Environmental Protection Division

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

October 23, 2008

New York State Department of
Environmental Conservation
Division of Water
Bureau of Wastewater Facilities Operation
625 Broadway, 4th Floor
Albany, NY 12233-3506

Gentlemen:

SUBJECT: State Pollutant Discharge Elimination System (SPDES) NY-0005835 Brookhaven National Laboratory (BNL) Discharge Monitoring Report (DMR) for September 2008

In accordance with our SPDES permit (NY-0005835), enclosed as Attachment I, please find the DMR for the month of September 2008. General Engineering Laboratories, LLC (ELAP Certification #11501) performs most of the analyses on SPDES samples, while H2M Labs, Inc. (NELAP Certification #10478) performs the BOD-5, Nitrogen series, and fecal coliform analyses and CHEMTEX Environmental Laboratory, Inc. (NELAP Certification #02077) performs specialty analyses for tolytriazole, hydroxyethilydene diphosphonic acid, and polypropylene glycol monobutyl ether. These laboratories are certified by the New York State Department of Health. Field measured parameters (pH, settleable solids, flow) are recorded and/or measured by BNL. Copies of the analytical reports will be retained in our files and will be made available upon request.

Review of the analytical data shows that all parameters met their respective SPDES effluent limitations.

Collection and analysis of these samples are performed in accordance with the BNL Quality Assurance (QA) Program that specifies the standard operating procedures for collection and analysis of samples, QA data requirements, validation of contractor analytical data, and QA inspections performed periodically on contractor laboratories. All QA data, data validation reports, contractor laboratory assessment, and audit reports are available upon request. Based on this information, we believe the values reported on the DMR are representative of the effluent from BNL during the month of September 2008.

NSF
Registered to
ISO 14001

If you should have any questions, please contact Jason Remien or Robert Lee of my staff at (631) 344-3477 and (631) 344-3148 respectively.

Sincerely,

George A. Goode
Environmental Protection Division
Division Manager

GAG/JR:mjt

Attachment I: Discharge Monitoring Report for September 2008.

Attachment II: Analytical Results from H2M Labs Inc. and General Engineering Laboratories, LLC for samples collected on 9/8/08, 9/10/08, and 9/12/08 from Outfall 001 (BNL Use Only).

Attachment III: Analytical Results from General Engineering Laboratories, LLC and CHEMTEX Environmental Laboratory, Inc. for samples collected from Outfalls 001A, 001B, 001F, 002, 002B, 005, 006A, 006B, 008, and 010 (BNL Use Only).

cc:
M. Bebon, w/o Attachments
G. Goode, w/o Attachments
M. Holland, w/o Attachments
A. Ackerman, w/all Attachments
E. Lessard, w/ all Attachments
E. Murphy, w/ all Attachments
J. Remien, w/ all Attachments
R. Sorrentino, NYSDEC, w/ Attachment I
C. Parnell, w/o Attachments
W. Chaloupka, w/ all Attachments
G. Granzen, w/ all Attachments
C. Johnson, w/o Attachments
R. Lee, w/ all Attachments
D. Lowenstein, w/o Attachments
V. Radeka, w/ all Attachments
E. Governale, SCDHS, w/ Attachment I
R. Backofen, w/o Attachments
R. Izzo, w/ all Attachments

File: EC62ER.08

Brookhaven National Laboratory
SPDES Permit No. NY0005835
Discharge Monitoring Report for September 2008
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. Flow is estimated based upon an instantaneous flow measurement and the assumption that flow continued for the entire day (i.e., 1,440 minutes).

3. Since flow records are maintained on a weekly or monthly basis, the flow rate provided is the daily average.

4. Two individual photographic processors had generated photographic rinse waters discharged from Building 197B. However, in late 2003 the photographic processors were shutdown resulting in no discharge from Outfall 001D for this time period.

5. PCBs were not detected above the detection limit for any congener. Total PCBs have been reported as less than the maximum of the individual detection limits achieved. Although BNL requested an MDL of 0.065 μg/L, the analytical laboratory incorrectly logged in the PCB samples with a higher MDL than requested for two of the three samples. Therefore the 0.065 μg/L MDL could not be met for all samples.

6. There was no discharge from Outfall 001E during this reporting period.

ATTACHMENT I

BROOKHAVEN NATIONAL LABORATORY

SPDES PERMIT NO. NY0005835

DISCHARGE MONITORING REPORT FOR SEPTEMBER 2008

FOR OUTFALLS NO. 001 – 010

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	001A
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	07	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
ACID/CAUSTIC CLEANG RINSE 535B
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	1900	******		******	******	******		0	03/90	RC
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. DAILY AV.		gal/d						Quarterly	RECORDR
pH	SAMPLE MEASUREMENT	******	******		7.2	******	7.2		0	01/90	GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT				Req. Mon. MINIMUM		Req. Mon. MAXIMUM	SU		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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.		2008	10	23
			YEAR	MO	DAY
Typed or Printed		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		
			631-344-4549		

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.

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	001B
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	07	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
RINSE FROM CENTRL DEGREASR 498
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	95	******		******	******	******		0	01/90	RC
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. DAILY AV.	******	gal/d	******	******				Quarterly	RCORDR
pH	SAMPLE MEASUREMENT	******	******		3.0	******	3.0		0	01/90	GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT				Req. Mon. MINIMUM	******	Req. Mon. MAXIMUM	SU		Quarterly	GRAB
Chromium, total (as Cr)	SAMPLE MEASUREMENT	******	******		******	******	41.3		0	01/90	GR
01034 1 0 Effluent Gross	PERMIT REQUIREMENT					******	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Copper, total (as Cu)	SAMPLE MEASUREMENT	******	******		******	******	634		0	01/90	GR
01042 1 0 Effluent Gross	PERMIT REQUIREMENT					******	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Iron, total (as Fe)	SAMPLE MEASUREMENT	******	******		******	******	201		0	01/90	GR
01045 1 0 Effluent Gross	PERMIT REQUIREMENT					******	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Managanese, total (as Mn) SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	8.2		0	01/90	GR
01055 1 0 Effluent Gross	PERMIT REQUIREMENT					******	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Nickel, total (as Ni) SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	16.4		0	01/90	GR
01067 1 0 Effluent Gross	PERMIT REQUIREMENT					******	Req. Mon. DAILY MX	ug/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
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			YEAR	MO	DAY
Typed or Printed			TELEPHONE		
			631-344-4549		

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.

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	001B
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	07	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
RINSE FROM CENTRL DEGREASR 498
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total (as Zn) SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	7.0		0	01/90	GR
01092 1 0 Effluent Gross	PERMIT REQUIREMENT						Req Mon DAILY MX	ug/L		Quarterly	GRAB
Bis (2-ethylhexyl) phthalate SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	3		0	01/90	GR
39100 1 0 Effluent Gross	PERMIT REQUIREMENT						Req Mon DAILY MX	ug/L		Quarterly	GRAB
Di-n-butyl phthalate	SAMPLE MEASUREMENT	******	******		******	******	<10		0	01/90	GR
39110 1 0 Effluent Gross	PERMIT REQUIREMENT						Req Mon DAILY MX	ug/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
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			YEAR	MO	DAY
Typed or Printed			TELEPHONE		
			631-344-4549		

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.

