkbox"/> Broken containers/vials?<br><input checked="" type="checkbox"/> Missing or incomplete labels?<br><input checked="" type="checkbox"/> Illegible information on labels?<br><input checked="" type="checkbox"/> Low volume received?<br><input checked="" type="checkbox"/> Inappropriate or non-TriMatrix containers received?<br><input type="checkbox"/> VOC vials / TOX containers have headspace?<br><input checked="" type="checkbox"/> Extra sample locations / containers not listed on COC? | <b>Notes</b><br><br><input type="checkbox"/> Trip Blank received <input type="checkbox"/> Trip Blank not listed on COC<br>Cooler Received (Date/Time) <u>3-30-15 0915</u> Paperwork Delivered (Date/Time) <u>3-30-15 1015</u> <input checked="" type="checkbox"/> 1 Hour Goal Met?<br>Yes / No                                                                                                                                                                                                                                                                                                                                                                                                                                                                                                        |