

## LABORATORY REPORT

Franklin Health Department  
Attn: Ginny McNeil  
355 East Central Street  
Franklin, MA 02038

**Date Received:** 7/19/2022  
**Date Reported:** 7/21/2022  
**P.O. Number**

**Work Order #:** 2207-11971

**Project Name:** CHILSON BEACH

Enclosed are the analytical results and Chain of Custody for your project referenced above. The sample(s) were analyzed by our Warwick, RI laboratory unless noted otherwise. When applicable subcontracted results are noted and subcontracted reports are enclosed in their entirety.

All samples were analyzed within the established guidelines of US EPA approved methods with all requirements met, unless otherwise noted at the end of a given sample's analytical results or in a case narrative.

The Detection Limit is defined as the lowest level that can be reliably achieved during routine laboratory conditions.

These results only pertain to the samples submitted for this Work Order # and this report shall not be reproduced except in its entirety.

We certify that the following results are true and accurate to the best of our knowledge. If you have questions or need further assistance, please contact our Customer Service Department.

Approved by:



---

Brent Plant  
Data Reporting

Laboratory Certification Numbers (as applicable to sample's origin state):  
Warwick RI \* RI LAI00033, MA M-RI015, CT PH-0508

**R.I. Analytical Laboratories, Inc.****Laboratory Report**

Franklin Health Department

Work Order #: 2207-11971

**Project Name:** CHILSON BEACH

---

**Sample Number:** 001  
**Sample Description:** CHILSON BEACH  
**Sample Type :** GRAB  
**Sample Date / Time :** 7/19/2022 @ 10:00

<b>PARAMETER</b>	<b>SAMPLE RESULTS</b>	<b>DET. LIMIT</b>	<b>UNITS</b>	<b>METHOD</b>	<b>DATE/TIME ANALYZED</b>	<b>ANALYST</b>
E. Coli 18 Hour	54.6	1.0	MPN/100 ml	SM9223B	7/19/2022 16:48	MS



# CHAIN OF CUSTODY RECORD

41 Illinois Avenue  
Warwick, RI 02888-3007  
Tel: 800-937-2580

131 Coolidge St., Suite 105  
Hudson, MA 01749-1331  
Tel: 800-937-2580

Date Collected	Time Collected	Field Sample Identification
7-19-02	10:00 am	Chilson Beach

### Grab or Composite

# of Containers & Type<sup>C</sup>Preservation Code <sup>P</sup>Matrix Code <sup>M</sup>

E.coli (MPN)

### Client Information

Company Name: **Franklin Health Department**

Address: **355 East Central Street**

City / State / Zip: Franklin, MA 02038

**Main Telephone: 508-520-4905**

**Contact Person:** **Ginny McNeill**

### Project Information

Project Name: **Beach Monitoring**

P.O. Number:

Report To: **Ginny McNeill**

Quote No: RIA2107020

**Email addresses**  
 cliberty@franklinma.gov  
 gmcneill@franklinma.gov  
 rjette@franklinma.gov  
 franklin@creationfranklinma.gov

addresses  
rjette@franklinma.gov  
franklinrecreation@franklinma.gov

### Relinquished By Signatures

**Dat**

## Time

Received By Signatures

Data

Time

## Turn Around Time

Normal,

**5-7 Business days**

2 Business Days

### Reporting Options

MCP Standard

MWR eSMART

State Report &amp; Upload

Project Comments

**Lab Use Only**

### Sample Pick Up Only

### RLAL sampled; attach field hours

Received on Ice	No Ice
-----------------	--------

[illegible]

Workorder No: 2207-1971

Containers: P=Poly, G=Glass, AG=Amber Glass, V=Vial, S=Sterile Preservatives: A=Ascorbic Acid, NH4=NH<sub>4</sub>Cl, DI=DI-H<sub>2</sub>O, H=HCl, M=MeOH, N=HNO<sub>3</sub>, NP=None, S=H<sub>2</sub>SO<sub>4</sub>,  
Matrix Codes: GW=Groundwater, SW=Surface Water, WM=Wastewater, DW=Drinking Water, S=Soil, SL=Sludge, A=Air, B=Bulk/Solid, WP=Wipe, O=

Temp. Upon Receipt °C

Workorder No: 2207-11971

Page of

Page of