Environmental and Waste Management Services

BROOKHAVEN
NATIONAL LABORATORY

120 E. Fifth Ave., Bldg. 860
P. O. Box 5000
Upton, NY 11973-5000
Phone 631 344-4549
Fax 631 344-7334
goode@bnl.gov

Managed by Brookhaven Science Associates
for the U.S. Department of Energy

April 17, 2003

Mr. Scott Mallette
Director, Operations Management Division
U. S. Department of Energy
Brookhaven Group
Upton, NY 11973

Dear Mr. Mallette:

SUBJECT: NPDES - Discharge Monitoring Report (DMR) for March 2003

Included as Attachment I, please find the DMR for the month of March 2003. Chemical analyses for the reported parameters are conducted by a NYS Department of Health certified contractor laboratory. Copies of the analytical reports are contained in Attachments II and III. Field measured parameters (pH, settleable solids, flow) are recorded and/or measured by the Plant Engineering Division, Sewage Treatment Plant Operators or the Environmental Services Division, Field Sampling Team.

With the exception of one excursion for the total iron concentration at Outfall 001, review of the analytical data shows that all parameters met their respective SPDES effluent limitations this reporting period. With regard to iron, the sample collected on March 3, 2003, exhibited an iron concentration of 0.39 mg/L. This value exceeds the SPDES permit limit of 0.37 mg/L. The total iron concentration of the samples collected on March 5 and March 7, 2003 were within the permit limit. There are no long-term corrective actions for this excursion. The concentration and duration of this excursion does not indicate a continual non-complying discharge.

Collection and analysis of the SPDES permit samples are performed in accordance with the guidelines of the BNL Quality Assurance program. These guidelines include the routine calibration of instruments, standard operating procedures for collection and analysis of samples, use of standard methods of analysis, and validation of the contractor analytical data by the BNL analytical services laboratory. Brookhaven National Laboratory personnel collected all samples. A Quality Assurance inspection is performed periodically on contractor laboratories. The Quality Assurance documentation is available from the Environmental Services Division and Plant Engineering Divisions. Based on this information, we believe the values reported on the DMR are representative of the effluent from the BNL during the month of March 2003.

Although it is no longer necessary for BNL to include copies of the laboratory analysis when

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submitting the DMR, we are including them in the package submitted to you for record-keeping purposes. You do not have to forward the analytical reports to the NYSDEC-Region 1 or SCDHS when submitting the DMR.

Please sign each page of the computer generated DMR where indicated and transmit it to the New York State Department of Environmental Conservation and the Suffolk County Department of Health Services no later than April 28, 2003. If there are any questions regarding the information contained on the DMR or the analytical data packages, please do not hesitate to contact R. Lee at extension 3148 or M. Allocco at extension 3166.

Sincerely,

George A. Goode
Environmental & Waste Management Services
Division Manager

GAG/MA:car

Attachment I: Discharge Monitoring Report for March 2003.

Attachment II: Non-Compliance Report for March SPDES Excursion at Outfall 001.

Attachment III: Analytical Results from H2M Labs for samples collected on 3/3/03, 3/5/03, and 3/7/03 from Outfall 001.

Attachment IV: Analytical Results from H2M Labs for samples collected from Outfalls 002, 002B, 005, 006A, 006B, 008, and 010.

Attachment V: Analytical Results from CHEMTEX, Inc. for samples collected from Outfalls 001F, 002, 002B, 005, 006A, and 006B.

cc:	M. Allocco	w/attachments	M. Baldwin	w/attachments
	M. Bebon	w/o attachments	W. Chaloupka	w/attachments
	S. Dierker	w/o attachments	G. Goode	w/o Attachments
	G. Granzen	w/o attachments	J. Higbie	w/attachments
	C. Johnson	w/o attachments	R. Lee	w/attachments
	E. Lessard	w/o attachments	D. Lowenstein	w/o attachments
	E. Murphy	w/attachments	A. Queirolo	w/o attachments
	V. Radeka	w/o attachments	B. Style	w/o attachments
	J. Tarpinian	w/o attachments	D. Van Duyne	w/attachments

EC62ER.03

Brookhaven National Laboratory
SPDES Permit No. NY0005835
Discharge Monitoring Report for March 2003
Discharge Monitoring Report Notes:

1. The reported concentration is estimated at less than the method detection limit but greater than the instrument detection limit.

2. The reported concentration was estimated because of the presence of interfrerence.

3. The analyte was positively identified; the associated numerical value is the approximate concentration of the analyte in the sample.

4. Flow is estimated based upon an instantaneous flow measurement and the assumption that flow continued for the entire day (i.e., 1,440 minutes).

5. The reported average flows were calculated based on the height of water and type and size of the flume due to the repair and calibration of the flow monitoring equipment at the station.

6. PCBs were not detected at a method detection limit of 0.065 ppb per congener. Total PCBs have been reported as less than the individual detection limit.

7. Two individual photographic processors generate photographic rinse waters discharged from Building 197B. Wastewater samples are collected from each processor and analyzed separately. Table I summarizes the individual results. The maximum concentrations and total average flow have been reported in the DMR.

Location	Flow	pH	Total Nitrogen	Cyanide	Silver	Phenolics
1-87[a]	Shutdown	Shutdown	Shutdown	Shutdown	Shutdown	Shutdown
1-93B	32.4 GPD	7.35 SU	10.7 mg/L	< 10.0 µg/L	75.9 µg/L	< 5.0 µg/L
Total Flow	32.4 GPD					

[a]The photographic processor in Bldg. 197, Room 1-87 was shutdown during the first quarter of 2003 and is scheduled for dismantling.

8. The total iron concentration at Outfall 001 was 0.39 mg/L on 3/3/2003, which exceeded the permit limit of 0.37 mg/L. Please see Attachment II for an explanation of this excursion.

ATTACHMENT I

BROOKHAVEN NATIONAL LABORATORY

SPDES PERMIT NO. NY0005835

DISCHARGE MONITORING REPORT FOR MARCH 2003

FOR OUTFALLS NO. 001 – 010

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	001 A Discharge Number

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
02	10	01	02	12	31

MAJOR
(SUBR 01)
F - FINAL
ACID/CAUSTIC CLEANG RINSE 535B
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
FLOW RATE	SAMPLE MEASUREMENT	106	******	(07)	******	******	******		0	01/90	RC
00056 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DAILY AV	******	**** GPD	******	******				QTRLY	RCORDR
PH	SAMPLE MEASUREMENT	******	******		6.7	******	6.7	(12)	0	01/90	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		QTRLY	GRAB
BIS (2-ETHYLHEXYL) PHTHALATE See Note 3	SAMPLE MEASUREMENT	******	******		******	******	2	(28)	0	01/90	GR
39100 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB
DI-N-BUTYL PHTHALATE	SAMPLE MEASUREMENT	******	******		******	******	< 10	(28)	0	01/90	GR
39110 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Mr. Michael Holland
Area Group Manager
Typed or Printed

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature of Principal Executive Officer or Authorized Agent

Telephone 631-344-3424

Date Signed

Comments and Explanation of any violations (Reference all attachments here)
NO CHANGES OR ADDITIONS OF CHEMICALS TO COOLING OR BOILER WATER W/O PRIOR NYSDEC APPROVAL. SAMPLES TO BE COLLECTED FROM A DEDICATED DRAIN OR HOLDING TANKS PRIOR TO DISCH TO SEWER COLLECTION SYSTEM. SEE PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

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ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	001 B Discharge Number

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
02	10	01	02	12	31

MAJOR
(SUBR 01)
F - FINAL
RINSE FROM CENTRL DEGREASR 498
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
FLOW RATE	SAMPLE MEASUREMENT	180	******	(07)	******	******	******		0	01/90	RC
00056 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DAILY AV	******	GPD	******	******		**** ****		QTRLY	RCORDR
PH	SAMPLE MEASUREMENT	******	******		8.2	******	8.2	(12)	0	02/90	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		QTRLY	GRAB
CHROMIUM, TOTAL (AS CR) See Note 1	SAMPLE MEASUREMENT	******	******		******	******	4.8	(28)	0	01/90	GR
01034 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****		******	REPORT DAILY MX	UG/L		QTRLY	GRAB
COPPER, TOTAL (AS CU) See Note 1	SAMPLE MEASUREMENT	******	******		******	******	12.7	(28)	0	01/90	GR
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB
IRON, TOTAL (AS FE)	SAMPLE MEASUREMENT	******	******		******	******	142	(28)	0	01/90	GR
01045 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB
MANGANESE, TOTAL (AS MN) See Note 1	SAMPLE MEASUREMENT	******	******		******	******	2.9	(28)	0	01/90	GR
01055 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB
NICKEL, TOTAL (AS NI) See Note 1	SAMPLE MEASUREMENT	******	******		******	******	3.2	(28)	0	01/90	GR
01067 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Mr. Michael Holland
Area Group Manager

Typed or Printed

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Signature of Principal Executive Officer or Authorized Agent

Telephone 631-344-3424

Date Signed

Comments and Explanation of any violations (Reference all attachments here)

NO CHANGES OR ADDITIONS OF CHEMICALS TO COOLING OR BOILER WATER W/O PRIOR NYSDEC APPROVAL. SAMPLES TO BE COLLECTED FROM A DEDICATED DRAIN OR HOLDING TANKS PRIOR TO DISCH TO SEWER COLLECTION SYSTEM. SEE PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	001 B Discharge Number

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
02	10	01	02	12	31

MAJOR
(SUBR 01)
F - FINAL
RINSE FROM CENTRL DEGREASR 498
*** No Discharge ☐ ****

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PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
ZINC, TOTAL (AS ZN) See Note 1	SAMPLE MEASUREMENT	******	******		******	******	9.9	(28)	0	01/90	GR
01092 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB
1,2-DICHLOROETHANE	SAMPLE MEASUREMENT	******	******		******	******	< 1	(28)	0	01/90	GR
32103 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB
CHLOROFORM	SAMPLE MEASUREMENT	******	******		******	******	< 1	(28)	0	01/90	GR
32106 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB
1,1,1-TRICHLORO-ETHANE	SAMPLE MEASUREMENT	******	******		******	******	< 1	(28)	0	01/90	GR
34506 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB
BROMODICHLOROMETHANE EFFLUENT	SAMPLE MEASUREMENT	******	******		******	******	< 1	(28)	0	01/90	GR
38693 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB
BIS (2-ETHYLHEXYL) PHTHALATE	SAMPLE MEASUREMENT	******	******		******	******	< 10	(28)	0	01/90	GR
39100 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB
DI-N-BUTYL PHTHALATE	SAMPLE MEASUREMENT	******	******		******	******	< 10	(28)	0	01/90	GR
39110 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			
Mr. Michael Holland Area Group Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		Telephone 631-344-3424
Typed or Printed		Signature of Principal Executive Officer or Authorized Agent	Date Signed

Comments and Explanation of any violations (Reference all attachments here)

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UPTON NY 11973

FACILITY BROOKHAVEN NATIONAL LABORATORY

LOCATION UPTON NY 11973

ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	001 B Discharge Number

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
02	10	01	02	12	31

MAJOR
(SUBR 01)
F - FINAL
RINSE FROM CENTRL DEGREASR 498
*** No Discharge ☐ ****

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TETRACHLOROETHYLENE	SAMPLE MEASUREMENT	******	******		******	******	< 1	(28)	0	01/90	GR
85814 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Mr. Michael Holland
Area Group Manager

Typed or Printed

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Signature of Principal Executive Officer or Authorized Agent

Telephone 631-344-3424

Date Signed

Comments and Explanation of any violations (Reference all attachments here)

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ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	001 D Discharge Number

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
02	10	01	02	12	31

MAJOR
(SUBR 01)
F - FINAL
PHOTOPROCESSNG RINSE FROM 197B
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
FLOW RATE See Note 7	SAMPLE MEASUREMENT	32.4	******	(07)	******	******	******		0	01/90	RC
00056 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DAILY AV	******	GPD	******	******	******	**** ****		QTRLY	RCORDR
PH See Note 7	SAMPLE MEASUREMENT	******	******		7.4	******	7.4	(12)	0	01/90	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		QTRLY	GRAB
NITROGEN, TOTAL (AS N) See Note 7	SAMPLE MEASUREMENT	******	******		******	******	10.7	(19)	0	01/90	GR
00600 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****		******	REPORT DAILY MX	MG/L		QTRLY	GRAB
CYANIDE, TOTAL (AS CN) See Note 7	SAMPLE MEASUREMENT	******	******		******	******	< 10	(28)	0	01/90	GR
00720 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB
SILVER, TOTAL (AS AG) See Note 7	SAMPLE MEASUREMENT	******	******		******	******	75.9	(28)	0	01/90	GR
01077 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB
PHENOLICS, TOTAL RECOVERABLE See Note 7	SAMPLE MEASUREMENT	******	******		******	******	< 5.0	(28)	0	01/90	GR
32730 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Mr. Michael Holland
Area Group Manager

Typed or Printed

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Signature of Principal Executive Officer or Authorized Agent

Telephone 631-344-3424

Date Signed

Comments and Explanation of any violations (Reference all attachments here)

NO CHANGES OR ADDITIONS OF CHEMICALS TO COOLING OR BOILER WATER W/O PRIOR NYSDEC APPROVAL. SAMPLES TO BE COLLECTED FROM MANHOLE NEAREST THE BUILDING. SEE PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	001 E Discharge Number	MAJOR (SUBR 01) F - FINAL

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
02	10	01	02	12	31

BOILER BLOWDN FROM 244,405,ETC
*** No Discharge ☐ ****

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FLOW RATE	SAMPLE MEASUREMENT	65	******	(07)	******	******	******		0	01/90	RC
00056 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DAILY AV	******	GPD	******	******	******	**** ****		QTRLY	RCORDR
PH	SAMPLE MEASUREMENT	******	******		9.0	******	9.5	(12)	0	01/90	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		QTRLY	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Mr. Michael Holland
Area Group Manager

Typed or Printed

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NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
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NY0005835 Permit Number	001 F Discharge Number	MAJOR (SUBR 01) F - FINAL

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
02	10	01	02	12	31

COOLING TOWER WTR & BLOWDN 902
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
FLOW RATE	SAMPLE MEASUREMENT	3300	******	(07)	******	******	******		0	03/90	RC
00056 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DAILY AV	******	GPD	******	******	******	**** ****		QTRLY	RCORDR
PH	SAMPLE MEASUREMENT	******	******		8.3	******	8.3	(12)	0	01/90	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	REPORT MAXIMUM	SU		QTRLY	GRAB
PROPYLENE GLYCOL MONOBUTYL ETHER	SAMPLE MEASUREMENT	******	******		******	******	< 500	(28)	0	01/90	GR
49875 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		
Mr. Michael Holland Area Group Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Telephone 631-344-3424
Typed or Printed		Signature of Principal Executive Officer or Authorized Agent / Date Signed

Comments and Explanation of any violations (Reference all attachments here)
NO CHANGES OR ADDITIONS OF CHEMICALS TO COOLING OR BOILER WATER W/O PRIOR NYSDEC APPROVAL. SAMPLES TO BE COLLECTED FROM A DEDICATED DRAIN OR HOLDING TANKS PRIOR TO DISCHARGE TO SEWER COLLECTION SYSTEM. SEE PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	001 M Discharge Number

MAJOR
(SUBR 01)
F - FINAL
PROCESS SANIT & STORMWTR RNOFF
*** No Discharge ☐ ****

Monitoring Period					
From			To		
YR	MO	DAY	YR	MO	DAY
02	10	01	02	12	31

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
TEMPERATURE, WATER DEG. FAHRENHEIT	SAMPLE MEASUREMENT	******	******		******	******	55	(15)	0	01/01	GR
00011 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	90 DAILY MX	DEG.F		DAILY	GRAB
BOD, 5-DAY (20 DEG. C)	SAMPLE MEASUREMENT	******	******		******	< 2	2	(19)	0	03/30	24
00310 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	10 DAILY AV	20 DAILY MX	MG/L		ONCE/ MONTH	COMP24
PH	SAMPLE MEASUREMENT	******	******		6.5	******	6.7	(12)	0	01/01	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	5.8 MINIMUM	******	9.0 MAXIMUM	SU		DAILY	GRAB
SOLIDS, TOTAL SUSPENDED	SAMPLE MEASUREMENT	******	******		******	< 4	4	(19)	0	03/30	24
00530 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	10 DAILY AV	20 DAILY MX	MG/L		ONCE/ MONTH	COMP24
SOLIDS, SETTLEABLE	SAMPLE MEASUREMENT	******	******		******	******	0.0	(25)	0	01/01	GR
00545 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.1 DAILY MX	ML/L		DAILY	GRAB
NITROGEN, TOTAL (AS N)	SAMPLE MEASUREMENT	******	******		******	******	8.0	(19)	0	03/30	24
00600 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	10 DAILY MX	MG/L		ONCE/ MONTH	COMP24
NITROGEN, AMMONIA TOTAL (AS N)	SAMPLE MEASUREMENT	******	******		******	******	0.4	(19)	0	03/30	24
00610 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	2 DAILY MX	MG/L		ONCE/ MONTH	COMP24

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Mr. Michael Holland
Area Group Manager

Typed or Printed

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature of Principal Executive Officer or Authorized Agent

Telephone
631-344-3424

Date Signed

Comments and Explanation of any violations (Reference all attachments here)

QUANTITIES OR CONCENTRATIONS OF RADIOACTIVITY IN EFFLUENT ARE SUBJECT TO REQUIREMENTS OF THE USDOE INCL BUT NOT LIMITED TO USDOE ORDER 5400.5.
APPROX 15% OF STP DISCHARGE CAN BE TO GW VIA EXFILT FROM SFBS. SEE PERMIT FOR ADDITIONAL NOTES COMMENTS AND REQUIREMENTS.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	001 M Discharge Number

