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|-----------------------------------|
| <b>Lab ID. #</b><br><b>107831</b> |
|-----------------------------------|

|            |  |
|------------|--|
| <b>To:</b> | Duxbury Board of Health<br>Attn: Ms. Tracy Mayo<br>878 Tremont Street<br>Duxbury, MA 02332 |
|------------|--|

|                     |                   |
|---------------------|-------------------|
| Received Date/Time: | 6/28/23, 9:20 AM  |
| Analyzed Date/Time: | 8/28/23, 11:05 AM |
| Reported Date:      | 6/29/23           |
| Collected By:       | Client            |
| Collection Date:    | 6/28/23           |

### ANALYTICAL RESULTS

| Sample#                          | Sampling Location               | Sampling Time | Enterococci (MPN/100mL)  |
|----------------------------------|---------------------------------|---------------|--------------------------|
| 1                                | Landing Road                    | 7:47 AM       | 10                       |
| 2                                | Shipyards Lane                  | 7:37 AM       | <10                      |
| 3                                | West End                        | 7:01 AM       | 31                       |
| 4                                | Residents Beach (Duxbury Beach) | 7:07 AM       | <10                      |
| 5                                | Duxbury Beach @ Bath House      | 7:23 AM       | <10                      |
| <b>Maximum Contaminant Level</b> |                                 |               | <b>104</b>               |
| <b>Method of Reference</b>       |                                 |               | <b>Enterolert Method</b> |

**Laboratory QC Results**

| QC               | Unit  | Enterococci |
|------------------|-------|-------------|
| Duplicate (D1)   | 100mL | 10          |
| Duplicate (D2)   | 100mL | 20          |
| Dilution Blank   | 100mL | < 1         |
| Negative Control | 100mL | Negative    |
| Positive Control | 100mL | Positive    |

Approved By:  6/29/23  
 Lab. Director Date



# CHAIN OF CUSTODY RECORD

LAB I.D. #: 107831

DUE DATE: \_\_\_\_\_

246 Arlington Street, Quincy, MA 02170  
Tel: (617) 328-3663 Fax: (617) 472-0706

COMPANY: Duxbury Board of Health  
ADDRESS: 114 97 Soule Ave.  
PHONE #: 847-772-9263 FAX #: \_\_\_\_\_  
P.O. #: Hache@duxbury-ma.gov  
CLIENT CONTACT: Lauren Hache  
PROJECT ID/LOCATION: \_\_\_\_\_

E-MAIL: Hache@Duxbury-ma.gov

## ANALYSES

- SAMPLE TYPE CONTAINER TYPE
- 1 WATER P - PLASTIC
  - 2 SOIL G - GLASS
  - 3 SLUDGE V - VOA
  - 4 OIL
  - 5 TISSUE
  - 6 DRINKING WATER
  - OTHER

*Enter code!*

| SAMPLE IDENTIFICATION               | SAMPLE TYPE            | CONTAINER                       |                      | SAMPLING   |      | PRESERVATIVE | COMMENTS |
|-------------------------------------|------------------------|---------------------------------|----------------------|--|------|--------------|----------|
|                                     |                        | SIZE                            | TYPE #               | DATE   | TIME |              |          |
| 1 Landing Rd.                       | I                      |                                 | P                    | 6/28   | 7:17 | ✓            |          |
| 2 Shipyard                          |                        |                                 |                      |  | 7:39 | ✓            |          |
| 3 West End                          |                        |                                 |                      |  | 7:01 | ✓            |          |
| 4 Resident beach                    |                        |                                 |                      |  | 7:07 | ✓            |          |
| 5 bathhouse                         |                        |                                 |                      |  | 7:23 | ✓            |          |
| <i>Sample Collected By:</i>         |                        |                                 |                      |  |      |              |          |
| RELINQUISHED BY: <u>[Signature]</u> | DATE: <u>6-18-2013</u> | RECEIVED BY: <u>[Signature]</u> | DATE: <u>6-28-23</u> | SPECIAL INSTRUCTIONS   |      |              |          |
| RELINQUISHED BY: <u>[Signature]</u> | TIME: <u>9:51 AM</u>   | RECEIVED BY: <u>[Signature]</u> | TIME: <u>6:28 AM</u> | <input type="checkbox"/> RUSH, ..... BUSINESS DAY TURNAROUND<br><input type="checkbox"/> ROUTINE<br>Sample Disposal Information<br>Are there any other known or suspected contaminants in these samples other than those listed above? |      |              |          |
| RELINQUISHED BY: <u>[Signature]</u> | DATE: <u>9-20-AM</u>   | RECEIVED FOR LAB BY: <u>xc</u>  | DATE: <u>9-20-AM</u> | <input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> If Yes, list known   |      |              |          |
| METHOD OF SHIPMENT                  |                        |                                 |                      |  |      |              |          |