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	002B
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	09	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
RF(1004) & BRAHMS(1002) BLOWDN
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	******	******		7.5	******	7.5		0	01/30	GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		Req. Mon. MINIMUM	******	9 MAXIMUM	SU		Once Per Month	GRAB
Oil & grease SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	1.5		0	01/30	GR
00556 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	15 DAILY MX	mg/L		Once Per Month	GRAB
Flow, in conduit or thru treatment plant SEE NOTE #3	SAMPLE MEASUREMENT	******	0.0016		******	******	******		0	04/30	RC
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	******	Req. Mon. DAILY MX	Mgal/d	******	******	******			Once Per Month	RCORDR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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 possiblity of fine and imprisonment for knowing violations.		2008	10	23
			YEAR	MO	DAY
Typed or Printed		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		
			631-344-4549		

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 AND A NEW RECHARGE BASIN IS CONSTRUCTED, DISCHARGE SHOULD BE TO NEW BASIN.

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	001D
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	07	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
PHOTOPROCESSNG RINSE FROM 197B
External Outfall

No Discharge [X]

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate SEE NOTE #4	SAMPLE MEASUREMENT		******		******	******	******				
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. DAILY AV		gal/d						Quarterly	RCORDR
pH SEE NOTE #4	SAMPLE MEASUREMENT	******	******			******					
00400 1 0 Effluent Gross	PERMIT REQUIREMENT				Req. Mon. MINIMUM		Req. Mon. MAXIMUM	SU		Quarterly	GRAB
Nitrogen, total (as N) SEE NOTE #4	SAMPLE MEASUREMENT	******	******		******	******					
00600 1 0 Effluent Gross	PERMIT REQUIREMENT						Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Cyanide, total (as CN) SEE NOTE #4	SAMPLE MEASUREMENT	******	******		******	******					
00720 1 0 Effluent Gross	PERMIT REQUIREMENT						Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Silver, total (as Ag) SEE NOTE #4	SAMPLE MEASUREMENT	******	******		******	******					
01077 1 0 Effluent Gross	PERMIT REQUIREMENT						Req. Mon. DAILY MX	ug/L		Quarterly	GRAB
Phenolics, total recoverable SEE NOTE #4	SAMPLE MEASUREMENT	******	******		******	******					
32730 1 0 Effluent Gross	PERMIT REQUIREMENT						Req. Mon. DAILY MX	ug/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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	2008	10	23
			YEAR	MO	DAY
Typed or Printed			TELEPHONE		
			631-344-4549		

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.

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	001E
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	07	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
BOILER BLOWDN FROM 244,405,ETC
External Outfall

No Discharge X

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate SEE NOTE #6	SAMPLE MEASUREMENT		******		******	******	******		0		RC
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	Req Mon DAILY AVG	******	gal/d	******	******	******			Quarterly	RCORDR
pH SEE NOTE #6	SAMPLE MEASUREMENT	******	******			******			0		GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		Req Mon MINIMUM	******	Req Mon MAXIMUM	SU		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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.		2008	10	23
			YEAR	MO	DAY
Typed or Printed		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		
			631-344-4549		

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.

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	001F
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	07	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
COOLING TOWER WTR & BLOWDN 902
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	1120	******		******	******	******		0	03/90	RC
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	Req Mon DAILY AV		gal/d						Quarterly	RCORDR
pH	SAMPLE MEASUREMENT	******	******		7.4	******	7.4		0	01/90	GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT				Req Mon MINIMUM		Req Mon MAXIMUM	SU		Quarterly	GRAB
Propylene glycol monobutyl ether	SAMPLE MEASUREMENT	******	******		******	******	<500		0	01/90	GR
49875 1 0 Effluent Gross	PERMIT REQUIREMENT						Req Mon DAILY MX	ug/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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.		2018	10	23
			YEAR	MO	DAY
Typed or Printed		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		
			631-344-4549		

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.

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

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	001M
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	09	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
PROCESS SANIT & STORMWTR RNOFF
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Temperature, water deg. Fahrenheit	SAMPLE MEASUREMENT	******	******		******	******	77		0	01/01	GR
00011 1 0 Effluent Gross	PERMIT REQUIREMENT						90 DAILY MX	deg F		Daily	GRAB
BOD, 5-day, 20 deg. C	SAMPLE MEASUREMENT	******	******		******	< 2	< 2		0	03/30	24
00310 1 0 Effluent Gross	PERMIT REQUIREMENT					10 DAILY AV	20 DAILY MX	mg/L		Once Per Month	COMP24
pH	SAMPLE MEASUREMENT	******	******		6.4	******	6.9		0	01/01	GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT				5.0 MINIMUM		9 MAXIMUM	SU		Daily	GRAB
Solids, total suspended	SAMPLE MEASUREMENT	******	******		******	<1.0	<1.1		0	03/30	24
00530 1 0 Effluent Gross	PERMIT REQUIREMENT					10 DAILY AV	20 DAILY MX	mg/L		Once Per Month	COMP24
Solids, settleable	SAMPLE MEASUREMENT	******	******		******	******	0.0		0	01/01	GR
00545 1 0 Effluent Gross	PERMIT REQUIREMENT						0.1 DAILY MX	mL/L		Daily	GRAB
Nitrogen, total (as N)	SAMPLE MEASUREMENT	******	******		******	******	5		0	03/30	24
00600 1 0 Effluent Gross	PERMIT REQUIREMENT						10 DAILY MX	mg/L		Once Per Month	COMP24
Nitrogen, ammonia total (as N)	SAMPLE MEASUREMENT	******	******		******	******	<0.1		0	03/30	24
00610 1 0 Effluent Gross	PERMIT REQUIREMENT						2 DAILY MX	mg/L		Once Per Month	COMP24

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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	2008	10	23
			YEAR	MO	DAY
Typed or Printed			TELEPHONE		
			631-344-4549		

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.

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

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	001M
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	09	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
PROCESS SANIT & STORMWTR RNOFF
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Phosphorus, total (as P)	SAMPLE MEASUREMENT	******	******		******	******	1.3		0	03/30	24
00665 1 0 Effluent Gross	PERMIT REQUIREMENT						Rep Mon DAILY MX	mg/L		Once Per Month	COMP24
Cyanide, total (as CN)	SAMPLE MEASUREMENT	******	******		******	******	<1.5		0	03/30	GR
00720 1 0 Effluent Gross	PERMIT REQUIREMENT						100 DAILY MX	ug/L		Twice Per Month	GRAB
Copper, total (as Cu) (AS CU)	SAMPLE MEASUREMENT	******	******		******	******	0.041		0	03/30	24
01042 1 0 Effluent Gross	PERMIT REQUIREMENT						0.15 DAILY MX	mg/L		Once Per Month	COMP24
Iron, total (as Fe)	SAMPLE MEASUREMENT	******	******		******	******	0.12		0	03/30	24
01045 1 0 Effluent Gross	PERMIT REQUIREMENT						0.37 DAILY MX	mg/L		Once Per Month	COMP24
Lead, total (as Pb) SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	0.0019		0	03/30	24
01051 1 0 Effluent Gross	PERMIT REQUIREMENT						0.019 DAILY MX	mg/L		Once Per Month	COMP24
Nickel, total (as Ni) SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	0.0062		0	03/30	24
01067 1 0 Effluent Gross	PERMIT REQUIREMENT						0.11 DAILY MX	mg/L		Once Per Month	COMP24
Silver, total (as Ag) SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	0.0016		0	03/30	24
01077 1 0 Effluent Gross	PERMIT REQUIREMENT						0.015 DAILY MX	mg/L		Once Per Month	COMP24

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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	2008	10	23
			YEAR	MO	DAY
Typed or Printed			TELEPHONE		
			631-344-4549		

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.