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
02	10	01	02	12	31

MAJOR
(SUBR 01)
F - FINAL
PROCESS SANIT & STORMWTR RNOFF
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PHOSPHORUS, TOTAL (AS P) 00665 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	1.6	(19)	0	03/30	24
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	MG/L		ONCE/ MONTH	COMP24
CYANIDE, TOTAL (AS CN) 00720 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	< 10	(28)	0	03/30	GR
	PERMIT REQUIREMENT	******	******	**** ****	******	******	100 DAILY MX	UG/L		TWICE/ MONTH	GRAB
COPPER, TOTAL (AS CU) See Note 2 01042 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.047	(19)	0	03/30	24
	PERMIT REQUIREMENT	******	******	**** ****		******	0.15 DAILY MX	MG/L		ONCE/ MONTH	COMP24
IRON, TOTAL (AS FE) See Note 8 01045 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.39	(19)	1	03/30	24
	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.37 DAILY MX	MG/L		ONCE/ MONTH	COMP24
LEAD, TOTAL (AS PB) 01051 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.0058	(19)	0	03/30	24
	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.019 DAILY MX	MG/L		ONCE/ MONTH	COMP24
NICKEL, TOTAL (AS NI) See Note 1 01067 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.0038	(19)	0	03/30	24
	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.11 DAILY MX	MG/L		ONCE/ MONTH	COMP24
SILVER, TOTAL (AS AG) 01077 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	0.003	(19)	0	03/30	24
	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.015 DAILY MX	MG/L		ONCE/ MONTH	COMP24

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Mr. Michael Holland
Area Group Manager

Typed or Printed

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature of Principal Executive Officer or Authorized Agent

Telephone 631-344-3424

Date Signed

Comments and Explanation of any violations (Reference all attachments here)

QUANTITIES OR CONCENTRATIONS OF RADIOACTIVITY IN EFFLUENT ARE SUBJECT TO REQUIREMENTS OF THE USDOE INCL BUT NOT LIMITED TO USDOE ORDER 5400.5.
APPROX 15% OF STP DISCHARGE CAN BE TO GW VIA EXFILT FROM SFBS. SEE PERMIT FOR ADDITIONAL NOTES COMMENTS AND REQUIREMENTS.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	001 M Discharge Number

MAJOR
(SUBR 01)
F - FINAL
PROCESS SANIT & STORMWTR RNOFF
*** No Discharge ☐ ****

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
02	10	01	02	12	31

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
ZINC, TOTAL (AS ZN) See Note 2	SAMPLE MEASUREMENT	******	******		******	******	0.07	(19)	0	03/30	24
01092 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.1 DAILY MX	MG/L		ONCE/ MONTH	COMP24
TOLUENE	SAMPLE MEASUREMENT	******	******		******	******	< 1	(28)	0	03/30	GR
34010 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	5 DAILY MX	UG/L		TWICE/ MONTH	GRAB
METHYLENE CHLORIDE See Note 3	SAMPLE MEASUREMENT	******	******		******	******	4.5	(28)	0	03/30	GR
34423 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****		******	5 DAILY MX	UG/L		TWICE/ MONTH	GRAB
1,1,1-TRICHLORO-ETHANE	SAMPLE MEASUREMENT	******	******		******	******	< 1	(28)	0	03/30	GR
34506 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	5 DAILY MX	UG/L		TWICE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.38	0.45	(03)	******	******	******		0	99/99	RC
50050 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DAILY AV	2.3 DAILY MX	MGD	******	******	******	**** ****		CONTINU-OUS	RCORDR
MERCURY, TOTAL (AS HG)	SAMPLE MEASUREMENT	******	******		******	******	0.0002	(19)	0	03/30	24
71900 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.0008 DAILY MX	MG/L		ONCE/ MONTH	COMP24
COLIFORM, FECAL GENERAL	SAMPLE MEASUREMENT	******	******		******	< 2	< 2	(13)	0	03/30	GR
74055 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	200 DAILY AV	400 DAILY MX	#/ 100ML		ONCE/ MONTH	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Mr. Michael Holland
Area Group Manager

Typed or Printed

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Signature of Principal Executive Officer or Authorized Agent

Telephone 631-344-3424

Date Signed

Comments and Explanation of any violations (Reference all attachments here)

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APPROX 15% OF STP DISCHARGE CAN BE TO GW VIA EXFILT FROM SFBS. SEE PERMIT FOR ADDITIONAL NOTES COMMENTS AND REQUIREMENTS.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	001 M Discharge Number

MAJOR
(SUBR 01)
F - FINAL
PROCESS SANIT & STORMWTR RNOFF
*** No Discharge ☐ ****

Monitoring Period					
From			To		
YR	MO	DAY	YR	MO	DAY
02	10	01	02	12	31

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
2-BUTANONE	SAMPLE MEASUREMENT	******	******		******	******	< 5	(28)	0	03/30	GR
78356 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	50 DAILY MX	UG/L		TWICE/ MONTH	GRAB
BOD, 5-DAY PERCENT REMOVAL	SAMPLE MEASUREMENT	******	******		> 96	******	******	(23)	0	01/30	CA
81010 K 0 0 PERCENT REMOVAL	PERMIT REQUIREMENT	******	******	**** ****	85 MO AV MN	******	******	PERCENT		ONCE/ MONTH	CALCTD
SOLIDS, SUSPENDED PERCENT REMOVAL	SAMPLE MEASUREMENT	******	******		> 96	******	******	(23)	0	01/30	CA
81011 K 0 0 PERCENT REMOVAL	PERMIT REQUIREMENT	******	******	**** ****	85 MO AV MN	******	******	PERCENT		ONCE/ MONTH	CALCTD
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		
Mr. Michael Holland Area Group Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Telephone 631-344-3424
Typed or Printed		Signature of Principal Executive Officer or Authorized Agent — Date Signed

Comments and Explanation of any violations (Reference all attachments here)
QUANTITIES OR CONCENTRATIONS OF RADIOACTIVITY IN EFFLUENT ARE SUBJECT TO REQUIREMENTS OF THE USDOE INCL BUT NOT LIMITED TO USDOE ORDER 5400.5.
APPROX 15% OF STP DISCHARGE CAN BE TO GW VIA EXFILT FROM SFBS. SEE PERMIT FOR ADDITIONAL NOTES COMMENTS AND REQUIREMENTS.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E

ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973

FACILITY BROOKHAVEN NATIONAL LABORATORY

LOCATION UPTON NY 11973

ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	001 Q Discharge Number

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
02	10	01	02	12	31

MAJOR
(SUBR 01)
F - FINAL
PROCESS SANIT EFFL & STORMWTR
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
POLYCHLORINATED BIPHENYLS (PCBS) 39516 1 0 0 See Note 6 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	< 0.065	(28)	0	03/90	GR
	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	UG/L		QTRLY	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Mr. Michael Holland
Area Group Manager

Typed or Printed

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Signature of Principal Executive Officer or Authorized Agent

Telephone
631-344-3424

Date Signed

Comments and Explanation of any violations (Reference all attachments here)
PCB ANALYSIS TO USE EPA METHOD 608 WITH AN MDL GOAL OF 0.065 PPB

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	002 B Discharge Number

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
02	10	01	02	12	31

MAJOR
(SUBR 01)
F - FINAL
RF(1004) & BRAHMS(1002) BLOWDN
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		7.3	******	8.4	(12)	0	04/30	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	9.0 MAXIMUM	SU		ONCE/ MONTH	GRAB
OIL & GREASE	SAMPLE MEASUREMENT	******	******		******	******	< 5.0	(19)	0	01/30	GR
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	15 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 0 See Note 5 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	0.0042	(03)	******	******	******		0	04/30	RC
	PERMIT REQUIREMENT	******	REPORT DAILY MX	MGD	******	******	******			ONCE/ MONTH	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Mr. Michael Holland
Area Group Manager
Typed or Printed

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Signature of Principal Executive Officer or Authorized Agent

Telephone
631-344-3424

Date Signed

Comments and Explanation of any violations (Reference all attachments here)
DISCHARGE MAY BE DIRECTED TO SURROUNDING LOW LYING AREA INSIDE THE ROADWAY THAT IS INSIDE RHIC RING. ONCE STORMWATER COLLECTION SYSTEM IS EXTENDED TO BLDG 1010 & A NEW RECHARGE BASIN IS CONSTRUCTED, DISCHARGE SHOULD BE TO NEW BASIN.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	002 M Discharge Number	MAJOR (SUBR 01) F - FINAL

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
03	01	01	03	03	31

AGS NON-C COOLING,PRCP,ETC (HN)
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		7.7	******	7.9	(12)	0	04/30	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	9.0 MAXIMUM	SU		ONCE/ MONTH	GRAB
OIL & GREASE	SAMPLE MEASUREMENT	******	******		******	******	< 5.0	(19)	0	01/30	GR
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	15 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT 50050 1 0 1 See Note 5 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	0.29	******	(03)	******	******	******		0	04/30	RC
	PERMIT REQUIREMENT	REPORT DAILY AV	******	MGD	******	******	******			ONCE/ MONTH	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			
Mr. Michael Holland Area Group Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		Telephone 631-344-3424
Typed or Printed		Signature of Principal Executive Officer or Authorized Agent	Date Signed

Comments and Explanation of any violations (Reference all attachments here)

SEE PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS. SAMPLING FOR THIS OUTFALL SHALL BE CONDUCTED AT A LOCTION DOWNSTREAM OF WHERE EXISTING DISCHARGE MIXES WITH THE COOLING TOWER BLOWDOWN FROM THE STAR DETECTOR.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	002 Q Discharge Number

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
03	01	01	03	03	31

MAJOR
(SUBR 01)
F - FINAL
AGS NON-C COOLG,PRECP ETC (HN)
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
ALUMINUM, TOTAL (AS AL) See Note 1	SAMPLE MEASUREMENT	******	******		******	******	0.46	(19)	0	01/90	GR
01105 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	2.0 DAILY MX	MG/L		QTRLY	GRAB
CHLOROFORM	SAMPLE MEASUREMENT	******	******		******	******	1.5	(28)	0	01/90	GR
32106 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	50 DAILY MX	UG/L		QTRLY	GRAB
1,1,1-TRICHLORO-ETHANE	SAMPLE MEASUREMENT	******	******		******	******	< 1	(28)	0	01/90	GR
34506 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****		******	7 DAILY MX	UG/L		QTRLY	GRAB
BROMODICHLOROMETHANE EFFLUENT	SAMPLE MEASUREMENT	******	******		******	******	< 1	(28)	0	01/90	GR
38693 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	5 DAILY MX	UG/L		QTRLY	GRAB
1-HYDROXY-ETHYLIDENE	SAMPLE MEASUREMENT	******	******		******	******	< 0.05	(19)	0	01/90	GR
85812 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.5 DAILY MX	MG/L		QTRLY	GRAB
TOLYTRIAZOLE	SAMPLE MEASUREMENT	******	******		******	******	< 0.005	(19)	0	01/90	GR
85813 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.2 DAILY MX	MG/L		QTRLY	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		
Mr. Michael Holland Area Group Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Telephone 631-344-3424
Typed or Printed		Signature of Principal Executive Officer or Authorized Agent / Date Signed

Comments and Explanation of any violations (Reference all attachments here)
NO ADDITIONAL WATER TREATMENT CHEMICAL ADDITIVES W/O PRIOR NYSDEC APPROVAL. SEE PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS.
SAMPLING TO BE DOWNSTREAM OF WHERE EXISTING DISCHARGE MIXES WITH COOLING TOWER BLOWDOWN FROM STAR DETECTOR.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	002 R Discharge Number	MAJOR (SUBR 01) F - FINAL RF(1004) & BRAHMS(1002) BLOWDN

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
03	01	01	03	03	31

*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
1-HYDROXY-ETHYLIDENE	SAMPLE MEASUREMENT	******	******		******	******	< 0.05	(19)	0	01/90	GR
85812 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.5 DAILY MX	MG/L		QTRLY	GRAB
TOLYTRIAZOLE	SAMPLE MEASUREMENT	******	******		******	******	< 0.005	(19)	0	01/90	GR
85813 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.2 DAILY MX	MG/L		QTRLY	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		
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Typed or Printed	Signature of Principal Executive Officer or Authorized Agent	Date Signed

Comments and Explanation of any violations (Reference all attachments here)

DISCHARGE MAY BE DIRECTED TO SURROUNDING LOW LYING AREA INSIDE THE ROADWAY THAT IS INSIDE RHIC RING. ONCE STORMWATER COLLECTION SYSTEM IS EXTENDED TO BLDG 1010 & A NEW RECHARGE BASIN IS CONSTRUCTED, DISCHARGE SHOULD BE DIRECTED TO THE NEW BASIN.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	005 M Discharge Number	MAJOR (SUBR 01) F - FINAL

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
03	01	01	03	03	31

NSLS COOLING TOWR BLDN ETC (HS)
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		6.8	******	7.7	(12)	0	04/30	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	8.5 MAXIMUM	SU		ONCE/ MONTH	GRAB
OIL & GREASE	SAMPLE MEASUREMENT	******	******		******	******	< 5.0	(19)	0	01/30	GR
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	15 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.35	******	(03)	******	******	******		0	04/30	RC
50050 1 0 1 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DAILY AV	******	MGD	******	******	******	**** ****		ONCE/ MONTH	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		
Mr. Michael Holland Area Group Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Telephone 631-344-3424
Typed or Printed		Signature of Principal Executive Officer or Authorized Agent / Date Signed

Comments and Explanation of any violations (Reference all attachments here)
SEE PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	005 Q Discharge Number	MAJOR (SUBR 01) F - FINAL

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
03	01	01	03	03	31

NSLS COOLG TOWR BLOWDN ETC (HS)
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	QUANTITY OR LOADING MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	QUALITY OR CONCENTRATION AVERAGE	QUALITY OR CONCENTRATION MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
COPPER, TOTAL (AS CU) See Note 1	SAMPLE MEASUREMENT	******	******		******	******	0.003	(19)	0	01/90	GR
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	1.0 DAILY MX	MG/L		QTRLY	GRAB
1-HYDROXY-ETHYLIDENE	SAMPLE MEASUREMENT	******	******		******	******	< 0.05	(19)	0	01/90	GR
85812 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.5 DAILY MX	MG/L		QTRLY	GRAB
TOLYTRIAZOLE	SAMPLE MEASUREMENT	******	******		******	******	< 0.005	(19)	0	01/90	GR
85813 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.2 DAILY MX	MG/L		QTRLY	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		
Mr. Michael Holland Area Group Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Telephone 631-344-3424
Typed or Printed		Signature of Principal Executive Officer or Authorized Agent / Date Signed

Comments and Explanation of any violations (Reference all attachments here)

NO ADDITIONAL WATER TREATMENT CHEMICAL ADDITIVES W/O PRIOR NYSDEC APPROVAL. SEE PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	007 M Discharge Number	MAJOR (SUBR 01) F - FINAL

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
03	01	01	03	03	31

WATER TREATMENT PLT BKWSH (HX)
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
FLOW RATE	SAMPLE MEASUREMENT	******	280000	(07)	******	******	******		0	119/30	IN
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	REPORT DAILY MX	GPD	******	******	******	**** ****		ONCE/ MONTH	INSTAN
PH	SAMPLE MEASUREMENT	******	******		8.1	******	8.1	(12)	0	01/30	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	9.0 MAXIMUM	SU		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER		
Mr. Michael Holland Area Group Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	Telephone 631-344-3424
Typed or Printed		Signature of Principal Executive Officer or Authorized Agent / Date Signed

Comments and Explanation of any violations (Reference all attachments here)
SAMPLES TO BE COLLECTED AT EFFLUENT PIPE TO WHICHEVER BASIN IS IN OPERATION AT THE TIME. STANDING WATER IN EITHER BASIN SHALL NOT BE COLLECTED FOR DMR SAMPLING PURPOSES. SEE PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	008 M Discharge Number	MAJOR (SUBR 01) F - FINAL

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
03	01	01	03	03	31

STORMWTR RUNOFF WAREHOUSE (HW)
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
FLOW RATE See Note 4	SAMPLE MEASUREMENT	******	132000	(07)	******	******	******		0	01/30	IN
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	REPORT DAILY MX	GPD	******	******	******	**** ****		ONCE/ MONTH	INSTAN
PH	SAMPLE MEASUREMENT	******	******		7.7	******	7.7	(12)	0	01/30	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	8.5 MAXIMUM	SU		ONCE/ MONTH	GRAB
OIL & GREASE	SAMPLE MEASUREMENT	******	******		******	******	< 5.0	(19)	0	01/30	GR
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	15 DAILY MX	MG/L		ONCE/ MONTH	GRAB
1,1-DICHLOROETHYLENE	SAMPLE MEASUREMENT	******	******		******	******	< 1	(28)	0	01/30	GR
34501 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	5 DAILY MX	UG/L		ONCE/ MONTH	GRAB
1,1,1-TRICHLORO-ETHANE	SAMPLE MEASUREMENT	******	******		******	******	< 1	(28)	0	01/30	GR
34506 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	5 DAILY MX	UG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Mr. Michael Holland
Area Group Manager

Typed or Printed

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature of Principal Executive Officer or Authorized Agent

Telephone 631-344-3424

Date Signed

Comments and Explanation of any violations (Reference all attachments here)
PARAMETERS EXCEPT FOR FLOW TO BE SAMPLED MONTHLY DURING A STORM EVENT. (IF NO DISCHARGE, ENTER AN "X" IN THE "NO DISCHARGE" BOX AT THE UPPER RIGHT.) SEE PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	008 Q Discharge Number	MAJOR (SUBR 01) F - FINAL

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
03	01	01	03	03	31

SW RUNOFF FROM WAREHOUSE AREA
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
ALUMINUM, TOTAL (AS AL) 01105 1 0 0 EFFLUENT GROSS VALUE	SAMPLE MEASUREMENT	******	******		******	******	1.2	(19)	0	01/90	GR
	PERMIT REQUIREMENT	******	******	**** ****	******	******	2.0 DAILY MX	MG/L		QTRLY	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER
Mr. Michael Holland
Area Group Manager

Typed or Printed

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Signature of Principal Executive Officer or Authorized Agent

Telephone 631-344-3424

Date Signed

Comments and Explanation of any violations (Reference all attachments here)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number			010 M Discharge Number			MAJOR (SUBR 01) F - FINAL
Monitoring Period						STORMWTR R O CENTRAL STEAM (H)
From			To			*** No Discharge ☐ ****
YR	MO	DAY	YR	MO	DAY	
03	01	01	03	03	31	

