

N.Y.S. Approved ELAP
ID: 10708

Converse Laboratories, Inc.
800 Starbuck Ave. Suite B101
Watertown, NY 13601
(315) 788-8388

U.S.P.H. Certified
36144

* Laboratory Report Form *

Sylvia Lake Association
1 Indian Head Trail
Gouverneur, NY 13642

Client ID 7607185
Attention: William deLorraine
Report Date 07/20/2017

Sample ID: 01707082 Sample Type: Lake Water
Sample Date: 07/19/17 Sample Time: 0805 Sample Site: PUMPHOUSE BAY
Received Date: 07/19/17 Received Time: 1013 Sampled By: W.D.

Analysis	Results	Method Code	Lab ID	Date	Time	Tech
E. COLI	1.0 MPN/100ml	SM-21-9223B	10708	7/19/2017	1050	JLT
TOTAL COLIFORM	268.2 MPN/100ml	SM-21-9223B	10708	7/19/2017	1050	JLT

Sample ID: 01707083 Sample Type: Lake Water
Sample Date: 07/19/17 Sample Time: 0808 Sample Site: INLET BAY
Received Date: 07/19/17 Received Time: 1013 Sampled By: W.D.

Analysis	Results	Method Code	Lab ID	Date	Time	Tech
E. COLI	1.0 MPN/100ml	SM-21-9223B	10708	7/19/2017	1050	JLT
TOTAL COLIFORM	233.3 MPN/100ml	SM-21-9223B	10708	7/19/2017	1050	JLT

Sample ID: 01707084 Sample Type: Lake Water
Sample Date: 07/19/17 Sample Time: 0812 Sample Site: OUTLET
Received Date: 07/19/17 Received Time: 1013 Sampled By: W.D.

Analysis	Results	Method Code	Lab ID	Date	Time	Tech
E. COLI	1.0 MPN/100ml	SM-21-9223B	10708	7/19/2017	1050	JLT
TOTAL COLIFORM	238.2 MPN/100ml	SM-21-9223B	10708	7/19/2017	1050	JLT

Key: mg/L - Milligrams Per Liter
ml/L - Milliliters Per Liter
100 ml - Size of Coliform Container
CFU/ml - Colony Forming Units per Milliliter
ND - None Detected
TNTC - Too Numerous to Count

All times shown in 24 hour format

E - Estimated Value


Supervisor



The information in this report is accurate to the best of our knowledge and ability.
In no event shall our liability exceed the cost of these services.
I certify that these results conform to New York State Department of Health Standards and requirements
(10 NYCRR Subpart 55 - 2).

Sample results are based on samples as they are received, unless sampled by Converse
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1 Indian Head Trail
Gouverneur, NY 13642

Client ID 7607185
Attention: William deLorraine
Report Date 07/20/2017

Sample ID: 01707085 Sample Type: Lake Water
Sample Date: 07/19/17 Sample Time: 0815 Sample Site: PUBLIC BEACH
Received Date: 07/19/17 Received Time: 1013 Sampled By: W.D.

Analysis	Results	Method Code	Lab ID	Date	Time	Tech
E. COLI	2.0 MPN/100ml	SM-21-9223B	10708	7/19/2017	1050	JLT
TOTAL COLIFORM	103.9 MPN/100ml	SM-21-9223B	10708	7/19/2017	1050	JLT

Sample ID: 01707086 Sample Type: Lake Water
Sample Date: 07/19/17 Sample Time: 0820 Sample Site: HOTEL BAY
Received Date: 07/19/17 Received Time: 1013 Sampled By: W.D.

Analysis	Results	Method Code	Lab ID	Date	Time	Tech
E. COLI	<1.0 MPN/100ml	SM-21-9223B	10708	7/19/2017	1050	JLT
TOTAL COLIFORM	90.9 MPN/100ml	SM-21-9223B	10708	7/19/2017	1050	JLT

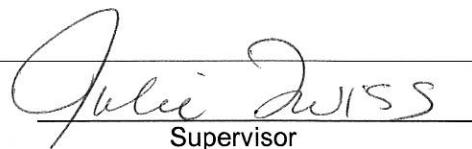
Sample ID: 01707087 Sample Type: Lake Water
Sample Date: 07/19/17 Sample Time: 0825 Sample Site: ROBINSONS POINT
Received Date: 07/19/17 Received Time: 1013 Sampled By: W.D.

Analysis	Results	Method Code	Lab ID	Date	Time	Tech
E. COLI	1.0 MPN/100ml	SM-21-9223B	10708	7/19/2017	1050	JLT
TOTAL COLIFORM	129.6 MPN/100ml	SM-21-9223B	10708	7/19/2017	1050	JLT

Key: mg/L - Milligrams Per Liter
ml/L - Milliliters Per Liter
100 ml - Size of Coliform Container
CFU/ml - Colony Forming Units per Milliliter
ND - None Detected
TNTC - Too Numerous to Count

All times shown in 24 hour format

E - Estimated Value


Supervisor



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Chain of Custody

Sylvia Lake Association Client Address: 1 Indian Head Trail Gouverneur, NY 13642		Client Project ID / PO#:		Matrix Codes DW= Drinking Water GW= Ground Water WW= Wastewater SL= Sludge SW= Surface Water SO= Soil		Sample Information: <input type="checkbox"/> Finished <input type="checkbox"/> Raw <input type="checkbox"/> Chlorinated <input type="checkbox"/> UV <input type="checkbox"/> OTHER: _____	
Phone #: 315-287-4652 Cell #: 315-775-6286		E-Mail address: wdel11e@gmail.com		Contact/Report to: William deLorraine		PLEASE NOTE: Reports will be forwarded to your DOH.	
Sampler: William deLorraine		Chlorine Residual		Preservative Codes 1= Na ₂ S ₂ O ₃ 2= HCl 3= H ₂ SO ₄ 4= HNO ₃ 5= NaOH 6= Asorbic Acid 7= NH ₄ CL 8= Unpres. 9=		NOTES TO LABORATORY Normal TAT <input type="checkbox"/> Rush TAT <input type="checkbox"/> Date Needed: _____ a.m. / p.m.	
G = Grab C = Composite		Matrix - see codes above		List Preservative Code Below 1 2 3 4 5 6 7 8		ANALYSIS / TEST REQUESTED	
Sample Identification		Sample Identification		SAMPLE ID # (lab use only)			
Date Collected	Time Collected	Date		Time		SAMPLE ID # (lab use only)	
7-19-17	8:05 AM	Sylvia Lake Pump house Bay		8:05		7082	
"	8:08	Inlet Bay		8:08		7083	
"	8:12	Outlet		8:12		7084	
"	8:15	Public Beach		8:15		7085	
"	8:20	Hotel Bay		8:20		7086	
"	8:25	Robinsons Point		8:25		7087	
Relinquished by: William deLorraine		Received by: Sue Duggan		Time		AUTHORIZED RECIPIENTS & CONTACT INFO.	
Date	Time	Date		Time		ICED?	
7-19-17	10:13 AM	7/19/17		10:13		Yes/No	
SAMPLE(S) AS RECEIVED CONFORM TO NELAC STANDARDS		SAMPLE(S) AS RECEIVED CONFORM TO NELAC STANDARDS		YES		NO	
IF NO, SEE ATTACHED SHEET		IF NO, SEE ATTACHED SHEET		YES		NO	

Doc. # 357

1/19/2015

Rev. # 115

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Amt. Due

Amt. Paid: 0

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Initial Review: syD 2/19/17

Transcriptual Rev.: ~~QMB~~ 7/26/17

Final Review: 10/7/2015