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	001M
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	09	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
PROCESS SANIT & STORMWTR RNOFF
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Zinc, total (as Zn)	SAMPLE MEASUREMENT	******	******		******	******	0.08		0	03/30	24
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	0.1 DAILY MX	mg/L		Once Per Month	COMP24
Toluene	SAMPLE MEASUREMENT	******	******		******	******	<1		0	03/30	GR
34010 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	5 DAILY MX	ug/L		Twice Per Month	GRAB
Methylene chloride SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	3		0	03/30	GR
34423 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	5 DAILY MX	ug/L		Twice Per Month	GRAB
1, 1, 1 - Trichloroethane	SAMPLE MEASUREMENT	******	******		******	******	<1		0	03/30	GR
34506 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	5 DAILY MX	ug/L		Twice Per Month	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	0.46	0.57		******	******	******		0	99/99	RC
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req Mon DAILY AV	2.3 DAILY MX	Mgal/d	******	******	******			Continuous	RCORDR
Mercury, total (as Hg)	SAMPLE MEASUREMENT	******	******		******	******	<0.00003		0	03/30	24
71900 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	0.0008 DAILY MX	mg/L		Once Per Month	COMP24
Coliform, fecal general	SAMPLE MEASUREMENT	******	******		******	<2	<2		0	03/30	GR
74055 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	200 DAILY AV	400 DAILY MX	#/100mL		Once Per Month	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE
George A. Goode Division Manager Environmental & Waste Management Services Division	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	2008 10 23 YEAR MO DAY
Typed or Printed			TELEPHONE 631-344-4549

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.

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	001M
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	09	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
PROCESS SANIT & STORMWTR RNOFF
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
2 - Butanone	SAMPLE MEASUREMENT	******	******		******	******	<5		0	03/30	GR
78356 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	50 DAILY MX	ug/L		Twice Per Month	GRAB
BOD, 5-day, percent removal	SAMPLE MEASUREMENT	******	******		>92	******	******		0	01/30	CA
81010 K 0 Percent Removal	PERMIT REQUIREMENT	******	******		85 MO AV MN	******	******	%		Once Per Month	CALCTD
Solids, suspended percent removal	SAMPLE MEASUREMENT	******	******		>97	******	******		0	01/30	CA
81011 K 0 Percent Removal	PERMIT REQUIREMENT	******	******		85 MO AV MN	******	******	%		Once Per Month	CALCTD

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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.	George A. Goode	2008	10	23
			YEAR	MO	DAY
Typed or Printed		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		
			631-344-4549		

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.

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	002M
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	09	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
AGS NON-C COOLING,PRCP,ETC (HN)
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	******	******		7.2	******	7.6		0	04/30	GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT				Req Mon MINIMUM		9 MAXIMUM	SU		Once Per Month	GRAB
Oil & grease SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	2.1		0	01/30	GR
00556 1 0 Effluent Gross	PERMIT REQUIREMENT						15 DAILY MX	mg/L		Once Per Month	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	1.6	******		******	******	******		0	04/30	RC
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req Mon DAILY AV		Mgal/d						Once Per Month	RCORDR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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 possiblity of fine and imprisonment for knowing violations.		2008	10	23
			YEAR	MO	DAY
Typed or Printed		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		
			631-344-4549		

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.

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	005M
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	09	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
NSLS COOLING TOWR BLDN ETC (HS)
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	******	******		7.0	******	7.7		0	04/30	GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT				Req. Mon. MINIMUM		8.5 MAXIMUM	SU		Once Per Month	GRAB
Oil & grease SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	1.9		0	01/30	GR
00556 1 0 Effluent Gross	PERMIT REQUIREMENT						15 DAILY MX	mg/L		Once Per Month	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	0.37	******		******	******	******		0	04/30	RC
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. DAILY AV		Mgal/d						Once Per Month	RCORDR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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.		2008	10	23
			YEAR	MO	DAY
Typed or Printed		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE 631-344-4549		

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

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	007M
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	09	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
WATER TREATMENT PLT BKWSH (HX)
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate	SAMPLE MEASUREMENT	******	360000		******	******	******		0	19/30	IN
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	******	Req. Mon. DAILY MX	gal/d	******	******	******			Once Per Month	INSTAN
pH	SAMPLE MEASUREMENT	******	******		7.4	******	7.4		0	01/30	GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		Req. Mon. MINIMUM	******	9 MAXIMUM	SU		Once Per Month	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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.	Mg. Goode	2008	10	23
			YEAR	MO	DAY
Typed or Printed		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		
			631-344-4549		

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.

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

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	008M
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	09	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
STORMWTR RUNOFF WAREHOUSE (HW)
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate SEE NOTE #2	SAMPLE MEASUREMENT	******	56300		******	******	******		0	01/30	IN
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	******	Req. Mon. DAILY MX	gal/d	******	******	******			Once Per Month	INSTAN
pH	SAMPLE MEASUREMENT	******	******		7.4	******	7.4		0	01/30	GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		Req. Mon. MINIMUM	******	8.5 MAXIMUM	SU		Once Per Month	GRAB
Oil & grease SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	2.0		0	01/30	GR
00556 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	15 DAILY MX	mg/L		Once Per Month	GRAB
1, 1 - Dichloroethylene	SAMPLE MEASUREMENT	******	******		******	******	<1		0	01/30	GR
34501 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	5 DAILY MX	ug/L		Once Per Month	GRAB
1, 1, 1 - Trichloroethane	SAMPLE MEASUREMENT	******	******		******	******	<1		0	01/30	GR
34506 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	5 DAILY MX	ug/L		Once Per Month	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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.	G.A. Goode	2008	10	23
Typed or Printed		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	YEAR	MO	DAY
			TELEPHONE		
			631-344-4549		

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

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	010M
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	09	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
STORMWTR R O CENTRAL STEAM (H)
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Flow rate SEE NOTE #2	SAMPLE MEASUREMENT	******	15000		******	******	******		0	01/30	IN
50050 1 0 Effluent Gross	PERMIT REQUIREMENT		Reqd Mon DAILY MX	gal/d						Once Per Month	NSTAN
pH	SAMPLE MEASUREMENT	******	******		7.8	******	7.8		0	01/30	GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT				Req Mon MINIMUM		8.5 MAXIMUM	SU		Once Per Month	GRAB
Oil & grease SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	2.0		0	01/30	GR
00556 1 0 Effluent Gross	PERMIT REQUIREMENT						15 DAILY MX	mg/L		Once Per Month	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE
George A. Goode Division Manager Environmental & Waste Management Services Division	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	2008 10 23 YEAR MO DAY
Typed or Printed			TELEPHONE 631-344-4549

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.