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
FLOW RATE See Note 4	SAMPLE MEASUREMENT	******	12300	(07)	******	******	******		0	01/30	IN
00056 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	REPORT DAILY MX	GPD	******	******	******	**** ****		ONCE/ MONTH	INSTAN
PH	SAMPLE MEASUREMENT	******	******		8.0	******	8.0	(12)	0	01/30	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	8.5 MAXIMUM	SU		ONCE/ MONTH	GRAB
OIL & GREASE	SAMPLE MEASUREMENT	******	******		******	******	< 5.0	(19)	0	01/30	GR
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	15 DAILY MX	MG/L		ONCE/ MONTH	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Mr. Michael Holland
Area Group Manager

Typed or Printed

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Signature of Principal Executive Officer or Authorized Agent

Telephone 631-344-3424

Date Signed

Comments and Explanation of any violations (Reference all attachments here)

PARAMETERS EXCEPT FOR FLOW TO BE SAMPLED MONTHLY DURING A STORM EVENT. (IF NO DISCHARGE, ENTER AN "X" IN THE "NO DISCHARGE" BOX AT THE UPPER RIGHT.) SEE PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	010 Q Discharge Number

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
03	01	01	03	03	31

MAJOR
(SUBR 01)
F - FINAL
SW RUNOFF FROM CENTRAL STM (H)
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
COPPER, TOTAL (AS CU) See Note 1	SAMPLE MEASUREMENT	******	******		******	******	0.022	(19)	0	01/90	GR
01042 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	1.0 DAILY MX	MG/L		QTRLY	GRAB
LEAD, TOTAL (AS PB)	SAMPLE MEASUREMENT	******	******		******	******	0.017	(19)	0	01/90	GR
01051 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.05 DAILY MX.	MG/L		QTRLY	GRAB
VANADIUM, TOTAL (AS V) See Note 1	SAMPLE MEASUREMENT	******	******		******	******	0.018	(19)	0	01/90	GR
01087 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	REPORT DAILY MX	MG/L		QTRLY	GRAB
ALUMINUM, TOTAL (AS AL)	SAMPLE MEASUREMENT	******	******		******	******	1.3	(19)	0	01/90	GR
01105 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	2.0 DAILY MX	MG/L		QTRLY	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Mr. Michael Holland
Area Group Manager

Typed or Printed

I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

Signature of Principal Executive Officer or Authorized Agent

Telephone
631-344-3424

Date Signed

Comments and Explanation of any violations (Reference all attachments here)

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	06A M Discharge Number	MAJOR (SUBR 01) F - FINAL

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
03	01	01	03	03	31

LINAC NCCW, FLOOR DNS,ETC (HT1)
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
PH	SAMPLE MEASUREMENT	******	******		7.5	******	8.3	(12)	0	04/30	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	9.0 MAXIMUM	SU		ONCE/ MONTH	GRAB
OIL & GREASE	SAMPLE MEASUREMENT	******	******		******	******	< 5.0	(19)	0	01/30	GR
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	15 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.05	******	(03)	******	******	******		0	04/30	RC
50050 1 0 1 See Note 5 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DAILY AV	******	MGD	******	******	******	**** ****		ONCE/ MONTH	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			
Mr. Michael Holland Area Group Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		Telephone 631-344-3424
Typed or Printed		Signature of Principal Executive Officer or Authorized Agent	Date Signed

Comments and Explanation of any violations (Reference all attachments here)
SEE PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

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BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	06A Q Discharge Number

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
03	01	01	03	03	31

MAJOR
(SUBR 01)
F - FINAL
LINAC NCCW, FLOOR DNS, SW (HT1)
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
1-HYDROXY-ETHYLIDENE	SAMPLE MEASUREMENT	******	******		******	******	< 0.05	(19)	0	01/90	GR
85812 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.5 DAILY MX	MG/L		QTRLY	GRAB
TOLYTRIAZOLE	SAMPLE MEASUREMENT	******	******		******	******	< 0.005	(19)	0	01/90	GR
85813 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.2 DAILY MX	MG/L		QTRLY	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Mr. Michael Holland
Area Group Manager

Typed or Printed

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Signature of Principal Executive Officer or Authorized Agent

Telephone
631-344-3424

Date Signed

Comments and Explanation of any violations (Reference all attachments here)
NO ADDITIONAL WATER TREATMENT CHEMICAL ADDITIVES W/O PRIOR NYSDEC APPROVAL.
SEE PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

NAME U S D O E
ADDRESS BROOKHAVEN NATIONAL LABORATORY
BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	06B M Discharge Number

MAJOR
(SUBR 01)
F - FINAL

Monitoring Period					
From			To		
YR	MO	DAY	YR	MO	DAY
03	01	01	03	03	31

COOLING TOWR FROM 919 ETC (HT2)
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
PH	SAMPLE MEASUREMENT	******	******		7.7	******	8.1	(12)	0	04/30	GR
00400 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	REPORT MINIMUM	******	9.0 MAXIMUM	SU		ONCE/ MONTH	GRAB
OIL & GREASE	SAMPLE MEASUREMENT	******	******		******	******	< 5.0	(19)	0	01/30	GR
00556 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	15 DAILY MX	MG/L		ONCE/ MONTH	GRAB
FLOW, IN CONDUIT OR THRU TREATMENT PLANT	SAMPLE MEASUREMENT	0.30	******	(03)	******	******	******		0	04/30	RC
50050 1 0 1 See Note 5 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	REPORT DAILY AV	******	MGD	******	******	******	**** ****		ONCE/ MONTH	RCORDR
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER

Mr. Michael Holland
Area Group Manager

Typed or Printed

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Signature of Principal Executive Officer or Authorized Agent

Telephone
631-344-3424

Date Signed

Comments and Explanation of any violations (Reference all attachments here)
SEE PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS.

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*

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BROOKHAVEN AREA OFFICE
UPTON NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION UPTON NY 11973
ATTN: GEORGE MALOSH, GROUP MGR

NATIONAL POLLUTANT DISCHARGE ELIMINATION SYSTEM (NPDES)
DISCHARGE MONITORING REPORT (DMR)

NY0005835 Permit Number	06B Q Discharge Number

Monitoring Period From YR	MO	DAY	To YR	MO	DAY
03	01	01	03	03	31

MAJOR
(SUBR 01)
F - FINAL
COOLG TOWRS FROM 919 ETC (HT2)
*** No Discharge ☐ ****

Note: Read Instructions before completing this form

PARAMETER		QUANTITY OR LOADING AVERAGE	MAXIMUM	UNITS	QUALITY OR CONCENTRATION MINIMUM	AVERAGE	MAXIMUM	UNITS	NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
1-HYDROXY-ETHYLIDENE	SAMPLE MEASUREMENT	******	******		******	******	< 0.05	(19)	0	01/90	GR
85812 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.5 DAILY MX	MG/L		QTRLY	GRAB
TOLYTRIAZOLE	SAMPLE MEASUREMENT	******	******		******	******	< 0.005	(19)	0	01/90	GR
85813 1 0 0 EFFLUENT GROSS VALUE	PERMIT REQUIREMENT	******	******	**** ****	******	******	0.2 DAILY MX	MG/L		QTRLY	GRAB
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										
	SAMPLE MEASUREMENT										
	PERMIT REQUIREMENT										

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			
Mr. Michael Holland Area Group Manager	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		Telephone 631-344-3424
Typed or Printed		Signature of Principal Executive Officer or Authorized Agent	Date Signed

Comments and Explanation of any violations (Reference all attachments here)
NO ADDITIONAL WATER TREATMENT CHEMICAL ADDITIVES W/O PRIOR NYSDEC APPROVAL.
SEE PERMIT FOR ADDITIONAL NOTES, COMMENTS AND REQUIREMENTS.

ATTACHMENT II

BROOKHAVEN NATIONAL LABORATORY

SPDES PERMIT NO. NY0005835

DISCHARGE MONITORING REPORT FOR MARCH 2003

NON-COMPLIANCE REPORT

Appendix B

SECTION 1

New York State Department of Environmental Conservation
Division of Water

Report of Noncompliance Event

To: DEC Water Contact R. Sorrentino *DEC Region:* 1

Report Type: ___ *5 Day* X *Permit Violation* ___ *Order Violation* ___ *Anticipated Noncompliance* ___ *Bypass/Overflow* ___ *Other*

SECTION 2

SPDES #: NY-0005835 Facility: U.S. Department of Energy/Brookhaven National Laboratory

Date of noncompliance: 3 / 3 / 03 Location (Outfall, Treatment Unit, or Pump Station): 001

Description of noncompliance(s) and cause(s): The total iron concentration at Outfall 001 on 3/3/03 was 0.39 mg/L which exceeded the permit limit of 0.37 mg/L.

Has event ceased? (Yes) (No) If so, when? 3/5/03 Was event due to plant upset? (Yes) (No) SPDES limits violated? (Yes) (No)

Start date, time of event: 3 / 3 / 03, 10 : 40 (AM) (PM) End date, time of event: 3 / 5 / 03, 10 : 00 (AM) (PM)

Date, time oral notification made to DEC? ___ / ___ / ___, ___ : ___ (AM) (PM) DEC Official contacted: ___

Immediate corrective actions: No immediate corrective actions were taken due to the lagtime between sample collection, analysis, and data report issuance.

Preventive (long term) corrective actions: There are no long-term corrective actions for this excursion. The concentration and duration of this excursion does not indicate a continual non-complying discharge.

SECTION 3

Complete this section if event was a bypass:

Bypass amount: ___ Was prior DEC authorization received for this event? (Yes) (No)

DEC Official contacted: ___ Date of DEC approval: ___ / ___ / ___

Describe event in "Description of noncompliance and cause" area in Section 2. Detail the start and end dates and times in Section 2 also.

SECTION 4

Facility Representative: ___ **Title:** ___ **Date:** ___ / ___ / ___

Phone #: (___) ___ - ___ **Fax #:** (___) ___ - ___

I Certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.

X ___

Signature of Principal Executive Officer or Authorized Agent

ATTACHMENT III

BROOKHAVEN NATIONAL LABORATORY

SPDES PERMIT NO. NY0005835

DISCHARGE MONITORING REPORT FOR MARCH 2003

ANALYTICAL RESULTS FROM H2M LABS, INC.

FOR REGULATORY COMPLIANCE SAMPLES COLLECTED

3/3/03,
3/5/03, AND 3/7/03

FROM OUTFALL 001

1C

SEMIVOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16234-001

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: _____ SDG No.: BNLS728

Matrix: (soil/water) WATER Lab Sample ID: 0303024-001D

Sample wt/vol: 1000 (g/mL) ML Lab File ID: A\C22866.D

Level: (low/med) LOW Date Received: 03/03/03

% Moisture: Decanted: (Y/N) N Date Extracted: 03/10/03

Concentrated Extract Volume: 1000 (µL) Date Analyzed: 03/13/03

Injection Volume: 2 (µL) Dilution Factor: 1.00

GPC Cleanup: (Y/N) N pH: ____ Extraction: (Type) CONT

CONCENTRATION UNITS:

CAS NO.	COMPOUND	(µg/L or µg/Kg) UG/L	Q
108-95-2	Phenol	10	U
111-44-4	Bis(2-chloroethyl)ether	10	U
95-57-8	2-Chlorophenol	10	U
541-73-1	1,3-Dichlorobenzene	10	U
106-46-7	1,4-Dichlorobenzene	10	U
95-50-1	1,2-Dichlorobenzene	10	U
95-48-7	2-Methylphenol	10	U
108-60-1	2,2'-oxybis(1-Chloropropane)	10	U
106-44-5	4-Methylphenol	10	U
621-64-7	N-Nitroso-di-n-propylamine	10	U
67-72-1	Hexachloroethane	10	U
98-95-3	Nitrobenzene	10	U
78-59-1	Isophorone	10	U
88-75-5	2-Nitrophenol	10	U
105-67-9	2,4-Dimethylphenol	10	U
111-91-1	Bis(2-chloroethoxy)methane	10	U
120-83-2	2,4-Dichlorophenol	10	U
120-82-1	1,2,4-Trichlorobenzene	10	U
91-20-3	Naphthalene	10	U
106-47-8	4-Chloroaniline	10	U
87-68-3	Hexachlorobutadiene	10	U
59-50-7	4-Chloro-3-methylphenol	10	U
91-57-6	2-Methylnaphthalene	10	U
77-47-4	Hexachlorocyclopentadiene	10	U
88-06-2	2,4,6-Trichlorophenol	10	U
95-95-4	2,4,5-Trichlorophenol	25	U
91-58-7	2-Chloronaphthalene	10	U
88-74-4	2-Nitroaniline	25	U
131-11-3	Dimethylphthalate	10	U
208-96-8	Acenaphthylene	10	U
606-20-2	2,6-Dinitrotoluene	10	U
99-09-2	3-Nitroaniline	25	U
83-32-9	Acenaphthene	10	U
51-28-5	2,4-Dinitrophenol	25	U
100-02-7	4-Nitrophenol	25	U
132-64-9	Dibenzofuran	10	U

Outfall 001
Sampled 3-3-03
24 Hr. Composite

BNLS728 S60

1D

SEMIVOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16234-001

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: _____ SDG No.: BNLS728

Matrix: (soil/water) WATER Lab Sample ID: 0303024-001D

Sample wt/vol: 1000 (g/mL) ML Lab File ID: A\C22866.D

Level: (low/med) LOW Date Received: 03/03/03

% Moisture: Decanted: (Y/N) N Date Extracted: 03/10/03

Concentrated Extract Volume: 1000 (µL) Date Analyzed: 03/13/03

Injection Volume: 2 (µL) Dilution Factor: 1.00

GPC Cleanup: (Y/N) N pH: ____ Extraction: (Type) CONT

CAS NO.	COMPOUND	CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L	Q
121-14-2	2,4-Dinitrotoluene	10	U
84-66-2	Diethylphthalate	10	U
7005-72-3	4-Chlorophenyl-phenylether	10	U
86-73-7	Fluorene	10	U
100-01-6	4-Nitroaniline	25	U
534-52-1	4,6-Dinitro-2-methylphenol	25	U
86-30-6	N-Nitrosodiphenylamine	10	U
101-55-3	4-Bromophenyl-phenylether	10	U
118-74-1	Hexachlorobenzene	10	U
87-86-5	Pentachlorophenol	25	U
85-01-8	Phenanthrene	10	U
120-12-7	Anthracene	10	U
86-74-8	Carbazole	10	U
84-74-2	Di-n-butyl phthalate	10	U
206-44-0	Fluoranthene	10	U
129-00-0	Pyrene	10	U
85-68-7	Butyl benzyl phthalate	10	U
91-94-1	3,3'-Dichlorobenzidine	20	U
56-55-3	Benzo(a)anthracene	10	U
218-01-9	Chrysene	10	U
117-81-7	Bis(2-ethylhexyl)phthalate	10	U
117-84-0	Di-n-octyl phthalate	10	U
205-99-2	Benzo(b)fluoranthene	10	U
207-08-9	Benzo(k)fluoranthene	10	U
50-32-8	Benzo(a)pyrene	10	U
193-39-5	Indeno(1,2,3-cd)pyrene	10	U
53-70-3	Dibenzo(a,h)anthracene	10	U
191-24-2	Benzo(g,h,i)perylene	10	U

Outfall 001
Sampled 3-3-03
24 Hr. Composite

BNLS728 S61

1C

SEMIVOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16244-001

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: _____ SDG No.: BNLS728

Matrix: (soil/water) WATER Lab Sample ID: 0303100-001D

Sample wt/vol: 1000 (g/mL) ML Lab File ID: A\C22867.D

Level: (low/med) LOW Date Received: 03/05/03

% Moisture: Decanted: (Y/N) N Date Extracted: 03/10/03

Concentrated Extract Volume: 1000 (µL) Date Analyzed: 03/13/03

Injection Volume: 2 (µL) Dilution Factor: 1.00

GPC Cleanup: (Y/N) N pH: ____ Extraction: (Type) CONT

CAS NO.	COMPOUND	CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L	Q
108-95-2	Phenol	10	U
111-44-4	Bis(2-chloroethyl)ether	10	U
95-57-8	2-Chlorophenol	10	U
541-73-1	1,3-Dichlorobenzene	10	U
106-46-7	1,4-Dichlorobenzene	10	U
95-50-1	1,2-Dichlorobenzene	10	U
95-48-7	2-Methylphenol	10	U
108-60-1	2,2'-oxybis(1-Chloropropane)	10	U
106-44-5	4-Methylphenol	10	U
621-64-7	N-Nitroso-di-n-propylamine	10	U
67-72-1	Hexachloroethane	10	U
98-95-3	Nitrobenzene	10	U
78-59-1	Isophorone	10	U
88-75-5	2-Nitrophenol	10	U
105-67-9	2,4-Dimethylphenol	10	U
111-91-1	Bis(2-chloroethoxy)methane	10	U
120-83-2	2,4-Dichlorophenol	10	U
120-82-1	1,2,4-Trichlorobenzene	10	U
91-20-3	Naphthalene	10	U
106-47-8	4-Chloroaniline	10	U
87-68-3	Hexachlorobutadiene	10	U
59-50-7	4-Chloro-3-methylphenol	10	U
91-57-6	2-Methylnaphthalene	10	U
77-47-4	Hexachlorocyclopentadiene	10	U
88-06-2	2,4,6-Trichlorophenol	10	U
95-95-4	2,4,5-Trichlorophenol	25	U
91-58-7	2-Chloronaphthalene	10	U
88-74-4	2-Nitroaniline	25	U
131-11-3	Dimethylphthalate	10	U
208-96-8	Acenaphthylene	10	U
606-20-2	2,6-Dinitrotoluene	10	U
99-09-2	3-Nitroaniline	25	U
83-32-9	Acenaphthene	10	U
51-28-5	2,4-Dinitrophenol	25	U
100-02-7	4-Nitrophenol	25	U
132-64-9	Dibenzofuran	10	U

