



39 Spruce Street ° East Longmeadow, MA 01028 ° FAX 413/525-6405 ° TEL. 413/525-2332

REPORT DATE 4/20/2009

TRC SOLUTIONS - LOWELL
650 SUFFOLK STREET
LOWELL, MA 01852
ATTN: DAVID SULLIVAN

CONTRACT NUMBER:
PURCHASE ORDER NUMBER:

PROJECT NUMBER:

ANALYTICAL SUMMARY

LIMS BAT #: LIMIT-24805

JOB NUMBER: 115058

PROJECT LOCATION: CITY OF NEW BEDFORD(WALSH)

FIELD SAMPLE #	LAB ID	MATRIX	SAMPLE DESCRIPTION	TEST	Subcontract Lab (if any) Cert. Nos.
WFB-2J	09B12194	SOIL	Not Specified	as (mg/kg)dw icp	
WFB-2J	09B12194	SOIL	Not Specified	solids (percent)	
WFC-2L	09B12191	SOIL	Not Specified	as (mg/kg)dw icp	
WFC-2L	09B12191	SOIL	Not Specified	solids (percent)	
WFC-2M	09B12192	SOIL	Not Specified	as (mg/kg)dw icp	
WFC-2M	09B12192	SOIL	Not Specified	solids (percent)	
WFC-2N	09B12193	SOIL	Not Specified	as (mg/kg)dw icp	
WFC-2N	09B12193	SOIL	Not Specified	solids (percent)	



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REPORT DATE 4/20/2009

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LOWELL, MA 01852
ATTN: DAVID SULLIVAN

CONTRACT NUMBER:
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PROJECT NUMBER:

ANALYTICAL SUMMARY

LIMS BAT #: LIMIT-24805
JOB NUMBER: 115058

Comments :

LIMS BATCH NO. : LIMIT-24805

CASE NARRATIVE SUMMARY

Recommended sample holding times were not exceeded for all samples unless listed below:
None Exceeded

All samples for the method(s) listed were received preserved properly in the proper containers at 4°C +/- 2 degrees as specified on the chain-of-custody form unless listed below:
All properly preserved

There are no (other) analytical issues which affect the usability of the data.

DETAILED CASE NARRATIVE

METHOD SW846-6010 - ADDITIONAL DETAILS

Only As was requested and reported.

The results of analyses performed are based on samples as submitted to the laboratory and relate only to the items collected and tested.

The CON-TEST Environmental Laboratory operates under the following certifications and accreditations. AIHA accreditations only apply to NIOSH methods and Environmental Lead Analyses.

AIHA 100033	AIHA ELLAP (LEAD) 100033	NORTH CAROLINA CERT. # 652
MASSACHUSETTS MA0100	NEW HAMPSHIRE NELAP 2516	NEW JERSEY NELAP NJ MA007 (AIR)
CONNECTICUT PH-0567	VERMONT DOH (LEAD) No. LL015036	FLORIDA DOH E871027 (AIR)
NEW YORK ELAP/NELAP 10899	RHODE ISLAND (LIC. No. 112)	

I certify that the analyses listed above, unless specifically listed as subcontracted, if any, were performed under my direction according to the approved methodologies listed in this document, and that based upon my inquiry of those individuals immediately responsible for obtaining the information, the material contained in this report is, to the best of my knowledge and belief, accurate and complete.

Edward Denson 4/20/09
SIGNATURE DATE

Tod Kopyscinski
Air Laboratory Manager

Michael Erickson
Assistant Laboratory Director

Edward Denson
Technical Director

Daren Damboragian
Organics Department Supervisor

* See end of data tabulation for notes and comments pertaining to this sample



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 TRC SOLUTIONS - LOWELL
 650 SUFFOLK STREET
 LOWELL, MA 01852

4/20/2009
 Page 1 of 3

Project Location: CITY OF NEW BEDFORD(WALSH)

LIMS-BAT #: LIMIT-24805

Date Received: 4/16/2009

Job Number: 115058

Field Sample #: WFB-2J

Purchase Order No.:

Sample ID: 09B12194 ±Sampled: 3/30/2009
 Not Specified

Sample Matrix: SOIL

	Units	Results	Date Analyzed	Analyst	RL	SPEC Limit Lo Hi	P/ F
Arsenic	mg/kg dry wt	33.6	04/20/09	OP	3.15		