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	06AM
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	09	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
LINAC NCCW, FLOOR DNS,ETC (HT1)
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	******	******		7.1	******	7.4		0	04/30	GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT				Req Mon MINIMUM		9 MAXIMUM	SU		Once Per Month	GRAB
Oil & grease SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	1.9		0	01/30	GR
00556 1 0 Effluent Gross	PERMIT REQUIREMENT						15 DAILY MX	mg/L		Once Per Month	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	0.11	******		******	******	******		0	04/30	RC
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req Mon DAILY AV		Mgal/d						Once Per Month	RCORDR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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.	George A. Goode	2008	10	23
			YEAR	MO	DAY
Typed or Printed		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE 631-344-4549		

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

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	06BM
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	09	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
COOLING TOWR FROM 919 ETC (HT2)
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
pH	SAMPLE MEASUREMENT	******	******		7.4	******	7.4		0	04/30	GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT				Req Mon MINIMUM		9 MAXIMUM	SU		Once Per Month	GRAB
Oil & grease SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	2.0		0	01/30	GR
00556 1 0 Effluent Gross	PERMIT REQUIREMENT						15 DAILY MX	mg/L		Once Per Month	GRAB
Flow, in conduit or thru treatment plant	SAMPLE MEASUREMENT	0.47	******		******	******	******		0	04/30	RC
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req Mon DAILY AV		Mgal/d						Once Per Month	RCORDR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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.	Mark Goode	2008	10	23
			YEAR	MO	DAY
Typed or Printed		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE 631-344-4549		

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

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

PERMITTEE NAME/ADDRESS *(Include Facility Name/Location if Different)*
NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	001Q
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	07	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
PROCESS SANIT EFFL & STORMWTR
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Polychlorinated biphenyls (PCBs) SEE NOTE #5	SAMPLE MEASUREMENT	******	******		******	******	<0.2		0	03/90	GR
39516 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	Req Mon DAILY MX	ug/L	******	Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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.		2008	10	22
			YEAR	MO	DAY
Typed or Printed		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		
			631-344-4549		

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.

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	002Q
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	07	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
AGS NON-C COOLG,PRECP ETC (HN)
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Aluminum, total (as Al) SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	0.07		0	01/90	GR
01105 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	2 DAILY MX	mg/L		Quarterly	GRAB
Dichlorobromomethane SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	0.4		0	01/90	GR
32101 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	50 DAILY MX	ug/L		Quarterly	GRAB
Chloroform	SAMPLE MEASUREMENT	******	******		******	******	<1		0	01/90	GR
32106 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	7 DAILY MX	ug/L		Quarterly	GRAB
1, 1, 1 - Trichloroethane	SAMPLE MEASUREMENT	******	******		******	******	<1		0	01/90	GR
34506 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	5 DAILY MX	ug/L		Quarterly	GRAB
1 - Hydroxyethylidene	SAMPLE MEASUREMENT	******	******		******	******	<0.05		0	01/90	GR
85812 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	0.5 DAILY MX	mg/L		Quarterly	GRAB
Tolytriazole	SAMPLE MEASUREMENT	******	******		******	******	<0.005		0	01/90	GR
85813 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	0.2 DAILY MX	mg/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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	2008	10	23
			YEAR	MO	DAY
Typed or Printed			TELEPHONE		
			631-344-4549		

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.

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	005Q
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	07	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
NSLS COOLG TOWR BLOWDN ETC (HS)
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, total (as Cu)	SAMPLE MEASUREMENT	******	******		******	******	<0.003		0	01/90	GR
01042 1 0 Effluent Gross	PERMIT REQUIREMENT						1 DAILY MX	mg/L		Quarterly	GRAB
1 - Hydroxyethylidene	SAMPLE MEASUREMENT	******	******		******	******	< 0.05		0	01/90	GR
85812 1 0 Effluent Gross	PERMIT REQUIREMENT						0.5 DAILY MX	mg/L		Quarterly	GRAB
Tolytriazole	SAMPLE MEASUREMENT	******	******		******	******	< 0.005		0	01/90	GR
85813 1 0 Effluent Gross	PERMIT REQUIREMENT						0.2 DAILY MX	mg/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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.	G. A. Goode	2005	10	23
			YEAR	MO	DAY
Typed or Printed		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE 631-344-4549		

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.

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	008Q
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	07	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
SW RUNOFF FROM WAREHOUSE AREA
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Aluminum, dissolved (as Al)	SAMPLE MEASUREMENT	******	******		******	******	<0.07		0	01/90	GR
01106 1 0 Effluent Gross	PERMIT REQUIREMENT						2 DAILY MX	mg/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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.		2008	10	23
			YEAR	MO	DAY
Typed or Printed		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		
			631-344-4549		

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

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	010Q
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	07	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
SW RUNOFF FROM CENTRAL STM (H)
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
Copper, dissolved (as Cu) SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	0.004		0	01/90	GR
01040 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	1 DAILY MX	mg/L		Quarterly	GRAB
Lead, dissolved (as Pb)	SAMPLE MEASUREMENT	******	******		******	******	<0.0005		0	01/90	GR
01049 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	0.05 DAILY MX	mg/L		Quarterly	GRAB
Vanadium, dissolved (as V) SEE NOTE #1	SAMPLE MEASUREMENT	******	******		******	******	0.006		0	01/90	GR
01085 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	REPORT DAILY MX	mg/L		Quarterly	GRAB
Aluminum, dissolved (as Al)	SAMPLE MEASUREMENT	******	******		******	******	<0.07		0	01/90	GR
01106 1 0 Effluent Gross	PERMIT REQUIREMENT	******	******		******	******	2 DAILY MX	mg/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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	2008	10	23
			YEAR	MO	DAY
Typed or Printed			TELEPHONE		
			631-344-4549		

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

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	06AQ
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	07	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
LINAC NCCW, FLOOR DNS, SW (HT1)
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
1 - Hydroxyethylidene	SAMPLE MEASUREMENT	******	******		******	******	< 0.05		0	01/90	GR
85812 1 0 Effluent Gross	PERMIT REQUIREMENT						0.5 DAILY MX	mg/L		Quarterly	GRAB
Tolytriazole	SAMPLE MEASUREMENT	******	******		******	******	< 0.005		0	01/90	GR
85813 1 0 Effluent Gross	PERMIT REQUIREMENT						0.2 DAILY MX	mg/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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.	G. Goode	2008	10	23
			YEAR	MO	DAY
Typed or Printed		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE 631-344-4549		

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.