Outfall 001
Sampled 3-5-03
24 Hr. Composite

BNLS728 S79

1D

SEMIVOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16244-001

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: _____ SDG No.: BNLS728

Matrix: (soil/water) WATER Lab Sample ID: 0303100-001D

Sample wt/vol: 1000 (g/mL) ML Lab File ID: A\C22867.D

Level: (low/med) LOW Date Received: 03/05/03

% Moisture: Decanted: (Y/N) N Date Extracted: 03/10/03

Concentrated Extract Volume: 1000 (µL) Date Analyzed: 03/13/03

Injection Volume: 2 (µL) Dilution Factor: 1.00

GPC Cleanup: (Y/N) N pH: ____ Extraction: (Type) CONT

CAS NO.	COMPOUND	CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L	Q
121-14-2	2,4-Dinitrotoluene	10	U
84-66-2	Diethylphthalate	10	U
7005-72-3	4-Chlorophenyl-phenylether	10	U
86-73-7	Fluorene	10	U
100-01-6	4-Nitroaniline	25	U
534-52-1	4,6-Dinitro-2-methylphenol	25	U
86-30-6	N-Nitrosodiphenylamine	10	U
101-55-3	4-Bromophenyl-phenylether	10	U
118-74-1	Hexachlorobenzene	10	U
87-86-5	Pentachlorophenol	25	U
85-01-8	Phenanthrene	10	U
120-12-7	Anthracene	10	U
86-74-8	Carbazole	10	U
84-74-2	Di-n-butyl phthalate	10	U
206-44-0	Fluoranthene	10	U
129-00-0	Pyrene	10	U
85-68-7	Butyl benzyl phthalate	10	U
91-94-1	3,3'-Dichlorobenzidine	20	U
56-55-3	Benzo(a)anthracene	10	U
218-01-9	Chrysene	10	U
117-81-7	Bis(2-ethylhexyl)phthalate	10	U
117-84-0	Di-n-octyl phthalate	10	U
205-99-2	Benzo(b)fluoranthene	10	U
207-08-9	Benzo(k)fluoranthene	10	U
50-32-8	Benzo(a)pyrene	10	U
193-39-5	Indeno(1,2,3-cd)pyrene	10	U
53-70-3	Dibenzo(a,h)anthracene	10	U
191-24-2	Benzo(g,h,i)perylene	10	U

Outfall 001
Sampled 3-5-03
24 Hr. Composite

BNLS728 S80

1C

SEMIVOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16252-001

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: _____ SDG No.: BNLS728

Matrix: (soil/water) WATER Lab Sample ID: 0303171-001D

Sample wt/vol: 1000 (g/mL) ML Lab File ID: A\C22868.D

Level: (low/med) LOW Date Received: 03/07/03

% Moisture: Decanted: (Y/N) N Date Extracted: 03/10/03

Concentrated Extract Volume: 1000 (µL) Date Analyzed: 03/13/03

Injection Volume: 2 (µL) Dilution Factor: 1.00

GPC Cleanup: (Y/N) N pH: ____ Extraction: (Type) CONT

CONCENTRATION UNITS:

CAS NO.	COMPOUND	(µg/L or µg/Kg) UG/L	Q
108-95-2	Phenol	10	U
111-44-4	Bis(2-chloroethyl)ether	10	U
95-57-8	2-Chlorophenol	10	U
541-73-1	1,3-Dichlorobenzene	10	U
106-46-7	1,4-Dichlorobenzene	10	U
95-50-1	1,2-Dichlorobenzene	10	U
95-48-7	2-Methylphenol	10	U
108-60-1	2,2'-oxybis(1-Chloropropane)	10	U
106-44-5	4-Methylphenol	10	U
621-64-7	N-Nitroso-di-n-propylamine	10	U
67-72-1	Hexachloroethane	10	U
98-95-3	Nitrobenzene	10	U
78-59-1	Isophorone	10	U
88-75-5	2-Nitrophenol	10	U
105-67-9	2,4-Dimethylphenol	10	U
111-91-1	Bis(2-chloroethoxy)methane	10	U
120-83-2	2,4-Dichlorophenol	10	U
120-82-1	1,2,4-Trichlorobenzene	10	U
91-20-3	Naphthalene	10	U
106-47-8	4-Chloroaniline	10	U
87-68-3	Hexachlorobutadiene	10	U
59-50-7	4-Chloro-3-methylphenol	10	U
91-57-6	2-Methylnaphthalene	10	U
77-47-4	Hexachlorocyclopentadiene	10	U
88-06-2	2,4,6-Trichlorophenol	10	U
95-95-4	2,4,5-Trichlorophenol	25	U
91-58-7	2-Chloronaphthalene	10	U
88-74-4	2-Nitroaniline	25	U
131-11-3	Dimethylphthalate	10	U
208-96-8	Acenaphthylene	10	U
606-20-2	2,6-Dinitrotoluene	10	U
99-09-2	3-Nitroaniline	25	U
83-32-9	Acenaphthene	10	U
51-28-5	2,4-Dinitrophenol	25	U
100-02-7	4-Nitrophenol	25	U
132-64-9	Dibenzofuran	10	U

Outfall 001
Sampled 3-7-03
24 Hr. Composite

BNLS728 S97

1D

SEMIVOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16252-001

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: _____ SDG No.: BNLS728

Matrix: (soil/water) WATER Lab Sample ID: 0303171-001D

Sample wt/vol: 1000 (g/mL) ML Lab File ID: A\C22868.D

Level: (low/med) LOW Date Received: 03/07/03

% Moisture: Decanted: (Y/N) N Date Extracted: 03/10/03

Concentrated Extract Volume: 1000 (µL) Date Analyzed: 03/13/03

Injection Volume: 2 (µL) Dilution Factor: 1.00

GPC Cleanup: (Y/N) N pH: ____ Extraction: (Type) CONT

CAS NO.	COMPOUND	CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L	Q
121-14-2	2,4-Dinitrotoluene	10	U
84-66-2	Diethylphthalate	10	U
7005-72-3	4-Chlorophenyl-phenylether	10	U
86-73-7	Fluorene	10	U
100-01-6	4-Nitroaniline	25	U
534-52-1	4,6-Dinitro-2-methylphenol	25	U
86-30-6	N-Nitrosodiphenylamine	10	U
101-55-3	4-Bromophenyl-phenylether	10	U
118-74-1	Hexachlorobenzene	10	U
87-86-5	Pentachlorophenol	25	U
85-01-8	Phenanthrene	10	U
120-12-7	Anthracene	10	U
86-74-8	Carbazole	10	U
84-74-2	Di-n-butyl phthalate	10	U
206-44-0	Fluoranthene	10	U
129-00-0	Pyrene	10	U
85-68-7	Butyl benzyl phthalate	10	U
91-94-1	3,3'-Dichlorobenzidine	20	U
56-55-3	Benzo(a)anthracene	10	U
218-01-9	Chrysene	10	U
117-81-7	Bis(2-ethylhexyl)phthalate	10	U
117-84-0	Di-n-octyl phthalate	10	U
205-99-2	Benzo(b)fluoranthene	10	U
207-08-9	Benzo(k)fluoranthene	10	U
50-32-8	Benzo(a)pyrene	10	U
193-39-5	Indeno(1,2,3-cd)pyrene	10	U
53-70-3	Dibenzo(a,h)anthracene	10	U
191-24-2	Benzo(g,h,i)perylene	10	U

Outfall 001
Sampled 3-7-03
24Hr. Composite

BNLS728 S98

1E

PESTICIDE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16234-002

Lab Name: H2M LABS, INC. Contract: _____

Lab Code: 10478 Case No.: BNLS SAS No.: _____ SDG No.: BNLS728

Matrix: (soil/water) WATER Lab Sample ID: 0303024-002D

Sample wt/vol: 1000 (g/mL) ML Lab File ID: A22310.RAW

% Moisture: Decanted: (Y/N) N Date Received: 03/03/03

Extraction: (Type) CONT Date Extracted: 03/10/03

Concentrated Extract Volume: 10000 (uL) Date Analyzed: 03/12/03

Injection Volume: 0.5 (uL) Dilution Factor: 1.00

GPC Cleanup: (Y/N) N pH: ____ Sulfur Cleanup: (Y/N) N

CONCENTRATION UNITS:

CAS NO.	COMPOUND	(µg/L or µg/Kg) UG/L	Q
319-84-6	alpha-BHC	0.050	U
319-85-7	beta-BHC	0.050	U
319-86-8	delta-BHC	0.050	U
58-89-9	gamma-BHC	0.050	U
76-44-8	Heptachlor	0.050	U
309-00-2	Aldrin	0.050	U
1024-57-3	Heptachlor epoxide	0.32	P
959-98-8	Endosulfan I	0.050	U
60-57-1	Dieldrin	0.10	U
72-55-9	4,4'-DDE	0.10	U
72-20-8	Endrin	0.10	U
33213-65-9	Endosulfan II	0.10	U
72-54-8	4,4'-DDD	0.10	U
1031-07-8	Endosulfan sulfate	0.10	U
50-29-3	4,4'-DDT	0.10	U
72-43-5	Methoxychlor	0.50	U
53494-70-5	Endrin ketone	0.10	U
7421-93-4	Endrin aldehyde	0.10	U
57-74-9	Chlordane	1.0	U
8001-35-2	Toxaphene	5.0	U

Outfall 001
Sampled 3-3-03
Grab Sample

BNLS728 S69

1E

PESTICIDE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16244-002

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: ____ SDG No.: BNLS728

Matrix: (soil/water) WATER Lab Sample ID: 0303100-002D

Sample wt/vol: 1000 (g/mL) ML Lab File ID: A22311.RAW

% Moisture: Decanted: (Y/N) N Date Received: 03/05/03

Extraction: (Type) CONT Date Extracted: 03/10/03

Concentrated Extract Volume: 10000 (uL) Date Analyzed: 03/12/03

Injection Volume: 0.5 (uL) Dilution Factor: 1.00

GPC Cleanup: (Y/N) N pH: ___ Sulfur Cleanup: (Y/N) N

CONCENTRATION UNITS:

CAS NO.	COMPOUND	(µg/L or µg/Kg) UG/L	Q
319-84-6	alpha-BHC	0.050	U
319-85-7	beta-BHC	0.050	U
319-86-8	delta-BHC	0.050	U
58-89-9	gamma-BHC	0.050	U
76-44-8	Heptachlor	0.050	U
309-00-2	Aldrin	0.050	U
1024-57-3	Heptachlor epoxide	0.42	P
959-98-8	Endosulfan I	0.050	U
60-57-1	Dieldrin	0.10	U
72-55-9	4,4'-DDE	0.10	U
72-20-8	Endrin	0.10	U
33213-65-9	Endosulfan II	0.10	U
72-54-8	4,4'-DDD	0.10	U
1031-07-8	Endosulfan sulfate	0.10	U
50-29-3	4,4'-DDT	0.10	U
72-43-5	Methoxychlor	0.50	U
53494-70-5	Endrin ketone	0.10	U
7421-93-4	Endrin aldehyde	0.10	U
57-74-9	Chlordane	1.0	U
8001-35-2	Toxaphene	5.0	U

Outfall 001
Sampled 3-5-03
Grab Sample

BNLS728 S83

1E

PESTICIDE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16252-002

Lab Name: H2M LABS, INC. Contract: _____

Lab Code: 10478 Case No.: BNLS SAS No.: _____ SDG No.: BNLS728

Matrix: (soil/water) WATER Lab Sample ID: 0303171-002D

Sample wt/vol: 1000 (g/mL) ML Lab File ID: A22312.RAW

% Moisture: Decanted: (Y/N) N Date Received: 03/07/03

Extraction: (Type) CONT Date Extracted: 03/10/03

Concentrated Extract Volume: 10000 (uL) Date Analyzed: 03/12/03

Injection Volume: 0.5 (uL) Dilution Factor: 1.00

GPC Cleanup: (Y/N) N pH: ____ Sulfur Cleanup: (Y/N) N

CAS NO.	COMPOUND	CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L	Q
319-84-6	alpha-BHC	0.050	U
319-85-7	beta-BHC	0.050	U
319-86-8	delta-BHC	0.050	U
58-89-9	gamma-BHC	0.050	U
76-44-8	Heptachlor	0.050	U
309-00-2	Aldrin	0.050	U
1024-57-3	Heptachlor epoxide	0.48	P
959-98-8	Endosulfan I	0.050	U
60-57-1	Dieldrin	0.10	U
72-55-9	4,4'-DDE	0.10	U
72-20-8	Endrin	0.10	U
33213-65-9	Endosulfan II	0.10	U
72-54-8	4,4'-DDD	0.10	U
1031-07-8	Endosulfan sulfate	0.10	U
50-29-3	4,4'-DDT	0.10	U
72-43-5	Methoxychlor	0.50	U
53494-70-5	Endrin ketone	0.10	U
7421-93-4	Endrin aldehyde	0.10	U
57-74-9	Chlordane	1.0	U
8001-35-2	Toxaphene	5.0	U

Outfall 001
Sampled 3-7-03
Grab Sample

BNLS728 S106

Form 1

CLIENT SAMPLE NO.

16234-001

Lab Name: H2M LABS, INC. Contract: _____

Lab Code: 10478 Case No.: BNLS SAS No.: _____ SDG No.: BNLS728

Matrix: (soil/water) Aqueous Lab Sample ID: 0303024-001D

Sample wt/vol: 1000 (g/mL) ML Lab File ID: B00136.RAW

Level: (low/med) LOW Date Received: 3/3/03

% Moisture: not dec. Date Extracted: 3/7/03

GC Column: R-35 ID: .53 (mm) Date Analyzed: 3/12/03

Extract Volume: 10000 (µl) Dilution Factor: 1.00

Injection Volume: 0.5 (µl)

CONCENTRATION UNITS:

CAS NO.	COMPOUND (ug/L or ug/Kg)	µg/L	Q
94-75-7	2,4-D	0.5	U
93-72-1	2,4,5-TP (Silvex)	0.3	U
1918-00-9	Dicamba	0.2	U
93-76-5	2,4,5-T	0.3	U
88-85-7	Dinoseb	0.2	U

Outfall 001
Sampled 3-3-03
24-Hr. composite

BNLS728 S63

Form 1

CLIENT SAMPLE NO.

16244-001

Lab Name: H2M LABS, INC. Contract: _____

Lab Code: 10478 Case No.: BNLS SAS No.: _____ SDG No.: BNLS728

Matrix: (soil/water) Aqueous Lab Sample ID: 0303100-001D

Sample wt/vol: 1000 (g/mL) ML Lab File ID: A00137.RAW

Level: (low/med) LOW Date Received: 3/5/03

% Moisture: not dec. Date Extracted: 3/7/03

GC Column: R-CLP ID: .53 (mm) Date Analyzed: 3/12/03

Extract Volume: 10000 (µl) Dilution Factor: 1.00

Injection Volume: 0.5 (µl)

CONCENTRATION UNITS:

CAS NO.	COMPOUND (ug/L or ug/Kg)	µg/L	Q
94-75-7	2,4-D	0.5	U
93-72-1	2,4,5-TP (Silvex)	0.3	U
1918-00-9	Dicamba	0.2	U
93-76-5	2,4,5-T	0.3	U
88-85-7	Dinoseb	0.2	U

Outfall 001
Sampled 3-5-03
24 Hr. Composite

BNLS728 S82

Form 1

CLIENT SAMPLE NO.

16252-001

Lab Name: H2M LABS, INC. Contract: _____

Lab Code: 10478 Case No.: BNLS SAS No.: _____ SDG No.: BNLS728

Matrix: (soil/water) Aqueous Lab Sample ID: 0303171-001D

Sample wt/vol: 1000 (g/mL) ML Lab File ID: A00138.RAW

Level: (low/med) LOW Date Received: 3/7/03

% Moisture: not dec. Date Extracted: 3/7/03

GC Column: R-CLP ID: .53 (mm) Date Analyzed: 3/12/03

Extract Volume: 10000 (µl) Dilution Factor: 1.00

Injection Volume: 0.5 (µl)

CONCENTRATION UNITS:

CAS NO.	COMPOUND (ug/L or ug/Kg)	µg/L	Q
94-75-7	2,4-D	0.5	U
93-72-1	2,4,5-TP (Silvex)	0.3	U
1918-00-9	Dicamba	0.2	U
93-76-5	2,4,5-T	0.3	U
88-85-7	Dinoseb	0.2	U

Outfall 001
Sampled 3-7-03
24 Hr. Composite

BNLS728 S100

IE

PESTICIDE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16234-002LL

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: ____ SDG No.: BNLS728

Matrix: (soil/water) WATER Lab Sample ID: 0303024-002D

Sample wt/vol: 1000 (g/mL) ML Lab File ID: A22322.RAW

% Moisture: Decanted: (Y/N) N Date Received: 03/03/03

Extraction: (Type) CONT Date Extracted: 03/10/03

Concentrated Extract Volume: 1000 (uL) Date Analyzed: 03/12/03

Injection Volume: 0.5 (uL) Dilution Factor: 1.00

GPC Cleanup: (Y/N) N pH: ___ Sulfur Cleanup: (Y/N) N

CAS NO.	COMPOUND	CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L	Q
12674-11-2	Aroclor 1016	0.065	U
11104-28-2	Aroclor 1221	0.065	U
11141-16-5	Aroclor 1232	0.065	U
53469-21-9	Aroclor 1242	0.065	U
12672-29-6	Aroclor 1248	0.065	U
11097-69-1	Aroclor 1254	0.065	U
11096-82-5	Aroclor 1260	0.065	U

Outfall 001
Sampled 3-3-03
Grab Sample

BNLS728 S70

1E

PESTICIDE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16244-002LL

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: ____ SDG No.: BNLS728

Matrix: (soil/water) WATER Lab Sample ID: 0303100-002D

Sample wt/vol: 1000 (g/mL) ML Lab File ID: A22323.RAW

% Moisture: Decanted: (Y/N) N Date Received: 03/05/03

Extraction: (Type) CONT Date Extracted: 03/10/03

Concentrated Extract Volume: 1000 (uL) Date Analyzed: 03/12/03

Injection Volume: 0.5 (uL) Dilution Factor: 1.00

GPC Cleanup: (Y/N) N pH: ___ Sulfur Cleanup: (Y/N) N

CAS NO.	COMPOUND	CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L	Q
12674-11-2	Aroclor 1016	0.065	U
11104-28-2	Aroclor 1221	0.065	U
11141-16-5	Aroclor 1232	0.065	U
53469-21-9	Aroclor 1242	0.065	U
12672-29-6	Aroclor 1248	0.065	U
11097-69-1	Aroclor 1254	0.065	U
11096-82-5	Aroclor 1260	0.065	U