# Beach Sampling Field Data

Revised 2018

Lab# 107831

Town/City: Dixbury  
 Date Collected: Lauren Haché  
 Collected by: 6/28/2023

Time Delivered to Lab: 9:20 AM  
 Delivered by: KM  
 Relinquished to: XC

| ID #    | Sample Location<br><small>If beach has multiple samples, note location.</small> | Marine or Fresh | Sample Time | Water Clarity: |              | Water Temp (°F) | Wave Intensity: |        |       | Days Since Rain<br><small>'0' if within 24 hrs.</small> | Potential Pollution Sources - if none, check "none" |         |        |       |       |                     |       |      |
|---------|---|-----------------|-------------|----------------|--------------|-----------------|-----------------|--------|-------|---|---|---------|--------|-------|-------|---------------------|-------|------|
|         |   |                 |             | Clear          | Partly Murky |                 | Cal             | Normal | Rough |   | # People in Water                                   | # Birds | # Dogs | Algae | Trash | Animal/ Human waste | Wrack | None |
| Example | Sandy Beach   | M               | 9:30 am     | C              | (M)          | 68              | (C)             | N      | R     | 0   | 0   | 5       | 0      |       |       |                     |       |      |
| Example | Sunset Pines  | F               | 6:35 am     | C              | (P)          | 72              | C               | (N)    | R     | 7   | 7   | 0       | 0      | ✓     |       |                     |       |      |
| Example | Excellent Point   | F               | 1:00 am     | (C)            | P            | 70              | C               | N      | (R)   | 2   |   |         |        |       |       |                     |       | ✓    |
| 1       | Landing Road  | M               | 7:47A       | C              | P            | 63              | C               | N      | R     | 0   | 0   | 0       | 0      |       |       |                     |       | ✓    |
| 2       | Shipyard  |                 | 7:57A       | C              | (P)          | ↓               | (C)             | N      | R     | 0   | 0   | 0       | 0      |       |       |                     |       | ✓    |
| 3       | West End  |                 | 7:01A       | C              | (P)          | ↓               | C               | (N)    | R     | 0   | 0   | 0       | 0      |       |       |                     |       | ✓    |
| 4       | Residents   |                 | 7:07A       | (C)            | P            | ↓               | C               | (N)    | R     | 0   | 0   | 0       | 0      |       |       |                     |       | ✓    |
| 5       | Dix Beach Bath House  | ↓               | 7:13A       | C              | (P)          | ↓               | C               | N      | (R)   | 0   | 0   | 0       | 0      |       |       |                     |       | ✓    |
|         |   |                 |             | C              | P            |                 | C               | N      | R     |   |   |         |        |       |       |                     |       |      |
|         |   |                 |             | C              | P            |                 | C               | N      | R     |   |   |         |        |       |       |                     |       |      |
|         |   |                 |             | C              | P            |                 | C               | N      | R     |   |   |         |        |       |       |                     |       |      |
|         |   |                 |             | C              | P            |                 | C               | N      | R     |   |   |         |        |       |       |                     |       |      |
|         |   |                 |             | C              | P            |                 | C               | N      | R     |   |   |         |        |       |       |                     |       |      |
|         |   |                 |             | C              | P            |                 | C               | N      | R     |   |   |         |        |       |       |                     |       |      |
|         |   |                 |             | C              | P            |                 | C               | N      | R     |   |   |         |        |       |       |                     |       |      |

Cloud Cover:  Clear  Partly Cloudy  Cloudy/Overcast  
 Comments: Rain and Thunder

A copy of this form must be included with the samples when they are submitted to the lab.