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	06BQ
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	07	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
COOLG TOWRS FROM 919 ETC (HT2)
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
1 - Hydroxyethylidene	SAMPLE MEASUREMENT	******	******		******	******	<0.05		0	01/90	GR
85812 1 0 Effluent Gross	PERMIT REQUIREMENT						0.5 DAILY MX	mg/L		Quarterly	GRAB
Tolytriazole	SAMPLE MEASUREMENT	******	******		******	******	< 0.005		0	01/90	GR
85813 1 0 Effluent Gross	PERMIT REQUIREMENT						0.2 DAILY MX	mg/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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.		2008	10	23
			YEAR	MO	DAY
Typed or Printed		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		
			631-344-4549		

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.

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

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

NAME BROOKHAVEN NATIONAL LABORATORY
ADDRESS 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
FACILITY BROOKHAVEN NATIONAL LABORATORY
LOCATION 53 BELL AVENUE, BLDG 464
UPTON, NY 11973
ATTN: MICHAEL HOLLAND, OFFICE MGR

NY0005835	002R
PERMIT NUMBER	DISCHARGE NUMBER

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
08	07	01	08	09	30

DMR MAILING ZIP CODE: 11973
MAJOR
(SUBR 01)
RF(1004) & BRAHMS(1002) BLOWDN
External Outfall

No Discharge ☐

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
1 - Hydroxyethylidene	SAMPLE MEASUREMENT	******	******		******	******	< 0.05			01/90	GR
85812 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT						0.5 DAILY MX	mg/L		Quarterly	GRAB
Tolytriazole	SAMPLE MEASUREMENT	******	******		******	******	< 0.005			01/90	GR
85813 1 0 EFFLUENT GROSS	PERMIT REQUIREMENT						0.2 DAILY MX	mg/L		Quarterly	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER			DATE		
George A. Goode Division Manager Environmental & Waste Management Services Division	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.		2008	10	23
			YEAR	MO	DAY
Typed or Printed		SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	TELEPHONE		
			631-344-4549		

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 AND A NEW RECHARGE BASIN IS CONSTRUCTED, DISCHARGE SHOULD BE DIRECTED TO THE NEW BASIN.

ATTACHMENT II

BROOKHAVEN NATIONAL LABORATORY

SPDES PERMIT NO. NY0005835

DISCHARGE MONITORING REPORT FOR SEPTEMBER 2008

ANALYTICAL RESULTS FROM H2M LABS

AND GENERAL ENGINEERING LABORATORIES, LLC

FOR REGULATORY COMPLIANCE SAMPLES COLLECTED

9/8/08, 9/10/08, and 9/12/08

FROM OUTFALL 001

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 : Bob Lee

Lab No. : 0810613-001

Client ID. : 26068-001

Sample Information...
Type : Aqueous

Origin:

Collected : 9/8/2008 11:00:00 AM
Received : 9/8/2008 3:20:00 PM
Collected By CLIENT
Copies To : Original
CC

Parameter(s)	Results	Qualifier	D.F.	Units	Method Number	Analyzed
Biochemical Oxygen Demand	< 2		1	mg/L	E405.1	09/10/2008 8:35 AM
Nitrogen, Total	2.2		1	mg/L	M4500-N C	09/17/2008
Nitrogen, Ammonia (As N)	< 0.10		1	mg/L	E350.1	09/18/2008 1:50 PM
Nitrite as N	< 0.01		1	mg/L	E353.2	09/09/2008 3:43 PM
Nitrate as N	1.95		10	mg/L	E353.2	09/11/2008 11:37 AM
Nitrogen, Kjeldahl, Total	0.26		1	mg/L	E351.2	09/17/2008 10:21 AM

Outfall 001
Sampled 9/8/08
24 hour Composite

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

D.F. = Dilution Factor

Date Reported : 9/22/2008

Joann M. Slavin
Laboratory Manager

BNLS904 A24

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 : Bob Lee

Lab No. : 0810760-001

Client ID. : 26250-001

Sample Information...
Type : Aqueous

Origin:

Collected :9/10/2008 11:15:00 AM
Received :9/10/2008 3:25:00 PM
Collected By CLIENT
Copies To :Original
CC

Parameter(s)	Results	Qualifier	D.F.	Units	Method Number	Analyzed
Biochemical Oxygen Demand	< 2		1	mg/L	E405.1	09/11/2008 1:20 PM
Nitrogen, Total	2.7		1	mg/L	M4500-N C	09/17/2008
Nitrogen, Ammonia (As N)	< 0.10		1	mg/L	E350.1	09/18/2008 1:55 PM
Nitrite as N	0.01		1	mg/L	E353.2	09/11/2008 10:32 AM
Nitrate as N	2.46		10	mg/L	E353.2	09/15/2008 11:13 AM
Nitrogen, Kjeldahl, Total	0.24		1	mg/L	E351.2	09/17/2008 10:24 AM

Outfall 001
Sampled 9/10/08
24 hour composite

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

D.F. = Dilution Factor

Joann M. Slavin
Laboratory Manager

Date Reported : 9/22/2008

BNLS904 A28

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 : Bob Lee

Lab No. : 0810889-001

Sample Information...
Type : Aqueous

Origin:

Client ID. : 26257-001

Collected : 9/12/2008 10:45:00 AM
Received : 9/12/2008 3:30:00 PM
Collected By CLIENT
Copies To :Original
CC

Parameter(s)	Results	Qualifier	D.F.	Units	Method Number	Analyzed
Biochemical Oxygen Demand	< 2		1	mg/L	E405.1	09/12/2008 4:00 PM
Nitrogen, Total	4.7		1	mg/L	M4500-N C	09/17/2008
Nitrogen, Ammonia (As N)	< 0.10		1	mg/L	E350.1	09/18/2008 1:57 PM
Nitrite as N	0.01		1	mg/L	E353.2	09/13/2008 9:09 AM
Nitrate as N	4.12		10	mg/L	E353.2	09/15/2008 11:30 AM
Nitrogen, Kjeldahl, Total	0.56		1	mg/L	E351.2	09/17/2008 10:25 AM

Outfall 001
Sampled 9/12/08
24 hour composite

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

D.F. = Dilution Factor

Date Reported : 9/22/2008

Joann M. Slavin
Laboratory Manager

BNLS904 A31

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 : Bob Lee

Lab No. : 0810613-002

Client ID. : 26068-002

Sample Information...
Type : Aqueous

Origin:

Collected : 9/8/2008 1:10:00 PM
Received : 9/8/2008 3:20:00 PM
Collected By CLIENT
Copies To : Original
CC

Parameter(s)	Results	Qualifier	D.F.	Units	Method Number	Analyzed
Total Coliform	< 2		1	MPN	M9221 BC	09/08/2008 4:00 PM
Fecal Coliform	< 2		1	MPN	M9221 BC	09/08/2008 4:00 PM

Outfall 001
Sampled 9/8/08
Grab

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

D.F. = Dilution Factor

Date Reported : 9/22/2008

Joann M. Slavin
Laboratory Manager

BNLS904 A25

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 : Bob Lee

Lab No. : 0810760-002

Client ID. : 26250-002

Sample Information...
Type : Aqueous

Origin:

Collected : 9/10/2008 2:00:00 PM
Received : 9/10/2008 3:25:00 PM
Collected By CLIENT
Copies To : Original
CC

Parameter(s)	Results	Qualifier	D.F.	Units	Method Number	Analyzed
Total Coliform	< 2		1	MPN	M9221 BC	09/10/2008 4:30 PM
Fecal Coliform	< 2		1	MPN	M9221 BC	09/10/2008 4:30 PM

Outfall 001
Sampled 9/10/08
Grab

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

D.F. = Dilution Factor

Date Reported : 9/22/2008

Joann M. Slavin
Laboratory Manager

BNLS904 A29

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 : Bob Lee

Lab No. : 0810889-002

Client ID. : 26257-002

Sample Information...
Type : Aqueous

Origin:

Collected :9/12/2008 1:45:00 PM
Received :9/12/2008 3:30:00 PM
Collected By CLIENT
Copies To :Original
CC

Parameter(s)	Results	Qualifier	D.F.	Units	Method Number	Analyzed
Total Coliform	< 2		1	MPN	M9221 BC	09/12/2008 3:45 PM
Fecal Coliform	< 2		1	MPN	M9221 BC	09/12/2008 3:45 PM

Outfall 001
Sampled 9/12/08
Grab

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

D.F. = Dilution Factor

Date Reported : 9/22/2008

Joann M. Slavin
Laboratory Manager

BNLS904 A32

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 : Bob Lee

Lab No. : 0810613-003

Client ID. : 26068-003

Sample Information...
Type : Aqueous

Origin:

Collected : 9/8/2008 11:50:00 AM
Received : 9/8/2008 3:20:00 PM
Collected By CLIENT
Copies To :Original
CC

Parameter(s)	Results	Qualifier	D.F.	Units	Method Number	Analyzed
Biochemical Oxygen Demand	< 20		1	mg/L	E405.1	09/10/2008 8:45 AM

STP Influent
Sampled 9/8/08
24 hour composite

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

D.F. = Dilution Factor

Date Reported : 9/22/2008

Joann M. Slavin
Laboratory Manager

BNLS904 A26

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 : Bob Lee

Lab No. : 0810760-003

Client ID. : 26250-003

Sample Information...
Type : Aqueous

Origin:

Collected :9/10/2008 11:30:00 AM
Received :9/10/2008 3:25:00 PM
Collected By CLIENT
Copies To :Original
CC

Parameter(s)	Results	Qualifier	D.F.	Units	Method Number	Analyzed
Biochemical Oxygen Demand	22		1	mg/L	E405.1	09/11/2008 1:25 PM

STP Influent
Sampled 9/10/08
24 hour composite

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

D.F. = Dilution Factor

Date Reported : 9/22/2008

Joann M. Slavin
Laboratory Manager

BNLS904 A30

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 : Bob Lee

Lab No. : 0810889-003

Client ID. : 26257-003

Sample Information...
Type : Aqueous

Origin:

Collected : 9/12/2008 11:00:00 AM
Received : 9/12/2008 3:30:00 PM
Collected By CLIENT
Copies To : Original
CC

Parameter(s)	Results	Qualifier	D.F.	Units	Method Number	Analyzed
Biochemical Oxygen Demand	29		1	mg/L	E405.1	09/12/2008 4:05 PM

~~Ot~~ STP Influent
Sampled 9/12/08
24 hour composite

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

D.F. = Dilution Factor

Date Reported : 9/22/2008

Joann M. Slavin
Laboratory Manager

BNLS904 A33

Volatile
Certificate of Analysis
Sample Summary

SDG Number:	215317	Date Collected:	09/08/2008 13:10	Matrix:	WATER
Lab Sample ID:	215317002	Date Received:	09/09/2008 08:50		
Client Sample:	STP Effluent	Client:	BRKL005	Project:	BRKL00504
Client ID:	26067-002	Method:	EPA 624	SOP Ref:	GL-OA-E-026
Batch ID:	794425	Inst:	VOA6.I	Dilution:	1
Run Date:	09/12/2008 22:55	Analyst:	RXD1	Purge Vol:	5 mL
Prep Date:	09/12/2008 22:55				
Data File:	6a528.d	Column:	DB-624	Level:	LOW

CAS No.	Parmname	Qualifier	Result	Units	MDL/LOD	PQL/LOQ
74-87-3	Chloromethane	U	1.00	ug/L	0.500	1.00
75-01-4	Vinyl chloride	U	1.00	ug/L	0.500	1.00
74-83-9	Bromomethane	U	1.00	ug/L	0.500	1.00
75-00-3	Chloroethane	U	1.00	ug/L	0.500	1.00
75-69-4	Trichlorofluoromethane	U	1.00	ug/L	0.310	1.00
67-64-1	Acetone	J	2.09	ug/L	1.25	5.00
75-05-8	Acetonitrile	U	25.0	ug/L	6.25	25.0
75-35-4	1,1-Dichloroethylene	U	1.00	ug/L	0.300	1.00
75-09-2	Methylene chloride	U	2.00	ug/L	2.00	2.00
1634-04-4	tert-Butyl methyl ether	U	5.00	ug/L	0.250	5.00
156-60-5	trans-1,2-Dichloroethylene	U	1.00	ug/L	0.300	1.00
75-34-3	1,1-Dichloroethane	U	1.00	ug/L	0.300	1.00
78-93-3	2-Butanone	U	5.00	ug/L	1.25	5.00
67-66-3	Chloroform	U	1.00	ug/L	0.250	1.00
71-55-6	1,1,1-Trichloroethane	U	1.00	ug/L	0.300	1.00
56-23-5	Carbon tetrachloride	U	1.00	ug/L	0.250	1.00
107-06-2	1,2-Dichloroethane	U	1.00	ug/L	0.250	1.00
71-43-2	Benzene	U	1.00	ug/L	0.300	1.00
79-01-6	Trichloroethylene	U	1.00	ug/L	0.250	1.00
78-87-5	1,2-Dichloropropane	U	1.00	ug/L	0.250	1.00
75-27-4	Bromodichloromethane	U	1.00	ug/L	0.250	1.00
110-75-8	2-Chloroethylvinyl ether	U	5.00	ug/L	1.50	5.00
108-10-1	4-Methyl-2-pentanone	U	5.00	ug/L	1.25	5.00
10061-01-5	cis-1,3-Dichloropropylene	U	1.00	ug/L	0.250	1.00
108-88-3	Toluene	U	1.00	ug/L	0.250	1.00
10061-02-6	trans-1,3-Dichloropropylene	U	1.00	ug/L	0.250	1.00
79-00-5	1,1,2-Trichloroethane	U	1.00	ug/L	0.250	1.00
591-78-6	2-Hexanone	U	5.00	ug/L	1.25	5.00
127-18-4	Tetrachloroethylene	U	1.00	ug/L	0.250	1.00
124-48-1	Dibromochloromethane	U	1.00	ug/L	0.250	1.00
108-90-7	Chlorobenzene	U	1.00	ug/L	0.250	1.00
100-41-4	Ethylbenzene	U	1.00	ug/L	0.250	1.00
75-25-2	Bromoform	U	1.00	ug/L	0.250	1.00
79-34-5	1,1,2,2-Tetrachloroethane	U	1.00	ug/L	0.250	1.00
541-73-1	1,3-Dichlorobenzene	U	1.00	ug/L	0.250	1.00
106-46-7	1,4-Dichlorobenzene	U	1.00	ug/L	0.250	1.00
95-50-1	1,2-Dichlorobenzene	U	1.00	ug/L	0.250	1.00