Outfall 001
Sampled 3-5-03
Grab Sample

BNLS728 S84

1E

PESTICIDE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16252-002LL

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: ____ SDG No.: BNLS728

Matrix: (soil/water) WATER Lab Sample ID: 0303171-002D

Sample wt/vol: 1000 (g/mL) ML Lab File ID: A22324.RAW

% Moisture: Decanted: (Y/N) N Date Received: 03/07/03

Extraction: (Type) CONT Date Extracted: 03/10/03

Concentrated Extract Volume: 1000 (uL) Date Analyzed: 03/12/03

Injection Volume: 0.5 (uL) Dilution Factor: 1.00

GPC Cleanup: (Y/N) N pH: ____ Sulfur Cleanup: (Y/N) N

CAS NO.	COMPOUND	CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L	Q
12674-11-2	Aroclor 1016	0.065	U
11104-28-2	Aroclor 1221	0.065	U
11141-16-5	Aroclor 1232	0.065	U
53469-21-9	Aroclor 1242	0.065	U
12672-29-6	Aroclor 1248	0.065	U
11097-69-1	Aroclor 1254	0.065	U
11096-82-5	Aroclor 1260	0.065	U

Outfall 001
Sampled 3-7-03
Grab Sample

BNLS728 S107

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLS
70 Bell Ave.
Upton, NY 11973
Attn To : Sal Scarpitta

Lab No. : 0303024-001

Client ID. : 16234-001

Sample Information...
Type : Aqueous

Origin:

Collected 3/3/2003 10:40:00 AM
Received 3/3/2003 3:40:00 PM
Collected By CLIENT
Copies To Bob Lee

Parameter(s)	Results	Units	Method Number	Analyzed
Biochemical Oxygen Demand	< 2	mg/L	E405.1	3/5/2003 4:02:00 PM
Nitrogen, Total	6.3	mg/L	M4500-N C	3/13/2003
Nitrogen, Ammonia (As N)	0.40	mg/L	E350.1	3/13/2003 6:13:55 PM
Nitrite as N	0.05	mg/L	E353.2	3/4/2003 5:26:46 PM
Nitrate as N	5.34	mg/L	E353.2	3/13/2003 1:29:29 PM
Phosphorus, Total (As P)	1.57	mg/L	E365.2	3/10/2003 3:32:00 PM
Nitrogen, Kjeldahl, Total	0.99	mg/L	E351.2	3/11/2003 4:08:51 PM
Suspended Solids (Residue, Non-Filterable)	4	mg/L	E160.2	3/5/2003 8:20:00 AM

Outfall 001
Sampled 3-3-03
24 Hr. Composite

Qualifiers: E - Value above quantitation range
D - Results for Dilution

Date Reported : 3/25/2003

Joann M. Slavin
Laboratory Manager

BNLS728 S65

FZM LABS, INC.
575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLS
70 Bell Ave.
Upton, NY 11973
Attn To : Sal Scarpitta

Lab No. : 0303100-001

Sample Information...
Type : Aqueous

Origin:

Client ID. : 16244-001

Collected 3/5/2003 10:00:00 AM
Received 3/5/2003 3:30:00 PM
Collected By CLIENT
Copies To Bob Lee

Parameter(s)	Results	Units	Method Number	Analyzed
Biochemical Oxygen Demand	< 2	mg/L	E405.1	3/6/2003 5:11:00 PM
Nitrogen, Total	6.7	mg/L	M4500-N C	3/13/2003
Nitrogen, Ammonia (As N)	< 0.10	mg/L	E350.1	3/13/2003 6:16:19 PM
Nitrite as N	< 0.01	mg/L	E353.2	3/6/2003 12:29:20 PM
Nitrate as N	6.12	mg/L	E353.2	3/13/2003 1:31:30 PM
Phosphorus, Total (As P)	1.28	mg/L	E365.2	3/10/2003 3:35:00 PM
Nitrogen, Kjeldahl, Total	0.61	mg/L	E351.2	3/11/2003 3:22:56 PM
Suspended Solids (Residue, Non-Filterable)	< 4	mg/L	E160.2	3/7/2003 10:32:00 AM

Outfall 001
Sampled 3-5-03
24 Hr. Composite

Qualifiers: E - Value above quantitation range
D - Results for Dilution

Date Reported : 3/25/2003

Joann M. Slavin
Laboratory Manager

BNLS728 S86

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID# 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLS
70 Bell Ave.
Upton, NY 11973
Attn To : Sal Scarpitta

Lab No. : 0303171-001

Client ID. : 16252-001

Sample Information...
Type : Aqueous

Origin:

Collected 3/7/2003 10:20:00 AM
Received 3/7/2003 3:55:00 PM
Collected By CLIENT
Copies To Bob Lee

Parameter(s)	Results	Units	Method Number	Analyzed
Biochemical Oxygen Demand	2	mg/L	E405.1	3/8/2003 5:13:00 PM
Nitrogen, Total	8.0	mg/L	M4500-N C	3/13/2003
Nitrogen, Ammonia (As N)	< 0.10	mg/L	E350.1	3/15/2003 12:10:07 PM
Nitrite as N	0.02	mg/L	E353.2	3/8/2003 11:13:14 AM
Nitrate as N	7.31	mg/L	E353.2	3/13/2003 1:32:09 PM
Phosphorus, Total (As P)	1.24	mg/L	E365.2	3/10/2003 3:36:00 PM
Nitrogen, Kjeldahl, Total	0.69	mg/L	E351.2	3/11/2003 3:25:00 PM
Suspended Solids (Residue, Non-Filterable)	< 4	mg/L	E160.2	3/12/2003 12:20:00 PM

Outfall 001
Sampled 3-7-03
24 Hr. Composite

Qualifiers: E - Value above quantitation range
D - Results for Dilution

Joann M. Slavin
Laboratory Manager

Date Reported : 3/25/2003

BNLS728 S102

U.S. EPA - CLP

1

INORGANIC ANALYSIS DATA SHEET

EPA SAMPLE NO

16234-002

Lab Name: H2M LABS, INC. Contract:

Lab Code: 10478 Case No. SAS No.: SDG No.: BNLS728

Matrix (soil/water): WATER Lab Sample ID: 0303024-002

Level (low/med): LOW Date Received: 3/3/2003

% Solids: 0.0

Concentration Units (ug/L or mg/kg dry weight): UG/L

CAS No.	Analyte	Concentration	C	Q	M
57-12-5	Cyanide	10	U		CA

Outfall 001
Sampled 3-3-03
Grab Sample

Comments:

BNLS728 S71

FORM I - IN ILM04.1

U.S. EPA - CLP

1

INORGANIC ANALYSIS DATA SHEET

EPA SAMPLE NO

16244-002

Lab Name: H2M LABS, INC. Contract:

Lab Code: 10478 Case No. SAS No.: SDG No.: BNLS728

Matrix (soil/water): WATER Lab Sample ID: 0303100-002

Level (low/med): LOW Date Received: 3/5/2003

% Solids: 0.0

Concentration Units (ug/L or mg/kg dry weight): UG/L

CAS No.	Analyte	Concentration	C	Q	M
57-12-5	Cyanide	10	U		CA

Outfall 001
Sampled 3-5-03
Grab Sample

Comments:

BNLS728 S90

FORM I - IN ILM04.1

U.S. EPA - CLP

1

INORGANIC ANALYSIS DATA SHEET

EPA SAMPLE NO

16252-002

Lab Name: H2M LABS, INC. Contract:

Lab Code: 10478 Case No. SAS No.: SDG No.: BNLS728

Matrix (soil/water): WATER Lab Sample ID: 0303171-002

Level (low/med): LOW Date Received: 3/7/2003

% Solids: 0.0

Concentration Units (ug/L or mg/kg dry weight): UG/L

CAS No.	Analyte	Concentration	C	Q	M
57-12-5	Cyanide	10	U		CA

Outfall 001
Sampled 3-7-03
Grab Sample

Comments:

BNLS728 S108

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLS
70 Bell Ave.
Upton, NY 11973
Attn To : Sal Scarpitta

Lab No. : 0303024-002

Client ID. : 16234-002

Sample Information...
Type : Aqueous

Origin:

Collected 3/3/2003 2:00:00 PM
Received 3/3/2003 3:40:00 PM
Collected By CLIENT
Copies To Bob Lee

Parameter(s)	Results	Units	Method Number	Analyzed
Fecal Coliform	< 2	MPN	M9221 C	3/3/2003 4:00:00 PM

Outfall 001
Sampled 3-3-03
Grab Sample

Qualifiers: E - Value above quantitation range
D - Results for Dilution

Joann M. Slavin
Laboratory Manager

Date Reported : 3/25/2003

BNLS728 S72

PZM LABS, INC.
575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLS
70 Bell Ave.
Upton, NY 11973
Attn To : Sal Scarpitta

Lab No. : 0303100-002

Client ID. : 16244-002

Sample Information...
Type : Aqueous

Origin:

Collected 3/5/2003 1:55:00 PM
Received 3/5/2003 3:30:00 PM
Collected By CLIENT
Copies To Bob Lee

Parameter(s)	Results	Units	Method Number	Analyzed
Fecal Coliform	< 2	MPN	M9221 C	3/5/2003 4:00:00 PM

Outfall 001
Sampled 3-5-03
Grab Sample

Qualifiers: E - Value above quantitation range
D - Results for Dilution

Date Reported : 3/25/2003

Joann M. Slavin
Laboratory Manager

BNLS728 S91

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLS
70 Bell Ave.
Upton, NY 11973
Attn To : Sal Scarpitta

Lab No. : 0303171-002

Client ID. : 16252-002

Sample Information...
Type : Aqueous

Origin:

Collected 3/7/2003 1:45:00 PM
Received 3/7/2003 3:55:00 PM
Collected By CLIENT
Copies To Bob Lee

Parameter(s)	Results	Units	Method Number	Analyzed
Fecal Coliform	< 2	MPN	M9221 C	3/7/2003 4:15:00 PM

Outfall 001
Sampled 3-7-03
Grab Sample

Qualifiers: E - Value above quantitation range
D - Results for Dilution

Joann M. Slavin
Laboratory Manager

Date Reported : 3/25/2003

BNLS728 S109

U.S. EPA - CLP

1

INORGANIC ANALYSIS DATA SHEET

EPA SAMPLE NO

16234-001

Lab Name: H2M LABS, INC. Contract:

Lab Code: 10478 Case No. SAS No.: SDG No.: BNLS728

Matrix (soil/water): WATER Lab Sample ID: 0303024-001

Level (low/med): LOW Date Received: 3/3/2003

% Solids: 0.0

Concentration Units (ug/L or mg/kg dry weight): UG/L

CAS No.	Analyte	Concentration	C	Q	M
7429-90-5	Aluminum	210			P
7440-36-0	Antimony	2.2	U		P
7440-38-2	Arsenic	2.2	B		P
7440-39-3	Barium	19.7	B		P
7440-41-7	Beryllium	0.15	B		P
7440-43-9	Cadmium	0.40	B		P
7440-70-2	Calcium	10200			P
7440-47-3	Chromium	3.3	B		P
7440-48-4	Cobalt	0.77	B		P
7440-50-8	Copper	44.1		E	P
7439-89-6	Iron	390			P
7439-92-1	Lead	5.8			P
7439-95-4	Magnesium	2700	B		P
7439-96-5	Manganese	14.2	B		P
7439-97-6	Mercury	0.24			CV
7440-02-0	Nickel	3.8	B		P
7440-09-7	Potassium	3980	B	E	P
7782-49-2	Selenium	2.2	U		P
7440-22-4	Silver	3.0	B		P
7440-23-5	Sodium	35000			P
7440-28-0	Thallium	2.3	U		P
7440-62-2	Vanadium	4.0	B		P
7440-66-6	Zinc	60.8		E	P

outfall 001
Sampled 3-3-03
24 Hr. Composite

Color Before: COLORLESS Clarity Before: CLEAR Texture: _____

Color After: COLORLESS Clarity After: CLEAR Artifacts: _____

Comments:

BNLS728 S64

U.S. EPA - CLP

1

INORGANIC ANALYSIS DATA SHEET

EPA SAMPLE NO

16244-001

Lab Name: H2M LABS, INC. Contract:

Lab Code: 10478 Case No. SAS No.: SDG No.: BNLS728

Matrix (soil/water): WATER Lab Sample ID: 0303100-001

Level (low/med): LOW Date Received: 3/5/2003

% Solids: 0.0

Concentration Units (ug/L or mg/kg dry weight): UG/L

CAS No.	Analyte	Concentration	C	Q	M
7429-90-5	Aluminum	70.6	B		P
7440-36-0	Antimony	2.2	U		P
7440-38-2	Arsenic	1.2	U		P
7440-39-3	Barium	19.2	B		P
7440-41-7	Beryllium	0.10	U		P
7440-43-9	Cadmium	0.10	U		P
7440-70-2	Calcium	12800			P
7440-47-3	Chromium	1.7	B		P
7440-48-4	Cobalt	0.60	U		P
7440-50-8	Copper	46.8		E	P
7439-89-6	Iron	229			P
7439-92-1	Lead	2.6	B		P
7439-95-4	Magnesium	3450	B		P
7439-96-5	Manganese	8.6	B		P
7439-97-6	Mercury	0.10	U		CV
7440-02-0	Nickel	3.6	B		P
7440-09-7	Potassium	4270	B	E	P
7782-49-2	Selenium	2.2	U		P
7440-22-4	Silver	1.2	B		P
7440-23-5	Sodium	31800			P
7440-28-0	Thallium	2.3	U		P
7440-62-2	Vanadium	1.9	B		P
7440-66-6	Zinc	72.8		E	P

Outfall 001
Sampled 3-5-03
24 Hr. Composite

Color Before: COLORLESS Clarity Before: CLEAR Texture: _____

Color After: COLORLESS Clarity After: CLEAR Artifacts: _____

Comments:

BNLS728 S85

U.S. EPA - CLP

1

INORGANIC ANALYSIS DATA SHEET

EPA SAMPLE NO

16252-001

Lab Name: H2M LABS, INC. Contract:

Lab Code: 10478 Case No. SAS No.: SDG No.: BNLS728

Matrix (soil/water): WATER Lab Sample ID: 0303171-001

Level (low/med): LOW Date Received: 3/7/2003

% Solids: 0.0

Concentration Units (ug/L or mg/kg dry weight): UG/L

CAS No.	Analyte	Concentration	C	Q	M
7429-90-5	Aluminum	45.9	B		P
7440-36-0	Antimony	2.2	U		P
7440-38-2	Arsenic	1.2	U		P
7440-39-3	Barium	17.0	B		P
7440-41-7	Beryllium	0.10	U		P
7440-43-9	Cadmium	0.21	B		P
7440-70-2	Calcium	11300			P
7440-47-3	Chromium	1.5	B		P
7440-48-4	Cobalt	0.60	U		P
7440-50-8	Copper	35.6		E	P
7439-89-6	Iron	153			P
7439-92-1	Lead	1.9	B		P
7439-95-4	Magnesium	3100	B		P
7439-96-5	Manganese	5.1	B		P
7439-97-6	Mercury	0.10	U		CV
7440-02-0	Nickel	2.7	B		P
7440-09-7	Potassium	3770	B	E	P
7782-49-2	Selenium	2.2	U		P
7440-22-4	Silver	0.90	B		P
7440-23-5	Sodium	30800			P
7440-28-0	Thallium	2.3	U		P
7440-62-2	Vanadium	1.6	B		P
7440-66-6	Zinc	69.1		E	P

Outfall 001
Sampled 3-7-03
24 Hr. Composite

Color Before: COLORLESS Clarity Before: CLEAR Texture: _____

Color After: COLORLESS Clarity After: CLEAR Artifacts: _____

Comments:

BNLS728 S101

1A

VOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16252-002

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: ____ SDG No.: BNLS728

Matrix: (soil/water) WATER Lab Sample ID: 0303171-002A

Sample wt/vol: 5 (g/mL) ML Lab File ID: 03\W1383.D

Level: (low/med) LOW Date Received: 03/07/03

% Moisture: not dec. Date Analyzed: 03/10/03

GC Column: R-502.2 ID: .53 (mm) Dilution Factor: 1.00

Soil Extract Volume: _____ (µL) Soil Aliquot Volume _____ (µL)

CONCENTRATION UNITS:

CAS NO.	COMPOUND (µg/L or µg/Kg)	UG/L	Q
74-87-3	Chloromethane	1	U
75-01-4	Vinyl chloride	1	U
74-83-9	Bromomethane	1	U
75-00-3	Chloroethane	1	U
75-69-4	Trichlorofluoromethane	1	U
67-64-1	Acetone	5.3	B
75-35-4	1,1-Dichloroethene	1	U
75-09-2	Methylene chloride	4.5	
75-15-0	Carbon disulfide	1	U
156-60-5	trans-1,2-Dichloroethene	1	U
156-59-2	cis-1,2-Dichloroethene	1	U
108-05-4	Vinyl acetate	1	U
75-34-3	1,1-Dichloroethane	1	U
78-93-3	2-Butanone	5	U
67-66-3	Chloroform	1	U
107-06-2	1,2-Dichloroethane	1	U
71-55-6	1,1,1-Trichloroethane	1	U
56-23-5	Carbon tetrachloride	1	U
71-43-2	Benzene	1	U

J

J

Outfall 001
Sampled 3-7-03
Grab Sample

BNLS728 S103

1B

VOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16252-002

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: ____ SDG No.: BNLS728

Matrix: (soil/water) WATER Lab Sample ID: 0303171-002A

Sample wt/vol: 5 (g/mL) ML Lab File ID: 03\W1383.D

Level: (low/med) LOW Date Received: 03/07/03

% Moisture: not dec. Date Analyzed: 03/10/03

GC Column: R-502.2 ID: .53 (mm) Dilution Factor: 1.00

Soil Extract Volume: _____ (µL) Soil Aliquot Volume _____ (µL)

CAS NO.	COMPOUND	CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L	Q
79-01-6	Trichloroethene	1	U
78-87-5	1,2-Dichloropropane	1	U
75-27-4	Bromodichloromethane	1	U
110-75-8	2-Chloroethylvinyl ether	1	U
10061-01-5	cis-1,3-Dichloropropene	1	U
10061-02-6	trans-1,3-Dichloropropene	1	U
79-00-5	1,1,2-Trichloroethane	1	U
100-41-4	Ethylbenzene	1	U
124-48-1	Dibromochloromethane	1	U
75-25-2	Bromoform	1	U
108-10-1	4-Methyl-2-pentanone	5	U
591-78-6	2-Hexanone	5	U
108-88-3	Toluene	1	U
127-18-4	Tetrachloroethene	1	U
108-90-7	Chlorobenzene	1	U
1330-20-7	Xylene (total)	1	U
79-34-5	1,1,2,2-Tetrachloroethane	1	U
541-73-1	1,3-Dichlorobenzene	1	U
106-46-7	1,4-Dichlorobenzene	1	U
95-50-1	1,2-Dichlorobenzene	1	U