Field Sample #: WFC-2L

Sample ID: 09B12191 ±Sampled: 3/30/2009
 Not Specified

Sample Matrix: SOIL

	Units	Results	Date Analyzed	Analyst	RL	SPEC Limit Lo Hi	P/ F
Arsenic	mg/kg dry wt	129	04/20/09	OP	3.06		

Field Sample #: WFC-2M

Sample ID: 09B12192 ±Sampled: 3/30/2009
 Not Specified

Sample Matrix: SOIL

	Units	Results	Date Analyzed	Analyst	RL	SPEC Limit Lo Hi	P/ F
Arsenic	mg/kg dry wt	34.6	04/20/09	OP	3.01		

Field Sample #: WFC-2N

Sample ID: 09B12193 ±Sampled: 3/30/2009
 Not Specified

Sample Matrix: SOIL

	Units	Results	Date Analyzed	Analyst	RL	SPEC Limit Lo Hi	P/ F
Arsenic	mg/kg dry wt	222	04/20/09	OP	3.01		

Analytical Method:
 SW846 3050/6010

SAMPLES ARE DIGESTED WITH NITRIC ACID AND THEN ANALYZED BY
 INDUCTIVELY COUPLED PLASMA EMISSION SPECTROSCOPY.

RL = Reporting Limit

ND = Not Detected at or above the Reporting Limit

NM = Not Measured

* = See end of report for comments and notes applying to this sample

‡ = See attached chain-of-custody record for time sampled

SPEC LIMIT = a client specified recommended or
 regulatory level for comparison with data to
 determine PASS (P) or FAIL (F) condition of results.



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 LOWELL, MA 01852

4/20/2009
 Page 2 of 3

Purchase Order No.:

Project Location: CITY OF NEW BEDFORD(WALSH)

LIMS-BAT #: LIMIT-24805

Date Received: 4/16/2009

Job Number: 115058

Field Sample #: WFB-2J

Sample ID: 09B12194 ±Sampled: 3/30/2009
 Not Specified

Sample Matrix: SOIL

	Units	Results	Date Analyzed	Analyst	RL	SPEC Limit Lo Hi	P/ F
Solids, total	%	79.5	04/17/09	FD			

Field Sample #: WFC-2L

Sample ID: 09B12191 ±Sampled: 3/30/2009
 Not Specified

Sample Matrix: SOIL

	Units	Results	Date Analyzed	Analyst	RL	SPEC Limit Lo Hi	P/ F
Solids, total	%	81.8	04/17/09	FD			

Field Sample #: WFC-2M

Sample ID: 09B12192 ±Sampled: 3/30/2009
 Not Specified

Sample Matrix: SOIL

	Units	Results	Date Analyzed	Analyst	RL	SPEC Limit Lo Hi	P/ F
Solids, total	%	83.3	04/17/09	FD			

Field Sample #: WFC-2N

Sample ID: 09B12193 ±Sampled: 3/30/2009
 Not Specified

Sample Matrix: SOIL

	Units	Results	Date Analyzed	Analyst	RL	SPEC Limit Lo Hi	P/ F
Solids, total	%	83.3	04/17/09	FD			

Analytical Method:

SM 2540G

PERCENT OF SAMPLE REMAINING AFTER DRYING OVERNIGHT AT 103-105 DEGREES CENTIGRADE.

RL = Reporting Limit

ND = Not Detected at or above the Reporting Limit

NM = Not Measured

* = See end of report for comments and notes applying to this sample

‡ = See attached chain-of-custody record for time sampled

SPEC LIMIT = a client specified recommended or regulatory level for comparison with data to determine PASS (P) or FAIL (F) condition of results.



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4/20/2009
Page 3 of 3

Purchase Order No.:

Project Location: CITY OF NEW BEDFORD(WALSH)
Date Received: 4/16/2009

LIMS-BAT #: LIMIT-24805
Job Number: 115058

** END OF REPORT **

RL = Reporting Limit

ND = Not Detected at or above the Reporting Limit

NM = Not Measured

* = See end of report for comments and notes applying to this sample

‡ = See attached chain-of-custody record for time sampled

SPEC LIMIT = a client specified recommended or regulatory level for comparison with data to determine PASS (P) or FAIL (F) condition of results.



