



429 River Lane • PO Box 27 Amasa, MI 49903 • (906) 822-7889

Client: Republic Township
Project: WSSN 5660
Date Received: 6/5/2023

WWA Job #: 105467
Sample Matrix: Drinking water
Date Reported: 6/7/2023

Sample Number | ID | Description | Date/Time Sampled

105467-001 | 9485 Willow Dr. | Plant Tap | TP001/Plant | 6/5/2023 9:05:00 AM

Test	Result	Flags	Units	Date/Time	Method	MDL	ML	Analyst
Coliforms (dw)	Negative		per 100mL	6/5/2023 10:15	9223B	1	1	BL
E. coli	Negative		per 100mL	6/5/2023 10:15	9223B	1	1	BL

105467-002 | 9485 Willow Dr. | Well 3A | TP001/Plant | 6/5/2023 9:05:00 AM

Test	Result	Flags	Units	Date/Time	Method	MDL	ML	Analyst
Coliforms (dw)	Negative		per 100mL	6/5/2023 10:15	9223B	1	1	BL
E. coli	Negative		per 100mL	6/5/2023 10:15	9223B	1	1	BL

105467-003 | 9485 Willow Dr. | Well 4 | TP001/Plant | 6/5/2023 9:05:00 AM

Test	Result	Flags	Units	Date/Time	Method	MDL	ML	Analyst
Coliforms (dw)	Negative		per 100mL	6/5/2023 10:15	9223B	1	1	BL
E. coli	Negative		per 100mL	6/5/2023 10:15	9223B	1	1	BL

105467-004 | 9485 Willow Dr. | Well 1 | TP001/Plant | 6/5/2023 9:05:00 AM

Test	Result	Flags	Units	Date/Time	Method	MDL	ML	Analyst
Coliforms (dw)	Negative		per 100mL	6/5/2023 10:15	9223B	1	1	BL
E. coli	Negative		per 100mL	6/5/2023 10:15	9223B	1	1	BL

105467-005 | 279 Kloman Ave | DBP1/DIST | 6/5/2023 9:29:00 AM

Test	Result	Flags	Units	Date/Time	Method	MDL	ML	Analyst
Coliforms (dw)	Negative		per 100mL	6/5/2023 10:15	9223B	1	1	BL
E. coli	Negative		per 100mL	6/5/2023 10:15	9223B	1	1	BL



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CERTIFICATION

I certify that the data contained in this Final Report has been generated and reviewed in accordance with approved methods and White Water Associates Standard Operating Procedures. Exceptions, if any, are discussed in the accompanying sample narrative. Release of this Final Report is authorized by White Water Associates management, as is verified by the following signature.

Approved By: Electronically signed by Bette Premo

Lab Director

NOTES

- ND = not detected, MDL = method detection limit, MQL = method quantitation limit
- ppm = mg/L (liquid) or mg/kg (solid), ppb = ug/L (liquid) or ug/kg (solid)
- Negative or Absent = No coliform bacteria detected
- Positive or Present = Coliform bacteria detected
- B The analyte was found in the associated blank as well as in the sample.
- H Indicates analytical holding time exceedance.
- J The quantitation is an estimated value because the result is less than the sample quantitation limit but greater than the detection limit.
- M A matrix effect was present.
- V Insufficient sample volume received (100 ml is required by MI EGLE).
- * RPD/RSD exceeds limits.
- # Indicates reading exceeds US EPA Maximum Contaminant Level for Arsenic (10 ug/L).
- † Indicates reading exceeds US EPA Action Level for Copper (1300 ug/L).
- ‡ Indicates reading exceeds US EPA Action Level for Lead (15 ug/L).
- ¶ Indicates reading exceeds US EPA Maximum Contaminant Level for Nitrate (10 mg/L).
- § Indicates reading exceeds US EPA Maximum Contaminant Level for Nitrite (1.0 mg/L).