Outfall 001
Sampled 9/8/08
Grab

Volatile
Certificate of Analysis
Sample Summary

SDG Number:	215600	Date Collected:	09/10/2008 14:00	Matrix:	WATER
Lab Sample ID:	215600002	Date Received:	09/11/2008 08:45		
Client Sample:	STP Effluent	Client:	BRKL005	Project:	BRKL00504
Client ID:	26249-002	Method:	EPA 624	SOP Ref:	GL-OA-E-026
Batch ID:	794425	Inst:	VOA6.I	Dilution:	1
Run Date:	09/12/2008 23:50	Analyst:	RXD1	Purge Vol:	5 mL
Prep Date:	09/12/2008 23:50				
Data File:	6a530.d	Column:	DB-624	Level:	LOW

CAS No.	Parmname	Qualifier	Result	Units	MDL/LOD	PQL/LOQ
74-87-3	Chloromethane	U	1.00	ug/L	0.500	1.00
75-01-4	Vinyl chloride	U	1.00	ug/L	0.500	1.00
74-83-9	Bromomethane	U	1.00	ug/L	0.500	1.00
75-00-3	Chloroethane	U	1.00	ug/L	0.500	1.00
75-69-4	Trichlorofluoromethane	U	1.00	ug/L	0.310	1.00
67-64-1	Acetone	U	5.00	ug/L	1.25	5.00
75-05-8	Acetonitrile	U	25.0	ug/L	6.25	25.0
75-35-4	1,1-Dichloroethylene	U	1.00	ug/L	0.300	1.00
75-09-2	Methylene chloride		3.11	ug/L	2.00	2.00
1634-04-4	tert-Butyl methyl ether	U	5.00	ug/L	0.250	5.00
156-60-5	trans-1,2-Dichloroethylene	U	1.00	ug/L	0.300	1.00
75-34-3	1,1-Dichloroethane	U	1.00	ug/L	0.300	1.00
78-93-3	2-Butanone	U	5.00	ug/L	1.25	5.00
67-66-3	Chloroform	U	1.00	ug/L	0.250	1.00
71-55-6	1,1,1-Trichloroethane	U	1.00	ug/L	0.300	1.00
56-23-5	Carbon tetrachloride	U	1.00	ug/L	0.250	1.00
107-06-2	1,2-Dichloroethane	U	1.00	ug/L	0.250	1.00
71-43-2	Benzene	U	1.00	ug/L	0.300	1.00
79-01-6	Trichloroethylene	U	1.00	ug/L	0.250	1.00
78-87-5	1,2-Dichloropropane	U	1.00	ug/L	0.250	1.00
75-27-4	Bromodichloromethane	U	1.00	ug/L	0.250	1.00
110-75-8	2-Chloroethylvinyl ether	U	5.00	ug/L	1.50	5.00
108-10-1	4-Methyl-2-pentanone	U	5.00	ug/L	1.25	5.00
10061-01-5	cis-1,3-Dichloropropylene	U	1.00	ug/L	0.250	1.00
108-88-3	Toluene	U	1.00	ug/L	0.250	1.00
10061-02-6	trans-1,3-Dichloropropylene	U	1.00	ug/L	0.250	1.00
79-00-5	1,1,2-Trichloroethane	U	1.00	ug/L	0.250	1.00
591-78-6	2-Hexanone	U	5.00	ug/L	1.25	5.00
127-18-4	Tetrachloroethylene	U	1.00	ug/L	0.250	1.00
124-48-1	Dibromochloromethane	U	1.00	ug/L	0.250	1.00
108-90-7	Chlorobenzene	U	1.00	ug/L	0.250	1.00
100-41-4	Ethylbenzene	U	1.00	ug/L	0.250	1.00
75-25-2	Bromoform	U	1.00	ug/L	0.250	1.00
79-34-5	1,1,2,2-Tetrachloroethane	U	1.00	ug/L	0.250	1.00
541-73-1	1,3-Dichlorobenzene	U	1.00	ug/L	0.250	1.00
106-46-7	1,4-Dichlorobenzene	U	1.00	ug/L	0.250	1.00
95-50-1	1,2-Dichlorobenzene	U	1.00	ug/L	0.250	1.00

Outfall 001
Sampled 9/10/08
Grab

Volatile
Certificate of Analysis
Sample Summary

SDG Number:	215739	Date Collected:	09/12/2008 13:45	Matrix:	WATER
Lab Sample ID:	215739002	Date Received:	09/13/2008 09:45		
Client Sample:	STP Effluent	Client:	BRKL005	Project:	BRKL00504
Client ID:	26256-002	Method:	EPA 624	SOP Ref:	GL-OA-E-026
Batch ID:	795398	Inst:	VOA9.I	Dilution:	1
Run Date:	09/16/2008 15:17	Analyst:	RXY1	Purge Vol:	5 mL
Prep Date:	09/16/2008 15:17				
Data File:	9c214.d	Column:	RTX-Volatiles	Level:	LOW

