

#### Trace Laboratories, Inc. Maryland

5 North Park Drive Hunt Valley, MD 21030 Telephone: 410/252-7742 Telephone: 410/584-9099 Fax: 410/584-9117 Email: tracelab@connext.net www.tracelabs.com

Maryland State Certified Water Quality Laboratory No. 318

ISO 9001:2000





### CERTIFICATE OF ANALYSIS

Requester:

Mr. Brian Groverman

Brian's Catering

4725 Dorsey Hall Drive Station 909

Ellicott City, Maryland 21042

**Property Sampled:** 

11310 Barley Field Way

County:

Howard

Tax Map #:

**S/O Number:** 66108

**Report Date:** 

10

November 15, 2007

Subdivision:

Woodfords Grant

Parcel #:

27

**Date/Time Collected:** 

November 14, 2007 at 10:35 am

Date/Time Received:

November 14, 2007 at 2:45 pm

Sample Location:

Hand Wash Tap by Tri-Sink

Sampler ID:

6308KW

Samples Iced:

Yes

Residual Cl<sub>2</sub> < 0.1 mg/L:Yes

Well Tag Number:

HO-94-1699

Well Condition:

2-Piece Cap

Satisfactory

Water Conditioning/Treatment:

Not Observed

| PARAMETER      | RESULT | метнор   | MCL    |      |
|----------------|--------|----------|--------|------|
| Total Coliform | Absent | SM 9223B | Absent | Pass |
| E.coli         | Absent | SM 9223B | Absent | Pass |

Allison R. Milburn

Manager-Drinking Water Testing

## CASSELL TESTING, INC.

Maryland State Certified Water Quality

ENVIRONMENTAL SAMPLING AND TESTING 10940 BEAVER DAM ROAD, HUNT VALLEY, MD 21030-2211 (410) 252-7742

CERTIFICATE OF ANALYSIS

### REPORT DATE:

Nov 4, 2005

County

Howard

Lab Number

06-934

Sample iced Residual Cl, <0.1 mg/L

cc: County Health Dept.

Yes Yes

Brian's Catering

Mr. Brian Groverman

4725 Dorsey Hall Drive

Station 909

Ellicott City, Maryland 21042 Yes

**Property Sampled:** 

Laboratory No. 115

REQUESTER:

11310 Barley Field Way, retest #1

Station Sampled:

3 compartment sink tap

Tax Map #: 10

Date/Time Sampled:

Nov 3, 2005

11:30 am

Parcel #: 27

Owner, Telephone No.:

Groverman

Sampler:

5226SB

Subdivision Name:

Woodfords Grant

Lot Number:

**Building Permit No.:** 

Well Number:

HO-94-1699

Observation:

2-Piece Cap

Satisfactory

# **RESULTS OF ANALYSIS:**

PARAMETER

RESULT

METHOD

\*MCL/\*\*SMCL

Total Coliform E. coli

Absent Absent SM 9223B SM 9223B

\*Absent \*Absent SAFE SAFE

\*MCL = Maximum Contamination Level \*\*SMCL = Secondary Maximum Contamination Level

Sharon K. Cassell