39 Spruce Street ° East Longmeadow, MA 01028 ° FAX 413/525-6405 ° TEL. 413/525-2332

QC SUMMARY REPORT

SAMPLE QC: Sample Results with Duplicates

BATCH QC: Lab fortified Blanks and Duplicates

Sample Matrix Spikes and Matrix Spike Duplicates

Standard Reference Materials and Duplicates

Method Blanks

Report Date: 4/20/2009

Lims Bat # : LIMIT-24805

Page 1 of 2

QC Batch Number: ICP-21616

Sample Id	Analysis	QC Analysis	Values	Units	Limits
BLANK-132064	Arsenic	Blank	<2.50	mg/kg dry wt	
LFBLANK-94325	Arsenic	Lab Fort Blank Amt.	123.00	mg/kg dry wt	
		Lab Fort Blk. Found	115.70	mg/kg dry wt	
		Lab Fort Blk. % Rec.	94.06	%	83-117
		Dup Lab Fort Bl Amt.	123.00	mg/kg dry wt	
		Dup Lab Fort Bl. Fnd	117.96	mg/kg dry wt	
		Dup Lab Fort Bl %Rec	95.90	%	83-117
		Lab Fort Blank Range	1.83	units	
		Lab Fort Bl. Av. Rec	94.98	%	
		LFB Duplicate RPD	1.93	%	0-30



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QC SUMMARY REPORT

SAMPLE QC: Sample Results with Duplicates BATCH QC: Lab fortified Blanks and Duplicates
Sample Matrix Spikes and Matrix Spike Duplicates Standard Reference Materials and Duplicates
Method Blanks

Report Date: 4/20/2009 Lims Bat #: LIMIT-24805 Page 2 of 2

QUALITY CONTROL DEFINITIONS AND ABBREVIATIONS

QC BATCH NUMBER This is the number assigned to all samples analyzed together that would be subject to comparison with a particular set of Quality Control Data.

LIMITS Upper and Lower Control Limits for the QC ANALYSIS Reported. All values normally would fall within these statistically determined limits, unless there is an unusual circumstance that would be documented in a NOTE appearing on the last page of the QC SUMMARY REPORT. Not all QC results will have Limits defined.

Sample Amount Amount of analyte found in a sample.

Blank Method Blank that has been taken though all the steps of the analysis.

LFBLANK Laboratory Fortified Blank (a control sample)

STDADD Standard Added (a laboratory control sample)

Matrix Spk Amt Added Amount of analyte spiked into a sample
MS Amt Measured Amount of analyte found including amount that was spiked
Matrix Spike % Rec. % Recovery of spiked amount in sample.

Duplicate Value The result from the Duplicate analysis of the sample.
Duplicate RPD The Relative Percent Difference between two Duplicate Analyses.

Surrogate Recovery The % Recovery for non-environmental compounds (surrogates) spiked into samples to determine the performance of the analytical methods.

Sur. Recovery (ELCD) Surrogate Recovery on the Electrolytic Conductivity Detector.
Sur. Recovery (PID) Surrogate Recovery on the Photoionization Detector.

Standard Measured Amount measured for a laboratory control sample
Standard Amt Added Known value for a laboratory control sample
Standard % Recovery % recovered for a laboratory control sample with a known value.

Lab Fort Blank Amt Laboratory Fortified Blank Amount Added
Lab Fort Blk. Found Laboratory Fortified Blank Amount Found
Lab Fort Blk % Rec Laboratory Fortified Blank % Recovered
Dup Lab Fort Bl Amt Duplicate Laboratory Fortified Blank Amount Added
Dup Lab Fort Bl Fnd Duplicate Laboratory Fortified Blank Amount Found
Dup Lab Fort Bl % Rec Duplicate Laboratory Fortified Blank % Recovery
Lab Fort Blank Range Laboratory Fortified Blank Range (Absolute value of difference between recoveries for Lab Fortified Blank and Lab Fortified Blank Duplicate).

Lab Fort Bl. Av. Rec. Laboratory Fortified Blank Average Recovery

Duplicate Sample Amt Sample Value for Duplicate used with Matrix Spike Duplicate
MSD Amount Added Matrix Spike Duplicate Amount Added (Spiked)
MSD Amt Measured Matrix Spike Duplicate Amount Measured
MSD % Recovery Matrix Spike Duplicate % Recovery
MSD Range Absolute difference between Matrix Spike and Matrix Spike Duplicate Recoveries

MADEP MCP ANALYTICAL METHOD REPORT CERTIFICATION FORM

Laboratory Name: **CON-TEST Analytical Laboratory**

Project #: *LIMT-24805*

Project Location: *CITY OF NEW BEDFORD (WALSH)*

MADEP RTN¹:

This Form provides certifications for the following data set: [list Laboratory Sample ID Number(s)]

09B12191-09B12194

Sample Matrices: Groundwater Soil/Sediment Drinking Water Other: _____

MCP SW-846 Methods Used	8260B ()	8151A ()	8330 ()	6010B (<input checked="" type="checkbox"/>)	7470A/1A ()
	8270C ()	8081A ()	VPH ()	6020 ()	9014M ² ()
As specified in MADEP Compendium of Analytical Methods. (check all that apply)	8082 ()	8021B ()	EPH ()	7000 S ³ ()	7196A ()
¹ List Release Tracking Number (RTN), if known ² M – SW-846 Method 9014 or MADEP Physiologically Available Cyanide (PAC) Method ³ S – SW-846 Methods 7000 Series List individual method and analyte.					

An affirmative response to questions A, B, C and D is required for "Presumptive Certainty" status

A	Were all samples received by the laboratory in a condition consistent with that described on the Chain-of-Custody documentation for the data set?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No ¹
B	Were all QA/QC procedures required for the specified analytical method(s) included in this report followed, including the requirement to note and discuss in a narrative QC data that did not meet appropriate performance standards or guidelines?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No ¹
C	Does the data included in this report meet all the analytical requirements for "Presumptive Certainty", as described in Section 2.0 (a), (b), (c) and (d) of the MADEP document CAM VII A, "Quality Assurance and Quality Control Guidelines for the Acquisition and Reporting of Analytical Data"?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No ¹
D	<u>VPH and EPH Methods only</u> : Was the VPH or EPH Method conducted without significant modifications (see Section 11.3 of respective Methods)	<input type="checkbox"/> Yes <input type="checkbox"/> No ¹

A response to questions E and F below is required for "Presumptive Certainty" status

E	Were all analytical QC performance standards and recommendations for the specified methods achieved?	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No ¹
F	Were results for all analyte-list compounds/elements for the specified method(s) reported?	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No ¹

¹ All Negative responses must be addressed in an attached Environmental Laboratory case narrative.

I, the undersigned, attest under the pains and penalties of perjury that, based upon my personal inquiry of those responsible for obtaining the information, the material contained in this analytical report is, to the best of my knowledge and belief, accurate and complete.

Signature: *Edward Denson*

Position: Technical Director

Printed Name: Edward Denson

Date: *4/20/09*



Phone: 413-525-2332
 Fax: 413-525-6405
 Email: info@contestlabs.com
 www.contestlabs.com

CHAIN OF CUSTODY RECORD

39 SPRUCE ST, 2ND FLOOR
 EAST LONGMEADOW, MA 01028

Company Name: TRC
 Address: 650 Suffolk St Lowell MA 01854

Telephone: (978) 686-3565
 Project # 15055
 Client PO #

Attention: David Sullivan
 Project Location: City of Wob (W154)
 Sampled By: J. Saunders

DATA DELIVERY (check one):
 FAX EMAIL WEBSITE CLIENT
 Fax #:
 Email: dsullivan@fasolutions.com
 Format: EXCEL PDF GIS KEY

Proposal Provided? (For Billing purposes)
 Yes 2007 proposal date Yes No

State Form Required?
 Yes No

Field ID	Sample Description	Lab #	Start Date/Time	Stop Date/Time	Comp-osite	Grab	*Matrix Code	Conc. Code	Total Arsenic	AS	ANALYSIS REQUESTED	# of containers
* WFC-2I	(Hold)	12191	3/30/09	0910	G	S	U		X			1
* WFC-2L	(Hold)	12192		0930					X			1
* WFC-2J		12193		0935					X			1
* WFC-2M	(Hold)			1050					X			1
* WFC-2N	(Hold)			1105					X			1
* WFB-2I			3/31/09	1115	G	S	U		X			1

laboratory Comments: * activate for AS

Received by: (signature) [Signature] Date/Time: 3/31/09 0955
 Relinquished by: (signature) [Signature] Date/Time: 3/31/09 1655
 Received by: (signature) [Signature] Date/Time: 3/31/09 1655

Turnaround **
 7-Day
 10-Day
 Other 5 Day
 *24-Hr *48-Hr
 *72-Hr *4-Day
 RUSH *
 Require lab approval

Detection Limit Requirements
 Regulations? ACR 5-15-2
 Data Enhancement Project/RCP? Y N
 Special Requirements or D.L.s: See Quote