MI EGLE Certification Number: 9306
WI DATCP 516252



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WWA Job #: 105467
Date Reported: 6/7/2023

Date logged in.: 6/5/2023 **Number of coolers:** 0

Login Checklist

Login person's initials: BL **Courier/shipper:** Client

- 01) The COC is signed. (either Sampler or Relinquished by)
- 02) Custody seals/original packing tape were intact (if applicable).
- 03) Samples are in good condition, i.e. not broken or leaking.
- 04) Samples matched the Chain of Custody (COC).
- 05) Samples were received within holding times.
- 06) Samples were received on ice (in direct contact with the samples). **Comments:**
- 07) Temperature of the samples was between 0-6°C. **08) Temp.:**
Observed Corrected
- 09) Proper containers were used.
- 10) Samples were collected in White Water lab containers.
- 11) There is adequate sample volume for requested analyses and QC.
- 12) Samples are preserved to the proper pH. Sample bottles and preservation are noted in LIMS Sample Container Section.
- 13) Sub-sampling (SS) is required. Bottles created are noted in sample containers section of log-in form.
- 14) For Dissolved Analysis (when applicable), samples were filtered in the lab.
- 15) For water VOC samples, headspace is less than the size of a pea.
- 16) For soil VOCs, methanol preserved samples were received.
- 17) For Soil VOCs, samples were preserved with methanol in the lab.
- 18) Client contact is necessary. Provide documentation below.

COMMENTS/CORRECTIVE ACTION

CLIENT RESPONSE

Note: Samples not between 0-6°C that are received at the laboratory on the day of sample collections do not require client notification.

Note: If hold time, volume, and received on ice or temperature criteria are not met when required by the method, results may not be able to be used for regulatory purposes. Check with your reporting agency for more information.

Job # (WWA office use):

105467

CHAIN-OF-CUSTODY RECORD



429 River Lane, P.O. Box 27
Amasa, Michigan 49903

Phone: (906) 822-7889, Fax -7977
Web: white-water-associates.com

CLIENT NAME / BILL TO <i>Republic Township</i>		EMAIL ADDRESS <i>DPW@Northpines.net</i>
ADDRESS <i>279 Kroman Ave / Po Box 338</i>		TELEPHONE <i>(906) 376-2303</i>

CITY <i>Republic</i>	STATE <i>Mi</i>	ZIP <i>49879</i>	CONTRACT / PO / PROJECT NAME / WSSN# <i>5660</i>
SAMPLER NAME (print first/last name) <i>Lloyd Milner</i>		COUNTY OF LOCATION <i>Marquette</i>	PAGE <i>1</i> OF <i>1</i> <small>Indicate if more than one page of COC records used</small>
SAMPLER'S SIGNATURE <i>Lloyd Milner</i>		<small>Check off preservatives for each bottle upon arrival and indicate total number of bottles. WWA database contains bottle preservation details.</small>	

ANALYSIS TYPE REQUESTED (Attach list if needed)

<i>Drinking</i>																				
<i>Water</i>																				

Instructions to White Water
Send my report by:
 email
 mail

Unless otherwise noted, drinking water report copies are sent to MDEQ and Health Dept.

REMARKS (Note any special instructions provided by client or conditions of receipt noted by WWA lab staff. Also note any residual chlorine.)

SAMPLE ID AND LOCATION <small>Containers for each sample may be combined on one line.</small>	DATE	TIME	SAMPLE MATRIX					CONTAINERS / PRESERVATIVES							Total Number of Containers	<i>Total Coliform Drinking Water</i>				
			Drinking water	Aqueous	Sed.	Soil	Other.	None	H2SO4	HNO3	HCl	NaOH	ZnAc/NaOH	Na Thio						
<i>9485 Willow Dr</i>	<i>6-5-23</i>		<i>x</i>													<i>x</i>	<i>1</i>	<i>x</i>		
<i>Site Code TPool</i>																				
<i>1 Plant Tap</i>		<i>9:05</i>																		
<i>2 Well 3A</i>		<i>9:05</i>																		
<i>3 Well 4</i>		<i>9:05</i>																		
<i>4 Well 1</i>		<i>9:05</i>																		
<i>5 279 Kroman Ave</i>	<i>6-5-23</i>																			
<i>Site Code DBP1</i>		<i>9:29</i>																		

Relinquished by: <i>[Signature]</i>	Date: <i>6/5/23</i>	Time: <i>9:44</i>	Received by: <i>Brian In Anzelle</i>	Date: <i>6-5-23</i>	Time: <i>9:44</i>	Comments/Sample temp. on receipt: <i>16.7 17</i>	Packing: Ice Cooler <i>NO</i>
Relinquished by:	Date:	Time:	Received by:	Date:	Time:		

WHITE - RETURN W/ REPORT

CANARY - W/ SAMPLES

PINK - CUSTOMER

UPS FedEx USPS Client Other _____