Outfall 001
Sampled 3-7-03
Grab Sample

BNLS728 S104

1A

VOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16244-002

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: ____ SDG No.: BNLS728

Matrix: (soil/water) WATER Lab Sample ID: 0303100-002A

Sample wt/vol: 5 (g/mL) ML Lab File ID: 03\W1369.D

Level: (low/med) LOW Date Received: 03/05/03

% Moisture: not dec. Date Analyzed: 03/06/03

GC Column: R-502.2 ID: .53 (mm) Dilution Factor: 1.00

Soil Extract Volume: _____ (µL) Soil Aliquot Volume _____ (µL)

CONCENTRATION UNITS:

CAS NO.	COMPOUND	(µg/L or µg/Kg) UG/L	Q
74-87-3	Chloromethane	1	U
75-01-4	Vinyl chloride	1	U
74-83-9	Bromomethane	1	U
75-00-3	Chloroethane	1	U
75-69-4	Trichlorofluoromethane	1	U
67-64-1	Acetone	5	U J PA
75-35-4	1,1-Dichloroethene	1	U
75-09-2	Methylene chloride	1	U J PA
75-15-0	Carbon disulfide	1	U
156-60-5	trans-1,2-Dichloroethene	1	U
156-59-2	cis-1,2-Dichloroethene	1	U
108-05-4	Vinyl acetate	1	U
75-34-3	1,1-Dichloroethane	1	U
78-93-3	2-Butanone	5	U
67-66-3	Chloroform	1	U
107-06-2	1,2-Dichloroethane	1	U
71-55-6	1,1,1-Trichloroethane	1	U
56-23-5	Carbon tetrachloride	1	U
71-43-2	Benzene	1	U

Outfall 001
Sampled 3-5-03
Grab Sample

BNLS728 S87

1B

VOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16244-002

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: ____ SDG No.: BNLS728

Matrix: (soil/water) WATER Lab Sample ID: 0303100-002A

Sample wt/vol: 5 (g/mL) ML Lab File ID: 03\W1369.D

Level: (low/med) LOW Date Received: 03/05/03

% Moisture: not dec. Date Analyzed: 03/06/03

GC Column: R-502.2 ID: .53 (mm) Dilution Factor: 1.00

Soil Extract Volume: _____ (µL) Soil Aliquot Volume _____ (µL)

CAS NO.	COMPOUND	CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L	Q
79-01-6	Trichloroethene	1	U
78-87-5	1,2-Dichloropropane	1	U
75-27-4	Bromodichloromethane	1	U
110-75-8	2-Chloroethylvinyl ether	1	U
10061-01-5	cis-1,3-Dichloropropene	1	U
10061-02-6	trans-1,3-Dichloropropene	1	U
79-00-5	1,1,2-Trichloroethane	1	U
100-41-4	Ethylbenzene	1	U
124-48-1	Dibromochloromethane	1	U
75-25-2	Bromoform	1	U
108-10-1	4-Methyl-2-pentanone	5	U
591-78-6	2-Hexanone	5	U
108-88-3	Toluene	1	U
127-18-4	Tetrachloroethene	1	U
108-90-7	Chlorobenzene	1	U
1330-20-7	Xylene (total)	1	U
79-34-5	1,1,2,2-Tetrachloroethane	1	U
541-73-1	1,3-Dichlorobenzene	1	U
106-46-7	1,4-Dichlorobenzene	1	U
95-50-1	1,2-Dichlorobenzene	1	U

Outfall 001
Sampled 3-5-03
Grab Sample

BNLS728 S88

1A

VOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16234-002

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: ____ SDG No.: BNLS728

Matrix: (soil/water) WATER Lab Sample ID: 0303024-002A

Sample wt/vol: 5 (g/mL) ML Lab File ID: 03\W1365.D

Level: (low/med) LOW Date Received: 03/03/03

% Moisture: not dec. Date Analyzed: 03/06/03

GC Column: R-502.2 ID: .53 (mm) Dilution Factor: 1.00

Soil Extract Volume: _____ (µL) Soil Aliquot Volume _____ (µL)

CONCENTRATION UNITS:

CAS NO.	COMPOUND (µg/L or µg/Kg)	UG/L	Q
74-87-3	Chloromethane	1	U
75-01-4	Vinyl chloride	1	U
74-83-9	Bromomethane	1	U
75-00-3	Chloroethane	1	U
75-69-4	Trichlorofluoromethane	1	U
67-64-1	Acetone	5	U J PH
75-35-4	1,1-Dichloroethene	1	U
75-09-2	Methylene chloride	1	U J PH
75-15-0	Carbon disulfide	1	U
156-60-5	trans-1,2-Dichloroethene	1	U
156-59-2	cis-1,2-Dichloroethene	1	U
108-05-4	Vinyl acetate	1	U
75-34-3	1,1-Dichloroethane	1	U
78-93-3	2-Butanone	5	U
67-66-3	Chloroform	1	U
107-06-2	1,2-Dichloroethane	1	U
71-55-6	1,1,1-Trichloroethane	1	U
56-23-5	Carbon tetrachloride	1	U
71-43-2	Benzene	1	U

Outfall 001
Sampled 3-3-03
Grab Sample

BNLS728 S66

1B

VOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16234-002

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: ____ SDG No.: BNLS728

Matrix: (soil/water) WATER Lab Sample ID: 0303024-002A

Sample wt/vol: 5 (g/mL) ML Lab File ID: 03\W1365.D

Level: (low/med) LOW Date Received: 03/03/03

% Moisture: not dec. Date Analyzed: 03/06/03

GC Column: R-502.2 ID: .53 (mm) Dilution Factor: 1.00

Soil Extract Volume: _____ (µL) Soil Aliquot Volume _____ (µL)

CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L

CAS NO.	COMPOUND	UG/L	Q
79-01-6	Trichloroethene	1	U
78-87-5	1,2-Dichloropropane	1	U
75-27-4	Bromodichloromethane	1	U
110-75-8	2-Chloroethylvinyl ether	1	U
10061-01-5	cis-1,3-Dichloropropene	1	U
10061-02-6	trans-1,3-Dichloropropene	1	U
79-00-5	1,1,2-Trichloroethane	1	U
100-41-4	Ethylbenzene	1	U
124-48-1	Dibromochloromethane	1	U
75-25-2	Bromoform	1	U
108-10-1	4-Methyl-2-pentanone	5	U
591-78-6	2-Hexanone	5	U
108-88-3	Toluene	1	U
127-18-4	Tetrachloroethene	1	U
108-90-7	Chlorobenzene	1	U
1330-20-7	Xylene (total)	1	U
79-34-5	1,1,2,2-Tetrachloroethane	1	U
541-73-1	1,3-Dichlorobenzene	1	U
106-46-7	1,4-Dichlorobenzene	1	U
95-50-1	1,2-Dichlorobenzene	1	U

Outfall 001
Sampled 3-3-03
Grab Sample

BNLS728 S67

H2M LABS, INC.
575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLS
70 Bell Ave.
Upton, NY 11973
Attn To : Sal Scarpitta

Lab No. : 0303024-003

Client ID. : 16234-003

Sample Information...
Type : Aqueous

Origin:

Collected 3/3/2003 11:00:00 AM
Received 3/3/2003 3:40:00 PM
Collected By CLIENT
Copies To Bob Lee

Parameter(s)	Results	Units	Method Number	Analyzed
Biochemical Oxygen Demand	84	mg/L	E405.1	3/5/2003 4:04:00 PM
Suspended Solids (Residue, Non-Filterable)	172	mg/L	E160.2	3/5/2003 8:30:00 AM

STP Influent
Sampled 3-3-03
24 Hr. Composite

Qualifiers: E - Value above quantitation range
D - Results for Dilution

Date Reported : 3/25/2003

Joann M. Slavin
Laboratory Manager

BNLS728 S74

PZM LABS, INC.
575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLS
70 Bell Ave.
Upton, NY 11973
Attn To : Sal Scarpitta

Lab No. : 0303100-003

Client ID. : 16244-003

Sample Information...
Type : Aqueous

Origin:

Collected 3/5/2003 10:30:00 AM
Received 3/5/2003 3:30:00 PM
Collected By CLIENT
Copies To Bob Lee

Parameter(s)	Results	Units	Method Number	Analyzed
Biochemical Oxygen Demand	53	mg/L	E405.1	3/6/2003 5:12:00 PM
Suspended Solids (Residue, Non-Filterable)	77	mg/L	E160.2	3/7/2003 10:33:00 AM

STP Influent
Sampled 3-5-03
24 Hr. Composite

Qualifiers: E - Value above quantitation range
D - Results for Dilution

Date Reported : 3/25/2003

Joann M. Slavin
Laboratory Manager

BNLS728 S93

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLS
70 Bell Ave.
Upton, NY 11973
Attn To : Sal Scarpitta

Lab No. : 0303171-003

Client ID. : 16252-003

Sample Information...
Type : Aqueous

Origin:

Collected 3/7/2003 11:20:00 AM
Received 3/7/2003 3:55:00 PM
Collected By CLIENT
Copies To Bob Lee

Parameter(s)	Results	Units	Method Number	Analyzed
Biochemical Oxygen Demand	27	mg/L	E405.1	3/8/2003 5:14:00 PM
Suspended Solids (Residue, Non-Filterable)	48	mg/L	E160.2	3/12/2003 12:25:00 PM

STP Influent
Sampled 3-7-03
24 Hr. Composite

Qualifiers: E - Value above quantitation range
D - Results for Dilution

Date Reported : 3/25/2003

Joann M. Slavin
Laboratory Manager

BNLS728 S111

ATTACHMENT IV

BROOKHAVEN NATIONAL LABORATORY

SPDES PERMIT NO. NY0005835

DISCHARGE MONITORING REPORT FOR MARCH 2003

ANALYTICAL RESULTS FROM H2M LABS INC.

FOR REGULATORY COMPLIANCE SAMPLES COLLECTED

FROM OUTFALLS 002, 002B, 005, 006A, 006B, 008, AND 010

1C

SEMIVOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

15843-001

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: _____ SDG No.: BNLS716

Matrix: (soil/water) WATER Lab Sample ID: 0301207-001B

Sample wt/vol: 1000 (g/mL) ML Lab File ID: A\C22537.D

Level: (low/med) LOW Date Received: 01/09/03

% Moisture: Decanted: (Y/N) N Date Extracted: 01/09/03

Concentrated Extract Volume: 1000 (µL) Date Analyzed: 01/15/03

Injection Volume: (µL) Dilution Factor: 1.00

GPC Cleanup: (Y/N) N pH: ____ Extraction: (Type) SEPF

CAS NO.	COMPOUND	CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L	Q
62-75-9	N-Nitrosodimethylamine	10	U
108-95-2	Phenol	10	U
111-44-4	Bis(2-chloroethyl)ether	10	U
95-57-8	2-Chlorophenol	10	U
541-73-1	1,3-Dichlorobenzene	10	U
106-46-7	1,4-Dichlorobenzene	10	U
95-50-1	1,2-Dichlorobenzene	10	U
108-60-1	2,2'-oxybis(1-Chloropropane)	10	U
621-64-7	N-Nitroso-di-n-propylamine	10	U
67-72-1	Hexachloroethane	10	U
98-95-3	Nitrobenzene	10	U
78-59-1	Isophorone	10	U
88-75-5	2-Nitrophenol	25	U
105-67-9	2,4-Dimethylphenol	10	U
111-91-1	Bis(2-chloroethoxy)methane	10	U
120-83-2	2,4-Dichlorophenol	10	U
120-82-1	1,2,4-Trichlorobenzene	10	U
91-20-3	Naphthalene	10	U
87-68-3	Hexachlorobutadiene	10	U
59-50-7	4-Chloro-3-methylphenol	10	U
77-47-4	Hexachlorocyclopentadiene	10	U
88-06-2	2,4,6-Trichlorophenol	10	U
91-58-7	2-Chloronaphthalene	10	U
131-11-3	Dimethylphthalate	10	U
208-96-8	Acenaphthylene	10	U
606-20-2	2,6-Dinitrotoluene	10	U
83-32-9	Acenaphthene	10	U
51-28-5	2,4-Dinitrophenol	25	U
100-02-7	4-Nitrophenol	25	U
121-14-2	2,4-Dinitrotoluene	10	U
84-66-2	Diethylphthalate	10	U
86-73-7	Fluorene	10	U
7005-72-3	4-Chlorophenyl-phenylether	10	U
534-52-1	4,6-Dinitro-2-methylphenol	25	U
86-30-6	N-Nitrosodiphenylamine	10	U
101-55-3	4-Bromophenyl-phenylether	10	U

Outfall 001A
Sampled 1-7-03
Grab Sample

BNLS716 S 24

1D

SEMIVOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

15843-001

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: _____ SDG No.: BNLS716

Matrix: (soil/water) WATER Lab Sample ID: 0301207-001B

Sample wt/vol: 1000 (g/mL) ML Lab File ID: A\C22537.D

Level: (low/med) LOW Date Received: 01/09/03

% Moisture: Decanted: (Y/N) N Date Extracted: 01/09/03

Concentrated Extract Volume: 1000 (µL) Date Analyzed: 01/15/03

Injection Volume: (µL) Dilution Factor: 1.00

GPC Cleanup: (Y/N) N pH: ____ Extraction: (Type) SEPF

CAS NO.	COMPOUND	CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L	Q
118-74-1	Hexachlorobenzene	10	U
87-86-5	Pentachlorophenol	25	U
85-01-8	Phenanthrene	10	U
120-12-7	Anthracene	10	U
84-74-2	Di-n-butyl phthalate	10	U
206-44-0	Fluoranthene	10	U
129-00-0	Pyrene	10	U
85-68-7	Butyl benzyl phthalate	10	U
56-55-3	Benzo(a)anthracene	10	U
91-94-1	3,3'-Dichlorobenzidine	20	U
218-01-9	Chrysene	10	U
117-81-7	Bis(2-ethylhexyl)phthalate	2	J
117-84-0	Di-n-octyl phthalate	10	U
205-99-2	Benzo(b)fluoranthene	10	U
207-08-9	Benzo(k)fluoranthene	10	U
50-32-8	Benzo(a)pyrene	10	U
193-39-5	Indeno(1,2,3-cd)pyrene	10	U
53-70-3	Dibenzo(a,h)anthracene	10	U
191-24-2	Benzo(g,h,i)perylene	10	U

BNLS716 S 25

U.S. EPA - CLP

1

INORGANIC ANALYSIS DATA SHEET

EPA SAMPLE NO

15886-001

Lab Name: H2M LABS, INC. Contract:

Lab Code: 10478 Case No. SAS No.: SDG No.: BNLS720

Matrix (soil/water): WATER Lab Sample ID: 0301396-001

Level (low/med): LOW Date Received: 1/17/2003

% Solids: 0.0

Concentration Units (ug/L or mg/kg dry weight): UG/L

CAS No.	Analyte	Concentration	C	Q	M
7429-90-5	Aluminum	61.0	B		P
7440-36-0	Antimony	3.1	U		P
7440-38-2	Arsenic	4.5	U		P
7440-39-3	Barium	1.4	B		P
7440-41-7	Beryllium	0.40	U		P
7440-43-9	Cadmium	0.50	U		P
7440-70-2	Calcium	86.3	B		P
7440-47-3	Chromium	4.8	B		P
7440-48-4	Cobalt	1.0	U		P
7440-50-8	Copper	12.7	B		P
7439-89-6	Iron	142			P
7439-92-1	Lead	4.0			P
7439-95-4	Magnesium	27.0	B		P
7439-96-5	Manganese	2.9	B		P
7439-97-6	Mercury	0.10	U		CV
7440-02-0	Nickel	3.2	B		P
7440-09-7	Potassium	56	U		P
7782-49-2	Selenium	2.4	U		P
7440-22-4	Silver	1.0	U		P
7440-23-5	Sodium	2200	B		P
7440-28-0	Thallium	4.2	U		P
7440-62-2	Vanadium	0.60	U		P
7440-66-6	Zinc	9.9	B		P

Outfall 001B
Sampled 1-17-03
Grab Sample

Color Before: COLORLESS Clarity Before: CLEAR Texture: _____

Color After: COLORLESS Clarity After: CLEAR Artifacts: _____

Comments:

DATE REPORTED 1/22/03

BNLS720 S30

1A

VOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

15886-001

Lab Name: H2M LABS. INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: ____ SDG No.: BNLS720

Matrix: (soil/water) WATER Lab Sample ID: 0301396-001A

Sample wt/vol: 5 (g/mL) ML Lab File ID: V\F11842.D

Level: (low/med) LOW Date Received: 01/17/03

% Moisture: not dec. Date Analyzed: 01/25/03

GC Column: HP-VOCOL ID: .2 (mm) Dilution Factor: 1.00

Soil Extract Volume: _____ (µL) Soil Aliquot Volume _____ (µL)

CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L

CAS NO.	COMPOUND	UG/L	Q
74-87-3	Chloromethane	1	U
75-01-4	Vinyl chloride	1	U
74-83-9	Bromomethane	1	U
75-00-3	Chloroethane	1	U
75-69-4	Trichlorofluoromethane	1	U
67-64-1	Acetone	2	J
75-35-4	1,1-Dichloroethene	1	U
75-09-2	Methylene chloride	1	U
75-15-0	Carbon disulfide	1	U
156-60-5	trans-1,2-Dichloroethene	1	U
156-59-2	cis-1,2-Dichloroethene	1	U
108-05-4	Vinyl acetate	1	U
75-34-3	1,1-Dichloroethane	1	U
78-93-3	2-Butanone	5	U
67-66-3	Chloroform	1	U
107-06-2	1,2-Dichloroethane	1	U
71-55-6	1,1,1-Trichloroethane	1	U
56-23-5	Carbon tetrachloride	1	U
71-43-2	Benzene	1	U
79-01-6	Trichloroethene	1	U
78-87-5	1,2-Dichloropropane	1	U
75-27-4	Bromodichloromethane	1	U
110-75-8	2-Chloroethylvinyl ether	1	U
10061-01-5	cis-1,3-Dichloropropene	1	U
10061-02-6	trans-1,3-Dichloropropene	1	U
79-00-5	1,1,2-Trichloroethane	1	U
100-41-4	Ethylbenzene	1	U
124-48-1	Dibromochloromethane	1	U
75-25-2	Bromoform	1	U
108-10-1	4-Methyl-2-pentanone	5	U
591-78-6	2-Hexanone	5	U
108-88-3	Toluene	1	U