*Matrix Code:
 GW = groundwater
 WW = wastewater
 DW = drinking water
 A = air
 S = soil/solid
 SL = sludge
 O = other

**Preservation Codes:
 I = Iced
 H = HCL
 M = Methanol
 N = Nitric Acid
 S = Sulfuric Acid
 B = Sodium bisulfate
 O = Other

Please use the following codes to let Con-Test know if a specific sample may be high in concentration in Matrix/Conc. Code Box:
 H - High; M - Medium; L - Low; C - Clean; U - Unknown

Client Comments:
* Add for TSP analysis
AS

TURNAROUND TIME STARTS AT 9:00 A.M. THE DAY AFTER SAMPLE RECEIPT UNLESS THERE ARE QUESTIONS ON YOUR CHAIN. IF THIS FORM IS NOT FILLED OUT COMPLETELY OR IS INCORRECT, TURNAROUND TIME WILL NOT START UNTIL ALL QUESTIONS ARE ANSWERED BY OUR OFFICE.



Phone: 413-525-2332
 Fax: 413-525-6405
 Email: info@contestlabs.com
 www.contestlabs.com

CHAIN OF CUSTODY RECORD

39 SPRUCE ST, 2ND FLOOR
 EAST LONGMEADOW, MA 01028

Company Name: TRC
 Address: 650 Suffolk St
Lowell MA 01854

Attention: David Sullivan

Project Location: City of NB (Wells)

Sampled By: J. Saunders

Proposal Provided? (For Billing purposes)
 Yes No
 Proposal date: 2007

State Form Required?
 Yes No

Telephone: (978) 650-3565
 Project # 115058
 Client PO # 24805

DATA DELIVERY (check one):
 FAX EMAIL WEBSITE CLIENT
 Fax #:
 Email: dsullivan@contestlabs.com
 Format: EXCEL PDF GIS KEY
 OTHER

Field ID	Sample Description	Lab #
*WF-B-2J	(Hold)	1292
Post-3CC		
Post-3DT	(Hold)	
Post-3BR		
Post-3II	(Hold)	
Post-3AA		
Post-3HH	(Hold)	
Post-3E		

Start Date/Time	Step Date/Time	Comp-site	Grab	*Matrix Code	
				Code	Conc. Code
3/30/09	1150	G	S	U	X
	1205				X
	1225				X
	1249				X
	1250				X
	1300				X
3/30/09	1315	G	S	U	X

Analysis Requested	# of containers	**Preservation	-Cont. Code:
Total Arsenic *	1	I	A=amber glass G=glass P=plastic ST=sterile V=vial S=summa can T=tedlar bag O=Other
As	1	I	

Laboratory Comments: SB

Please use the following codes to let Con-Test know if a specific sample may be high in concentration in Matrix/Conc. Code Box:
 H - High; M - Medium; L - Low; C - Clean; U - Unknown

Turnaround Time: 2/5/09 0955
 Date/Time:
 Turnaround by: (signature) [Signature]
 Date/Time: 3/31/09 0955
 Date/Time:
 Turnaround by: (signature) [Signature]
 Date/Time: 3/31/09 1655
 Date/Time:

Turnaround **
 7-Day
 10-Day
 Other: 1 day
 RUSH *
 *24-Hr *48-Hr
 *72-Hr *4-Day
 * Require lab approval

Detection Limit Requirements
 Regulations? MCL 5-1/5-2
 Data Enhancement Project/RCP? Y N
 Special Requirements or DL's: See Route

**Matrix Code:
 GW = groundwater
 WW = wastewater
 DW = drinking water
 A = air
 S = soil/solid
 SL = sludge
 O = other

**Preservation Codes:
 I = Iod
 H = HCL
 M = Methanol
 N = Nitric Acid
 S = Sulfuric Acid
 B = Sodium bisulfate
 X = Na hydroxide
 T = Na thiosulfate
 O = Other

TURNAROUND TIME STARTS AT 9:00 A.M. THE DAY AFTER SAMPLE RECEIPT UNLESS THERE ARE QUESTIONS ON YOUR CHAIN. IF THIS FORM IS NOT FILLED OUT COMPLETELY OR IS INCORRECT, TURNAROUND TIME WILL NOT START UNTIL ALL QUESTIONS ARE ANSWERED.



con-test
ANALYTICAL LABORATORY

Phone: 413-525-2332
Fax: 413-525-6405
Email: info@contestlabs.com
www.contestlabs.com

CHAIN OF CUSTODY RECORD

Lot # 24505

39 SPRUCE ST, 2ND FLOOR
EAST LONGMEADOW, MA 01028

Company Name: TRC
Address: 650 Suffolk St.
Lowell MA 01854

Telephone: (978) 688-3565
Project # 115055
Client PO # _____

Attention: David Sullivan

Object Location: City of NTR (Walsh)
Sampled By: J. Saunders

Proposal Provided? (For Billing purposes)
 Yes 2007 proposal date Yes No State Form Required?

