



CERTIFICATE OF ANALYSIS

HUDSON BOARD OF HEALTH
S.Samuel Wong
TOWN HALL, 78 MAIN STREET
HUDSON, MA 01749

Date Reported 7/8/2015
Date Received 7/6/2015
Sample ID 1523306
Invoice No.
Cust # FH141
Cust P.O. #

Subject Centennial Beach Beach Water Testing

Test	Result	Reg. Limit	Date	Time	Tech	Method	Comment
01	Sample Collected: 7/7/2015 10:35:00AM		Sampled By:	RICH BREAUULT			
CENTENNIAL BEACH							
E. coli	<1 EST MPN/100 mL	235	7/8/2015	9:37	cpt	SM20 9223B	Satisfactory

Reviewed and Approved By:

Manish Shekhawat For Nancy Burnett
Laboratory Director Deputy

For any feedback concerning our services, please contact Manish Shekhawat, Laboratory Director at 508.595.0010. You may also contact J. Trevor Boyce, President at president@microbac.com

The state of Massachusetts does not offer certification in drinking water for the following parameters: Magnesium, Iron, Manganese, Potassium, Chloride, Color, Odor, Conductivity, Hardness, Ammonia

Regulatory Limits are from Federal and State Guidance documents. As regulatory limits change frequently, Microbac advises the recipient of this report to confirm such limits with the appropriate Federal, state or local authorities before acting in reliance on the regulatory limits provided. Comments as to whether or not any particular sample is satisfactory is based solely upon regulatory limits and guidelines.

The data and information on this, and other accompanying documents, represent only the sample(s) analyzed and are rendered upon condition that it is not to be reproduced wholly or in part for advertising or other purposes without approval from the laboratory.

Microbac Laboratories, Inc.

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1523306**WORK ORDER**

Printed: 7/2/2015 10:00:41AM

Microbac Laboratories, Inc - Massachusetts Division



Client: HUDSON BOARD OF HEALTH

Route: MA Beaches

Project: Centennial Beach

Project Number: Beach Water Testing

Client # FH141

Project Manager: Nancy Burnett

Report To:

HUDSON BOARD OF HEALTH
S.Samuel Wong
TOWN HALL, 78 MAIN STREET
HUDSON, MA 01749
Phone: (978) 568-9625
Fax: (978) 562-8508

Invoice To:

HUDSON BOARD OF HEALTH
S.Samuel Wong
TOWN HALL, 78 MAIN STREET
HUDSON, MA 01749
Phone : (978) 568-9625
Fax: (978) 562-8508

Date Collected: 7-7-15 Time Collected: 1035 Collected By: RB
Date Relinquished: 7-7-15 Time Relinquished: 1345 Relinquished By: RB
Date Received: 7-7-15 Time Received: 1345 Received By: UMS

Sample ReceiptField Sampling Temperature: 25.2 °C

Custody Seals

Y/N

Received On Ice (Y) N

Containers Intact

Y/N

COC/Labels Agree

Y/N

Preservation Confirmed

Y NTemperature 9 °C

Analysis

Comments

1523306-01 CENTENNIAL BEACH

MA_Collection Fee

MA_E.Coli, Colilert 18

Beach Sampling Field Data Form

Town/City of Collection: HUDSON Date Collected: 7-7-15 Collected By: [Signature]		Time Delivered to Lab: 1347 Delivered By: [Signature] Relinquished To: LMS	
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Instructions: Collect sample(s) in areas of greatest bather load and at locations subject to contamination at a uniform depth of 3 feet. Collect samples 12 inches below water surface. Do not collect samples within 6 inches of bottom.

Sample ID	Sample Location (Note beach and sampling location)	Marine or Fresh	Sample Time	Water Clarity	Water Temp (°F)	Days Since Rain (0' if w/in 24 hrs.)	Bather Density (in water) (Circle appropriate # range)			Observations of bathing water
	CENTENNIAL BEACH	FRESH	1035	Clear	77.0	3	0-10	11-20	20-50	>50
				Clear			0-10	11-20	20-50	>50
				Clear			0-10	11-20	20-50	>50
				Clear			0-10	11-20	20-50	>50
				Clear			0-10	11-20	20-50	>50
				Clear			0-10	11-20	20-50	>50
				Clear			0-10	11-20	20-50	>50
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				Clear			0-10	11-20	20-50	>50
				Clear			0-10	11-20	20-50	>50
				Clear			0-10	11-20	20-50	>50
				Clear			0-10	11-20	20-50	>50
				Clear			0-10	11-20	20-50	>50
				Clear			0-10	11-20	20-50	>50



Observations: T=Trash WS=Waste Solids SD=Sludge Deposit O=Oils A=Algae F=Fish die-offs J=Jellyfish B=Birds D=Dogs N=None
Current Weather Condition: Cloudy/Overcast
Air Temp: 77 °F **Wind Direction:** _____

Comments: _____

Please Note: This form MUST be utilized upon collection of samples and filled out in its entirety. For reporting purposes, a copy must be submitted to MDPH with any results.