Outfall ~~CC~~ AB 1 UA 4-14-03
Sampled 1-17-03
Grab Sample

FORM I VOA - 1 OLM04.2

BNLS720 S24

1B

VOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

15886-001

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: ____ SDG No.: BNLS720

Matrix: (soil/water) WATER Lab Sample ID: 0301396-001A

Sample wt/vol: 5 (g/mL) ML Lab File ID: V\F11842.D

Level: (low/med) LOW Date Received: 01/17/03

% Moisture: not dec. Date Analyzed: 01/25/03

GC Column: HP-VOCOL ID: .2 (mm) Dilution Factor: 1.00

Soil Extract Volume: _____ (µL) Soil Aliquot Volume _____ (µL)

CAS NO.	COMPOUND	CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L	Q
127-18-4	Tetrachloroethene	1	U
108-90-7	Chlorobenzene	1	U
1330-20-7	Xylene (total)	1	U
79-34-5	1,1,2,2-Tetrachloroethane	1	U
541-73-1	1,3-Dichlorobenzene	1	U
106-46-7	1,4-Dichlorobenzene	1	U
95-50-1	1,2-Dichlorobenzene	1	U

Outfall 001B
Sampled 1-17-03
Grab Sample

BNLS720 S25

1C

SEMIVOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

15886-001

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: _____ SDG No.: BNLS720

Matrix: (soil/water) WATER Lab Sample ID: 0301396-001B

Sample wt/vol: 1000 (g/mL) ML Lab File ID: A\C22566.D

Level: (low/med) LOW Date Received: 01/17/03

% Moisture: Decanted: (Y/N) N Date Extracted: 01/23/03

Concentrated Extract Volume: 1000 (µL) Date Analyzed: 01/24/03

Injection Volume: (µL) Dilution Factor: 1.00

GPC Cleanup: (Y/N) N pH: ____ Extraction: (Type)

CAS NO.	COMPOUND	CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L	Q
62-75-9	N-Nitrosodimethylamine	10	U
108-95-2	Phenol	10	U
111-44-4	Bis(2-chloroethyl)ether	10	U
95-57-8	2-Chlorophenol	10	U
541-73-1	1,3-Dichlorobenzene	10	U
106-46-7	1,4-Dichlorobenzene	10	U
95-50-1	1,2-Dichlorobenzene	10	U
108-60-1	2,2'-oxybis(1-Chloropropane)	10	U
621-64-7	N-Nitroso-di-n-propylamine	10	U
67-72-1	Hexachloroethane	10	U
98-95-3	Nitrobenzene	10	U
78-59-1	Isophorone	10	U
88-75-5	2-Nitrophenol	25	U
105-67-9	2,4-Dimethylphenol	10	U
111-91-1	Bis(2-chloroethoxy)methane	10	U
120-83-2	2,4-Dichlorophenol	10	U
120-82-1	1,2,4-Trichlorobenzene	10	U
91-20-3	Naphthalene	10	U
87-68-3	Hexachlorobutadiene	10	U
59-50-7	4-Chloro-3-methylphenol	10	U
77-47-4	Hexachlorocyclopentadiene	10	U
88-06-2	2,4,6-Trichlorophenol	10	U
91-58-7	2-Chloronaphthalene	10	U
131-11-3	Dimethylphthalate	10	U
208-96-8	Acenaphthylene	10	U
606-20-2	2,6-Dinitrotoluene	10	U
83-32-9	Acenaphthene	10	U
51-28-5	2,4-Dinitrophenol	25	U
100-02-7	4-Nitrophenol	25	U
121-14-2	2,4-Dinitrotoluene	10	U
84-66-2	Diethylphthalate	10	U
86-73-7	Fluorene	10	U
7005-72-3	4-Chlorophenyl-phenylether	10	U
534-52-1	4,6-Dinitro-2-methylphenol	25	U
86-30-6	N-Nitrosodiphenylamine	10	U
101-55-3	4-Bromophenyl-phenylether	10	U

Outfall 001B
Sampled 1-17-03
Grab Sample

BNLS720 S27

1D

SEMIVOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

15886-001

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: _____ SDG No.: BNLS720

Matrix: (soil/water) WATER Lab Sample ID: 0301396-001B

Sample wt/vol: 1000 (g/mL) ML Lab File ID: A\C22566.D

Level: (low/med) LOW Date Received: 01/17/03

% Moisture: Decanted: (Y/N) N Date Extracted: 01/23/03

Concentrated Extract Volume: 1000 (µL) Date Analyzed: 01/24/03

Injection Volume: (µL) Dilution Factor: 1.00

GPC Cleanup: (Y/N) N pH: ____ Extraction: (Type)

CAS NO.	COMPOUND	CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L	Q
118-74-1	Hexachlorobenzene	10	U
87-86-5	Pentachlorophenol	25	U
85-01-8	Phenanthrene	10	U
120-12-7	Anthracene	10	U
84-74-2	Di-n-butyl phthalate	10	U
206-44-0	Fluoranthene	10	U
129-00-0	Pyrene	10	U
85-68-7	Butyl benzyl phthalate	10	U
56-55-3	Benzo(a)anthracene	10	U
91-94-1	3,3'-Dichlorobenzidine	20	U
218-01-9	Chrysene	10	U
117-81-7	Bis(2-ethylhexyl)phthalate	10	U
117-84-0	Di-n-octyl phthalate	10	U
205-99-2	Benzo(b)fluoranthene	10	U
207-08-9	Benzo(k)fluoranthene	10	U
50-32-8	Benzo(a)pyrene	10	U
193-39-5	Indeno(1,2,3-cd)pyrene	10	U
53-70-3	Dibenzo(a,h)anthracene	10	U
191-24-2	Benzo(g,h,i)perylene	10	U

Outfall 001B
Sampled 1-17-03
Grab Sample

BNLS720 S28

H2M LABS, INC.
575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLS
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0301089-007

Client ID. : 15840-007

Sample Information...
Type : Aqueous

Origin:

Collected 1/6/2003 2:00:00 PM
Received 1/6/2003 3:30:00 PM
Collected By CLIENT
Copies To Bob Lee

Parameter(s)	Results	Units	Method Number	Analyzed
Nitrogen, Total	10.7	mg/L	M4500-N C	1/16/2003
Nitrogen, Nitrate-Nitrite	0.17	mg/L	E353.2	1/13/2003 1:40:24 PM
Nitrogen, Ammonia (As N)	10.6	mg/L	E350.1	1/14/2003 4:21:06 PM
Phenolics, Total Recoverable	< 5.0	µg/L	E420.1	1/14/2003 8:40:00 AM
Nitrogen, Kjeldahl, Total	10.5	mg/L	E351.2	1/16/2003 4:07:36 PM

Outfall 001D
Sampled 1-6-03
Grab Sample
Rm. 1-93B

Qualifiers: E - Value above quantitation range
O - Results for Dilution

Joann M. Slavin
Laboratory Manager

Date Reported : 1/21/2003

BNLS715 S 38

U.S. EPA - CLP

1

INORGANIC ANALYSIS DATA SHEET

EPA SAMPLE NO

15840-007

Lab Name: H2M LABS, INC. Contract:

Lab Code: 10478 Case No. SAS No.: SDG No.: BNLS715

Matrix (soil/water): WATER Lab Sample ID: 0301089-007

Level (low/med): LOW Date Received: 1/6/2003

% Solids: 0.0

Concentration Units (ug/L or mg/kg dry weight): UG/L

CAS No.	Analyte	Concentration	C	Q	M
57-12-5	Cyanide	10	U		CA
7440-22-4	Silver	75.9			P

Color Before: COLORLESS Clarity Before: CLEAR Texture: _____

Color After: COLORLESS Clarity After: CLEAR Artifacts: _____

Outfall 001D
Sampled 1-6-03
Grab Sample
Rm. 1-93B

Comments:

DATE REPORTED 1/21/03

BNLS715 S 37

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLS
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0303105-003

Client ID. : 16240-003

Sample Information...
Type : Aqueous

Origin:

Collected 3/4/2003 10:47:00 AM
Received 3/5/2003 3:30:00 PM
Collected By CLIENT
Copies To Bob Lee

Parameter(s)	Results	Units	Method Number	Analyzed
Hexane Extr. Material (O&G)	< 5.0	mg/L	E1664A	3/6/2003 8:45:00 AM

Outfall 002
Sampled 3-4-03
Grab Sample

Qualifiers: E - Value above quantitation range
D - Results for Dilution

Joann M. Slavin
Laboratory Manager

Date Reported : 3/10/2003

BNLS730 S15

U.S. EPA - CLP

1

INORGANIC ANALYSIS DATA SHEET

EPA SAMPLE NO

15840-003

Lab Name: H2M LABS, INC. Contract:

Lab Code: 10478 Case No. SAS No.: SDG No.: BNLS715

Matrix (soil/water): WATER Lab Sample ID: 0301089-003

Level (low/med): LOW Date Received: 1/6/2003

% Solids: 0.0

Concentration Units (ug/L or mg/kg dry weight): UG/L

CAS No.	Analyte	Concentration	C	Q	M
7429-90-5	Aluminum	463			P
7440-36-0	Antimony	3.4	U		P
7440-38-2	Arsenic	1.8	U		P
7440-39-3	Barium	30.7	B		P
7440-41-7	Beryllium	0.10	U		P
7440-43-9	Cadmium	0.16	B		P
7440-70-2	Calcium	11800			P
7440-47-3	Chromium	1.1	B		P
7440-48-4	Cobalt	0.60	U		P
7440-50-8	Copper	25.8			P
7439-89-6	Iron	772		E	P
7439-92-1	Lead	3.6			P
7439-95-4	Magnesium	3950	B		P
7439-96-5	Manganese	28.6			P
7439-97-6	Mercury	0.10	U		CV
7440-02-0	Nickel	1.4	B		P
7440-09-7	Potassium	1770	B		P
7782-49-2	Selenium	2.6	U		P
7440-22-4	Silver	0.80	U		P
7440-23-5	Sodium	75100			P
7440-28-0	Thallium	2.5	U		P
7440-62-2	Vanadium	1.3	B		P
7440-66-6	Zinc	107			P

Outfall 002
Sampled 1-6-03
Grab Sample
Total (Unfiltered)

Color Before: COLORLESS Clarity Before: CLEAR Texture: _____

Color After: COLORLESS Clarity After: CLEAR Artifacts: _____

Comments:

DATE REPORTED 1/21/03

BNLS715 S 29

1B

VOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

15840-003

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: ____ SDG No.: BNLS715

Matrix: (soil/water) WATER Lab Sample ID: 0301089-003B

Sample wt/vol: 5 (g/mL) ML Lab File ID: V\F11753.D

Level: (low/med) LOW Date Received: 01/06/03

% Moisture: not dec. Date Analyzed: 01/11/03

GC Column: HP-VOCOL ID: .2 (mm) Dilution Factor: 1.00

Soil Extract Volume: _____ (µL) Soil Aliquot Volume _____ (µL)

CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L

CAS NO.	COMPOUND	UG/L	Q
74-87-3	Chloromethane	1	U
75-01-4	Vinyl chloride	1	U
74-83-9	Bromomethane	1	U
75-00-3	Chloroethane	1	U
75-69-4	Trichlorofluoromethane	1	U
67-64-1	Acetone	2	J
75-35-4	1,1-Dichloroethene	1	U
75-09-2	Methylene chloride	1	U
75-15-0	Carbon disulfide	1	U
156-60-5	trans-1,2-Dichloroethene	1	U
156-59-2	cis-1,2-Dichloroethene	1	U
108-05-4	Vinyl acetate	1	U
75-34-3	1,1-Dichloroethane	1	U
78-93-3	2-Butanone	5	U
67-66-3	Chloroform	1	U
107-06-2	1,2-Dichloroethane	1	U
71-55-6	1,1,1-Trichloroethane	1	U
56-23-5	Carbon tetrachloride	1	U
71-43-2	Benzene	1	U
79-01-6	Trichloroethene	1	U
78-87-5	1,2-Dichloropropane	1	U
75-27-4	Bromodichloromethane	1	U
110-75-8	2-Chloroethylvinyl ether	1	U
10061-01-5	cis-1,3-Dichloropropene	1	U
10061-02-6	trans-1,3-Dichloropropene	1	U
79-00-5	1,1,2-Trichloroethane	1	U
100-41-4	Ethylbenzene	1	U
124-48-1	Dibromochloromethane	1.5	
75-25-2	Bromoform	1.4	
108-10-1	4-Methyl-2-pentanone	5	U
591-78-6	2-Hexanone	5	U
108-88-3	Toluene	1	U

Outfall 002
Sampled 1-6-03
Grab Sample

BNLS715 S 26

1B

VOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

15840-003

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: ____ SDG No.: BNLS715

Matrix: (soil/water) WATER Lab Sample ID: 0301089-003B

Sample wt/vol: 5 (g/mL) ML Lab File ID: V\F11753.D

Level: (low/med) LOW Date Received: 01/06/03

% Moisture: not dec. Date Analyzed: 01/11/03

GC Column: HP-VOCOL ID: .2 (mm) Dilution Factor: 1.00

Soil Extract Volume: _____ (µL) Soil Aliquot Volume _____ (µL)

CONCENTRATION UNITS:

CAS NO.	COMPOUND (µg/L or µg/Kg)	UG/L	Q
127-18-4	Tetrachloroethene	1	U
108-90-7	Chlorobenzene	1	U
1330-20-7	Xylene (total)	1	U
79-34-5	1,1,2,2-Tetrachloroethane	1	U
541-73-1	1,3-Dichlorobenzene	1	U
106-46-7	1,4-Dichlorobenzene	1	U
95-50-1	1,2-Dichlorobenzene	1	U

outfall 002
Sampled 1-6-03
Grab Sample

BNLS715 S 27

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLS
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0303105-006

Client ID. : 16240-006

Sample Information...
Type : Aqueous

Origin:

Collected 3/4/2003 10:43:00 AM
Received 3/5/2003 3:30:00 PM
Collected By CLIENT
Copies To Bob Lee

Parameter(s)	Results	Units	Method Number	Analyzed
Hexane Extr. Material (O&G)	< 5.0	mg/L	E1664A	3/6/2003 8:40:00 AM

Outfall 002B
Sampled 3-4-03
Grab Sample

Qualifiers: E - Value above quantitation range
D - Results for Dilution

Joann M. Slavin
Laboratory Manager

Date Reported : 3/10/2003

BNLS730 S18

HZM LABS, INC.
575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLS
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0303105-004

Client ID. : 16240-004

Sample Information...
Type : Aqueous

Origin:

Collected 3/4/2003 11:12:00 AM
Received 3/5/2003 3:30:00 PM
Collected By CLIENT
Copies To Bob Lee

Parameter(s)	Results	Units	Method Number	Analyzed
Hexane Extr. Material (O&G)	< 5.0	mg/L	E1664A	3/6/2003 9:00:00 AM

Outfall 005
Sampled 3-4-03
Grab Sample

Qualifiers: E - Value above quantitation range
D - Results for Dilution

Date Reported : 3/10/2003

Joann M. Slavin
Laboratory Manager

BNLS730 S16

U.S. EPA - CLP

1

INORGANIC ANALYSIS DATA SHEET

EPA SAMPLE NO

15840-005

Lab Name: H2M LABS, INC. Contract:

Lab Code: 10478 Case No. SAS No.: SDG No.: BNLS715

Matrix (soil/water): WATER Lab Sample ID: 0301089-005

Level (low/med): LOW Date Received: 1/6/2003

% Solids: 0.0

Concentration Units (ug/L or mg/kg dry weight): UG/L

CAS No.	Analyte	Concentration	C	Q	M
7440-50-8	Copper	3.0	B		P

Color Before: COLORLESS Clarity Before: CLEAR Texture: _____

Color After: COLORLESS Clarity After: CLEAR Artifacts: _____

Outfall 005
Sampled 1-6-03
Grab Sample

Comments:
DATE REPORTED 1/21/03

BNLS715 S 32

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLS
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0303105-001

Client ID. : 16240-001

Sample Information...
Type : Aqueous

Origin:

Collected 3/4/2003 11:02:00 AM
Received 3/5/2003 3:30:00 PM
Collected By CLIENT
Copies To Bob Lee

Parameter(s)	Results	Units	Method Number	Analyzed
Hexane Extr. Material (O&G)	< 5.0	mg/L	E1664A	3/6/2003 8:55:00 AM

Outfall 006A
Sampled 3-4-03
Grab Sample

Qualifiers: E - Value above quantitation range
D - Results for Dilution

Joann M. Slavin
Laboratory Manager

Date Reported : 3/10/2003

BNLS730 S13

FZM LABS, INC.
575 Broad Hollow Road, Melville NY 11747
(631)694-3040. FAX (631)420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLS
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0303105-002

Client ID. : 16240-002

Sample Information...
Type : Aqueous

Origin:

Collected 3/4/2003 10:57:00 AM
Received 3/5/2003 3:30:00 PM
Collected By CLIENT
Copies To Bob Lee

Parameter(s)	Results	Units	Method Number	Analyzed
Hexane Extr. Material (O&G)	< 5.0	mg/L	E1664A	3/6/2003 8:50:00 AM

Outfall 002B
Sampled 3-4-03
Grab Sample

Qualifiers: E - Value above quantitation range
D - Results for Dilution

Date Reported : 3/10/2003

Joann M. Slavin
Laboratory Manager

BNLS730 S14

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040 . FAX (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLS
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0303109-001

Sample Information...
Type : Aqueous

Origin:

Client ID. : 16245-001

Collected 3/5/2003 9:25:00 AM
Received 3/5/2003 3:30:00 PM
Collected By CLIENT
Copies To Bob Lee

Parameter(s)	Results	Units	Method Number	Analyzed
Hexane Extr. Material (O&G)	< 5.0	mg/L	E1664A	3/6/2003 9:10:00 AM

Outfall 008
Sampled 3.5.03
Grab Sample

Qualifiers: E - Value above quantitation range
D - Results for Dilution

Date Reported : 3/18/2003

Joann M. Slavin
Laboratory Manager

BNLS731 S22

1A

VOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16245-001

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: ____ SDG No.: BNLS731

Matrix: (soil/water) WATER Lab Sample ID: 0303109-001A

Sample wt/vol: 5 (g/mL) ML Lab File ID: 03\W1385.D

Level: (low/med) LOW Date Received: 03/05/03

% Moisture: not dec. Date Analyzed: 03/10/03

GC Column: R-502.2 ID: .53 (mm) Dilution Factor: 1.00

Soil Extract Volume: _____ (µL) Soil Aliquot Volume _____ (µL)

CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L

CAS NO.	COMPOUND	UG/L	Q
74-87-3	Chloromethane	1	U
75-01-4	Vinyl chloride	1	U
74-83-9	Bromomethane	1	U
75-00-3	Chloroethane	1	U
75-69-4	Trichlorofluoromethane	1	U
67-64-1	Acetone	6.6	B
75-35-4	1,1-Dichloroethene	1	U
75-09-2	Methylene chloride	4.4	
75-15-0	Carbon disulfide	1	U
156-60-5	trans-1,2-Dichloroethene	1	U
156-59-2	cis-1,2-Dichloroethene	1	U
108-05-4	Vinyl acetate	1	U
75-34-3	1,1-Dichloroethane	1	U
78-93-3	2-Butanone	5	U
67-66-3	Chloroform	1	U
107-06-2	1,2-Dichloroethane	1	U
71-55-6	1,1,1-Trichloroethane	1	U
56-23-5	Carbon tetrachloride	1	U
71-43-2	Benzene	1	U

Outfall 003
Sampled 3-5-03
Grab Sample

BNLS731 S19

1B

VOLATILE ORGANICS ANALYSIS DATA SHEET

EPA SAMPLE NO.