DATA DELIVERY (check one):
 FAX EMAIL WEBSITE CLIENT
Fax # : _____
Email: dsullivan@trcsolutions.com
Format: EXCEL PDF GIS KEY
 OTHER _____

Field ID	Sample Description	Lab #	Start Date/Time	Stop Date/Time	Comp-site	Grab	*Matrix Code	Conc. Code	Total Arsenic *	ANALYSIS REQUESTED	# of containers	**Preservation	-Cont. Code	-Cont. Code:
	Post-366 (Hold)		3/20/09	1330	6	S	U		X	(Hold)				
	Post-3Y (plus MS Rep)			1345					X	(plus MS Rep.)				
	Post-3FE (Hold)			1355					X	(Hold)				
	Post-3EE			1410					X	(Hold)				
	Post-3DD			1420					X	(Hold)				
	Post-3K1K (Hold)		3/20/09	1410	6	S	U		X	(Hold)				

Laboratory Comments: _____

Turnaround Time Starts at 9:00 AM. THE DAY AFTER SAMPLE RECEIPT UNLESS THERE ARE QUESTIONS ON YOUR CHAIN. IF THIS FORM IS NOT FILLED OUT COMPLETELY, IT WILL BE CONSIDERED CORRECT, TURNAROUND TIME WILL NOT START UNTIL ALL QUESTIONS ARE ANSWERED.

Turnaround **
 7-Day
 10-Day
 RUSH *
 *24-Hr *48-Hr
 *72-Hr *4-Day
 * Require lab approval

Detection Limit Requirements
 Regulations? MS 5-1/5-2
 Data Enhancement Project/RCP? Y N
 Special Requirements or DL's: See Rate

**Matrix Code:
 GW = groundwater
 WW = wastewater
 DW = drinking water
 A = air
 S = soil/solid
 SL = sludge
 O = other

**Preservation Codes:
 I = lead
 H = HCL
 M = Methanol
 N = Nitric Acid
 S = Sulfuric Acid
 B = Sodium bisulfate
 O = Other

Client Comments:
Hold for TAP analysis

tferrentino@contestlabs.com

From: "Sullivan, Dave (Lowell,MA-US)" <DSullivan@TRCSOLUTIONS.com>
To: "Theresa Ferrentino" <tferrentino@contestlabs.com>
Cc: "Zhou, Ping (Lowell,MA-US)" <PZhou@trcsolutions.com>; "Silverman, Diane (Lowell,MA-US)" <DSilverman@trcsolutions.com>; "Denly, Elizabeth (Lowell,MA-US)" <edenly@trcsolutions.com>
Sent: Wednesday, April 15, 2009 5:52 PM
Subject: More Walsh Field Hold Authorizations

Theresa:

Please see attached chain scans.

Please proceed with the analysis of the following:

WFC-2 "L", "M", and "N" – arsenic
WFB-2 "J" – arsenic

Thanks,

-Dave

David M. Sullivan, LSP, CHMM
Senior Project Manager



PARTNER OF THE YEAR

TRC
Wannalancit Mills
650 Suffolk Street
Lowell, Massachusetts 01854

978-656-3565 phone
978-453-1995 fax
978-758-2809 cell
dsullivan@trcsolutions.com

SAMPLE REACTIVATION FORM

COMPANY TRC-LOWELL

LOCATION ON-HOLD FRIDGE

CONTACT Dave Sullivan

PROJECT ID _____

CONTACT PHONE _____

FAX _____

DATE 4/15/09 TIME 9:00AM

TAT 48 hr DUE DATE _____

REQUEST TAKEN BY TRF

GIVEN TO log-in

ACTIVATION REQUEST:

See Attached Email

SPECIAL INSTRUCTIONS AND TERMS:

FAXED TO CONTACT FOR APPROVAL: Y N

ACTIVATION IS CORRECT PER OUR REQUEST _____ DATE _____
INITIALS

CONTEST FINAL APPROVAL _____