16245-001

Lab Name: H2M LABS, INC. Contract: ____

Lab Code: 10478 Case No.: BNLS SAS No.: ____ SDG No.: BNLS731

Matrix: (soil/water) WATER Lab Sample ID: 0303109-001A

Sample wt/vol: 5 (g/mL) ML Lab File ID: 03\W1385.D

Level: (low/med) LOW Date Received: 03/05/03

% Moisture: not dec. Date Analyzed: 03/10/03

GC Column: R-502.2 ID: .53 (mm) Dilution Factor: 1.00

Soil Extract Volume: _____ (µL) Soil Aliquot Volume _____ (µL)

CAS NO.	COMPOUND	CONCENTRATION UNITS: (µg/L or µg/Kg) UG/L	Q
79-01-6	Trichloroethene	1	U
78-87-5	1,2-Dichloropropane	1	U
75-27-4	Bromodichloromethane	1	U
110-75-8	2-Chloroethylvinyl ether	1	U
10061-01-5	cis-1,3-Dichloropropene	1	U
10061-02-6	trans-1,3-Dichloropropene	1	U
79-00-5	1,1,2-Trichloroethane	1	U
100-41-4	Ethylbenzene	1	U
124-48-1	Dibromochloromethane	1	U
75-25-2	Bromoform	1	U
108-10-1	4-Methyl-2-pentanone	5	U
591-78-6	2-Hexanone	5	U
108-88-3	Toluene	1	U
127-18-4	Tetrachloroethene	1	U
108-90-7	Chlorobenzene	1	U
1330-20-7	Xylene (total)	1	U
79-34-5	1,1,2,2-Tetrachloroethane	1	U
541-73-1	1,3-Dichlorobenzene	1	U
106-46-7	1,4-Dichlorobenzene	1	U
95-50-1	1,2-Dichlorobenzene	1	U

Outfall 008
Sampled 3-5-03
Grab Sample

BNLS731 S20

U.S. EPA - CLP

1

INORGANIC ANALYSIS DATA SHEET

EPA SAMPLE NO

16223-001

Lab Name: H2M LABS, INC. Contract:

Lab Code: 10478 Case No. SAS No.: SDG No.: BNLS727

Matrix (soil/water): WATER Lab Sample ID: 0302543-001

Level (low/med): LOW Date Received: 2/24/2003

% Solids: 0.0

Concentration Units (ug/L or mg/kg dry weight): UG/L

CAS No.	Analyte	Concentration	C	Q	M
7429-90-5	Aluminum	1160			P
7440-36-0	Antimony	3.4	U		P
7440-38-2	Arsenic	1.8	U		P
7440-39-3	Barium	9.6	B		P
7440-41-7	Beryllium	0.31	B		P
7440-43-9	Cadmium	0.34	B		P
7440-70-2	Calcium	4590	B		P
7440-47-3	Chromium	4.4	B		P
7440-48-4	Cobalt	1.1	B		P
7440-50-8	Copper	7.5	B		P
7439-89-6	Iron	1620			P
7439-92-1	Lead	16.4			P
7439-95-4	Magnesium	1670	B		P
7439-96-5	Manganese	32.4			P
7439-97-6	Mercury	0.10	U		CV
7440-02-0	Nickel	3.4	B		P
7440-09-7	Potassium	532	B		P
7782-49-2	Selenium	2.6	U		P
7440-22-4	Silver	0.80	U		P
7440-23-5	Sodium	42800			P
7440-28-0	Thallium	2.5	U		P
7440-62-2	Vanadium	6.5	B		P
7440-66-6	Zinc	49.7			P

Outfall 008
Sampled 2-22-03
Grab Sampled
Total (Unfiltered)

Color Before: BROWN Clarity Before: CLEAR Texture: _____

Color After: COLORLESS Clarity After: CLEAR Artifacts: _____

Comments:
DATE REPORTED 3/4/03

BNLS727 S27

H2M LABS, INC.

575 Broad Hollow Road, Melville NY 11747
(631) 694-3040. FAX: (631) 420-8436 NYSDOH ID # 10478

LABORATORY RESULTS

Brookhaven National Lab.-BNLS
70 Bell Ave.
Upton, NY 11973
Attn To : S. Scarpitta

Lab No. : 0303109-002

Client ID. : 16245-002

Sample Information...
Type : Aqueous

Origin:

Collected 3/5/2003 9:12:00 AM
Received 3/5/2003 3:30:00 PM
Collected By CLIENT
Copies To Bob Lee

Parameter(s)	Results	Units	Method Number	Analyzed
Hexane Extr. Material (O&G)	< 5.0	mg/L	E1664A	3/6/2003 9:05:00 AM

Outfall 010
Sampled 3-5-03
Grab Sample

Qualifiers: E - Value above quantitation range
D - Results for Dilution

Date Reported : 3/18/2003

Joann M. Slavin
Laboratory Manager

BNLS731 S23

U.S. EPA - CLP

1

INORGANIC ANALYSIS DATA SHEET

EPA SAMPLE NO

16223-002

Lab Name: H2M LABS, INC. Contract:

Lab Code: 10478 Case No. SAS No.: SDG No.: BNLS727

Matrix (soil/water): WATER Lab Sample ID: 0302543-002

Level (low/med): LOW Date Received: 2/24/2003

% Solids: 0.0

Concentration Units (ug/L or mg/kg dry weight): UG/L

CAS No.	Analyte	Concentration	C	Q	M
7429-90-5	Aluminum	1250			P
7440-36-0	Antimony	3.4	U		P
7440-38-2	Arsenic	1.9	B		P
7440-39-3	Barium	20.4	B		P
7440-41-7	Beryllium	0.11	B		P
7440-43-9	Cadmium	0.38	B		P
7440-70-2	Calcium	25300			P
7440-47-3	Chromium	3.7	B		P
7440-48-4	Cobalt	2.9	B		P
7440-50-8	Copper	22.0	B		P
7439-89-6	Iron	1960			P
7439-92-1	Lead	16.6			P
7439-95-4	Magnesium	1780	B		P
7439-96-5	Manganese	47.8			P
7439-97-6	Mercury	0.10	U		CV
7440-02-0	Nickel	33.2	B		P
7440-09-7	Potassium	3800	B		P
7782-49-2	Selenium	2.6	U		P
7440-22-4	Silver	0.80	U		P
7440-23-5	Sodium	194000			P
7440-28-0	Thallium	2.5	U		P
7440-62-2	Vanadium	17.7	B		P
7440-66-6	Zinc	117			P

Outfall 010
Sampled 2-22-03
Grab Sample
Total (Unfiltered)

Color Before: BROWN Clarity Before: CLEAR Texture: _____

Color After: COLORLESS Clarity After: CLEAR Artifacts: _____

Comments:

DATE REPORTED 3/4/03

BNLS727 S29

ATTACHMENT V

BROOKHAVEN NATIONAL LABORATORY

SPDES PERMIT NO. NY0005835

DISCHARGE MONITORING REPORT FOR MARCH 2002

ANALYTICAL RESULTS FROM CHEMTEX INC.

FOR REGULATORY COMPLIANCE SAMPLES COLLECTED

FROM OUTFALLS 001F, 002, 002B, 005, 006A, AND 006B

CHEMTEX

Environmental & Industrial Hygiene Services

3082 25th Street, Port Arthur, TX 77642
(409) 983-4575 Fax (409) 982-1522

Client: **Brookhaven National Laboratory**
Safety & Environmental
Protection Division
Bldg. 535A
Upton, NY 11973-5000
Attn: **Mr. B. Lee**

Report Date: 01/22/03

Outfall 001F
Sampled 1-6-03
Grab Sample

RESULTS OF ANALYSIS

PROJECT: ES SPDES

ATTACHMENT 1

COC_num	Site-ID	Samp_type	Samp-ID	Samp_date	Samp_time	Rec_date	SDG	Lab_file-ID	Samp_depth	Flow_rate	Notes
15841	005-902 CT	W	Surface Water	01/06/03	1125	01/08/03		P3010207	0		

Cas_num	Name	Concen	Error	Det_limit	Units	Anal_date	Method	Lab_batch-ID	Ext_date	Dilution	Lab_qual	Lab_QCnotes	Rev_qual	Rev_conc	Rev_QCnotes
	Polypropylene Glycol Monobutyl Ether(PPGMBE)	< 0.50		0.50	mg/l	01/16/03	SOP # O 081-045	P3010211	01/16/03	1000ml ▼ 1 ml					

Required fields are shaded
Required field under some circumstances (see Att. 2)

CHEMTEX

Environmental & Industrial Hygiene Services

3082 25th Street, Port Arthur, TX 77642
(409) 983-4575 Fax (409) 982-1522

Client: **Brookhaven National Laboratory**
Safety & Environmental
Protection Division
Bldg. 535A
Upton, NY 11973-5000
Attn: **Mr. B. Lee**

Report Date: 01/22/03

Outfall 002
Sampled 1-6-03
Grab Sample

RESULTS OF ANALYSIS

PROJECT: ES SPDES

ATTACHMENT 1

COC_num	Site-ID	Samp_ type	Samp-ID	Samp_ date	Samp_ time	Rec_date	SDG	Lab_file-ID	Samp_ depth	Flow_rate	Notes
15841	004-HN	W	Surface Water	01/06/03	1107	01/08/03		P3010207	0		

Cas_num	Name	Concen	Error	Det_limit	Units	Anal_date	Method	Lab_batch-ID	Ext_ date	Dilution	Lab_qual	Lab_ QCnotes	Rev_qual	Rev_conc	Rev_ QCnotes
	H E D P as Organic Phosphorus	< 0.05/ < 0.05*		0.05	mg/l	01/09/03	EPA 365.3	P3010210							
	Inorganic Phosphorus	0.05/ 0.05*		0.05	mg/l	01/09/03	EPA 365.3								
	Total Phosphorus	0.079/ 0.077*		0.05	mg/l	01/09/03	EPA 365.3								
	Tolyltriazole(TTA)	< 0.005		0.005	mg/l	01/13/03	SOP # O121-049								
	* Duplicate Analysis														

Required fields are shaded
Required field under some circumstances (see Att. 2)

CHEMTEX

Environmental & Industrial Hygiene Services

3082 25th Street, Port Arthur, TX 77642
(409) 983-4575 Fax (409) 982-1522

Client: **Brookhaven National Laboratory**
Safety & Environmental
Protection Division
Bldg. 535A
Upton, NY 11973-5000
Attn: **Mr. B. Lee**

Report Date: 01/22/03

Outfall 002B
Sampled 1-7-03
Grab Sample

RESULTS OF ANALYSIS

PROJECT: ES SPDES

ATTACHMENT 1

COC_num	Site-ID	Samp_type	Samp-ID	Samp_date	Samp_time	Rec_date	SDG	Lab file-ID	Samp_depth	Flow_rate	Notes
15841	007-1004/1002	W	Surface Water	01/07/03	1058	01/08/03		P3010207	0		

Cas_num	Name	Concen	Error	Det_limit	Units	Anal_date	Method	Lab_batch-ID	Ext_date	Dilution	Lab_qual	Lab_QCnotes	Rev_qual	Rev_conc	Rev_QCnotes
	H E D P as Organic Phosphorus	< 0.05		0.05	mg/l	01/09/03	EPA 365.3	P3010213							
	Inorganic Phosphorus	0.05		0.05	mg/l	01/09/03	EPA 365.3								
	Total Phosphorus	0.05		0.05	mg/l	01/09/03	EPA 365.3								
	Tolyltriazole(TTA)	< 0.005		0.005	mg/l	01/13/03	SOP # O121-049								

Required fields are shaded
Required field under some circumstances (see Att. 2)

CHEMTEX

Environmental & Industrial Hygiene Services

3082 25th Street, Port Arthur, TX 77642
(409) 983-4575 Fax (409) 982-1522

Client: **Brookhaven National Laboratory**
Safety & Environmental
Protection Division
Bldg. 535A
Upton, NY 11973-5000
Attn: *Mr. B. Lee*

Report Date: 01/22/03

Outfall 005
Sampled 1-6-03
Grab Sample

RESULTS OF ANALYSIS

PROJECT: ES SPDES

ATTACHMENT 1

COC_num	Site-ID	Samp_type	Samp-ID	Samp_date	Samp_time	Rec_date	SDG	Lab_file-ID	Samp_depth	Flow_rate	Notes
15841	001-HS	W	Surface Water	01/06/03	1132	01/08/03		P3010207	0		

Cas_num	Name	Concen	Error	Det_limit	Units	Anal_date	Method	Lab_batch-ID	Ext_date	Dilution	Lab_qual	Lab_QCnotes	Rev_qual	Rev_conc	Rev_QCnotes
	H E D P as Organic Phosphorus	< 0.05		0.05	mg/l	01/09/03	EPA 365.3	P3010207							
	Inorganic Phosphorus	< 0.05		0.05	mg/l	01/09/03	EPA 365.3								
	Total Phosphorus	< 0.05		0.05	mg/l	01/09/03	EPA 365.3								
	Tolyltriazole(TTA)	< 0.005		0.005	mg/l	01/13/03	SOP # O121-049								

Required fields are shaded
Required field under some circumstances (see Att. 2)

CHEMTEX

Environmental & Industrial Hygiene Services

3082 25th Street, Port Arthur, TX 77642
(409) 983-4575 Fax (409) 982-1522

Client: **Brookhaven National Laboratory**
Safety & Environmental
Protection Division
Bldg. 535A
Upton, NY 11973-5000
Attn: **Mr. B. Lee**

Report Date: 01/22/03

Outfall 002A
Sampled 1-6-03
Grab Sample

RESULTS OF ANALYSIS

PROJECT: ES SPDES

ATTACHMENT 1

COC_num	Site-ID	Samp_ type	Samp-ID	Samp_ date	Samp_ time	Rec_date	SDG	Lab_file-ID	Samp_ depth	Flow_rate	Notes
15841	002-HTW	W	Surface Water	01/06/03	1115	01/08/03		P3010207	0		

Cas_num	Name	Concen	Error	Det_limit	Units	Anal_date	Method	Lab_batch-ID	Ext_ date	Dilution	Lab_qual	Lab_ QCnotes	Rev_qual	Rev_conc	Rev_ QCnotes
	H E D P as Organic Phosphorus	< 0.05		0.05	mg/l	01/09/03	EPA 365.3	P3010208							
	Inorganic Phosphorus	< 0.05		0.05	mg/l	01/09/03	EPA 365.3								
	Total Phosphorus	< 0.05		0.05	mg/l	01/09/03	EPA 365.3								
	Tolyltriazole(TTA)	< 0.005		0.005	mg/l	01/13/03	SOP # O121-049								

Required fields are shaded
Required field under some circumstances (see Att. 2)

CHEMTEX

Environmental & Industrial Hygiene Services

3082 25th Street, Port Arthur, TX 77642
(409) 983-4575 Fax (409) 982-1522

Client: **Brookhaven National Laboratory**
Safety & Environmental
Protection Division
Bldg. 535A
Upton, NY 11973-5000
Attn: **Mr. B. Lee**

Report Date: 01/22/03

Outfall 003B
Sampled 1-6-03
Grab sample

RESULTS OF ANALYSIS

PROJECT: ES SPDES

ATTACHMENT 1

COC_num	Site-ID	Samp_type	Samp-ID	Samp_date	Samp_time	Rec_date	SDG	Lab_file-ID	Samp_depth	Flow_rate	Notes
15841	003-the	W	Surface Water	01/06/03	1118	01/08/03		P3010207	0		

Cas_num	Name	Concen	Error	Det_limit	Units	Anal_date	Method	Lab_batch-ID	Ext_date	Dilution	Lab_qual	Lab_QCnotes	Rev_qual	Rev_conc	Rev_QCnotes
	H E D P as Organic Phosphorus	< 0.05		0.05	mg/l	01/09/03	EPA 365.3	P3010209							
	Inorganic Phosphorus	< 0.05		0.05	mg/l	01/09/03	EPA 365.3								
	Total Phosphorus	< 0.05		0.05	mg/l	01/09/03	EPA 365.3								
	Tolyltriazole(TTA)	< 0.005		0.005	mg/l	01/13/03	SOP # O121-049								

Required fields are shaded
Required field under some circumstances (see Att. 2)