CAS No.	Parmname	Qualifier	Result	Units	MDL/LOD	PQL/LOQ
74-87-3	Chloromethane	U	1.00	ug/L	0.500	1.00
75-01-4	Vinyl chloride	U	1.00	ug/L	0.500	1.00
74-83-9	Bromomethane	U	1.00	ug/L	0.500	1.00
75-00-3	Chloroethane	U	1.00	ug/L	0.500	1.00
75-69-4	Trichlorofluoromethane	U	1.00	ug/L	0.310	1.00
67-64-1	Acetone	BJ	3.21	ug/L	1.25	5.00
75-05-8	Acetonitrile	U	25.0	ug/L	6.25	25.0
75-35-4	1,1-Dichloroethylene	U	1.00	ug/L	0.300	1.00
75-09-2	Methylene chloride	U	2.00	ug/L	2.00	2.00
1634-04-4	tert-Butyl methyl ether	U	5.00	ug/L	0.250	5.00
156-60-5	trans-1,2-Dichloroethylene	U	1.00	ug/L	0.300	1.00
75-34-3	1,1-Dichloroethane	U	1.00	ug/L	0.300	1.00
78-93-3	2-Butanone	U	5.00	ug/L	1.25	5.00
67-66-3	Chloroform	U	1.00	ug/L	0.250	1.00
71-55-6	1,1,1-Trichloroethane	U	1.00	ug/L	0.300	1.00
56-23-5	Carbon tetrachloride	U	1.00	ug/L	0.250	1.00
107-06-2	1,2-Dichloroethane	U	1.00	ug/L	0.250	1.00
71-43-2	Benzene	U	1.00	ug/L	0.300	1.00
79-01-6	Trichloroethylene	U	1.00	ug/L	0.250	1.00
78-87-5	1,2-Dichloropropane	U	1.00	ug/L	0.250	1.00
75-27-4	Bromodichloromethane	U	1.00	ug/L	0.250	1.00
110-75-8	2-Chloroethylvinyl ether	U	5.00	ug/L	1.50	5.00
108-10-1	4-Methyl-2-pentanone	U	5.00	ug/L	1.25	5.00
10061-01-5	cis-1,3-Dichloropropylene	U	1.00	ug/L	0.250	1.00
108-88-3	Toluene	U	1.00	ug/L	0.250	1.00
10061-02-6	trans-1,3-Dichloropropylene	U	1.00	ug/L	0.250	1.00
79-00-5	1,1,2-Trichloroethane	U	1.00	ug/L	0.250	1.00
591-78-6	2-Hexanone	U	5.00	ug/L	1.25	5.00
127-18-4	Tetrachloroethylene	U	1.00	ug/L	0.250	1.00
124-48-1	Dibromochloromethane	U	1.00	ug/L	0.250	1.00
108-90-7	Chlorobenzene	U	1.00	ug/L	0.250	1.00
100-41-4	Ethylbenzene	U	1.00	ug/L	0.250	1.00
75-25-2	Bromoform	U	1.00	ug/L	0.250	1.00
79-34-5	1,1,2,2-Tetrachloroethane	U	1.00	ug/L	0.250	1.00
541-73-1	1,3-Dichlorobenzene	U	1.00	ug/L	0.250	1.00
106-46-7	1,4-Dichlorobenzene	U	1.00	ug/L	0.250	1.00
95-50-1	1,2-Dichlorobenzene	U	1.00	ug/L	0.250	1.00

Outfall 001
Sampled 9/12/08
Grab

Pesticide
Certificate of Analysis
Sample Summary

SDG Number:	215317	Date Collected:	09/08/2008 13:10	Matrix:	WATER
Lab Sample ID:	215317002	Date Received:	09/09/2008 08:50		
Client Sample:	STP Effluent	Client:	BRKL005	Project:	BRKL00504
Client ID:	26067-002	Method:	EPA 608	SOP Ref:	GL-OA-E-041
Batch ID:	794123	Inst:	ECD5A.I	Dilution:	1
Run Date:	09/13/2008 19:27	Analyst:	HXJ1	Inj. Vol:	1 uL
Prep Date:	09/12/2008 21:00	Aliquot:	1000 mL	Final Volume:	.5 mL
Data File:	033f3301.d	Column:	1 CLP-1	Level:	LOW
	033b3301.d		2 CLP-2		

CAS No.	Parmname	Qualifier	Result	Units	MDL/LOD	PQL/LOQ	RDL	Column
319-84-6	alpha-BHC	U	0.002	ug/L	0.0005	0.002		1
58-89-9	gamma-BHC (Lindane)	U	0.002	ug/L	0.0005	0.002		1
319-85-7	beta-BHC	U	0.002	ug/L	0.000845	0.002		1
319-86-8	delta-BHC	U	0.002	ug/L	0.0005	0.002		1
76-44-8	Heptachlor	U	0.002	ug/L	0.000655	0.002		1
309-00-2	Aldrin	U	0.002	ug/L	0.0005	0.002		1
1024-57-3	Heptachlor epoxide	U	0.002	ug/L	0.0005	0.002		1
959-98-8	Endosulfan I	U	0.002	ug/L	0.0005	0.002		1
72-55-9	4,4'-DDE	U	0.004	ug/L	0.0005	0.004		1
60-57-1	Dieldrin	U	0.004	ug/L	0.0005	0.004		1
72-20-8	Endrin	U	0.004	ug/L	0.0005	0.004		1
72-54-8	4,4'-DDD		0.00634	ug/L	0.0005	0.004		2
33213-65-9	Endosulfan II	U	0.004	ug/L	0.0005	0.004		1
7421-93-4	Endrin aldehyde	U	0.004	ug/L	0.0005	0.004		1
50-29-3	4,4'-DDT	U	0.004	ug/L	0.001	0.004		1
1031-07-8	Endosulfan sulfate	U	0.004	ug/L	0.0005	0.004		1
57-74-9	Chlordane (tech.)	U	0.025	ug/L	0.00765	0.025		1
8001-35-2	Toxaphene	U	0.050	ug/L	0.015	0.050		1
12674-11-2	Aroclor-1016	U	0.050	ug/L	0.0167	0.050	0.065	1
11104-28-2	Aroclor-1221	U	0.050	ug/L	0.0167	0.050	0.065	1
11141-16-5	Aroclor-1232	U	0.050	ug/L	0.0167	0.050	0.065	1
53469-21-9	Aroclor-1242	U	0.050	ug/L	0.0167	0.050	0.065	1
12672-29-6	Aroclor-1248	U	0.050	ug/L	0.0167	0.050	0.065	1
11097-69-1	Aroclor-1254	U	0.050	ug/L	0.0167	0.050	0.065	1
11096-82-5	Aroclor-1260	U	0.050	ug/L	0.0167	0.050	0.065	1

Outfall 001
Sampled 9/8/08

Pesticide
Certificate of Analysis
Sample Summary

SDG Number:	215600	Date Collected:	09/10/2008 14:00	Matrix:	WATER
Lab Sample ID:	215600002	Date Received:	09/11/2008 08:45		
Client Sample:	STP Effluent	Client:	BRKL005	Project:	BRKL00504
Client ID:	26249-002	Method:	EPA 608	SOP Ref:	GL-OA-E-041
Batch ID:	795779	Inst:	ECD7A.I	Dilution:	4
Run Date:	09/19/2008 15:57	Analyst:	CAK	Inj. Vol:	1 uL
Prep Date:	09/17/2008 20:00	Aliquot:	1010 mL	Final Volume:	.5 mL
Data File:	008f0801.d	Column:	1 CLP-1	Level:	LOW
	008b0801.d		2 CLP-2		

CAS No.	Parmname	Qualifier	Result	Units	MDL/LOD	PQL/LOQ	RDL	Column
319-84-6	alpha-BHC	U	0.00792	ug/L	0.00198	0.00792		1
58-89-9	gamma-BHC (Lindane)	U	0.00792	ug/L	0.00198	0.00792		1
319-85-7	beta-BHC	U	0.00792	ug/L	0.00335	0.00792		1
319-86-8	delta-BHC		0.132	ug/L	0.00198	0.00792		1
76-44-8	Heptachlor	U	0.00792	ug/L	0.00259	0.00792		1
309-00-2	Aldrin	U	0.00792	ug/L	0.00198	0.00792		1
1024-57-3	Heptachlor epoxide	U	0.00792	ug/L	0.00198	0.00792		1
959-98-8	Endosulfan I	U	0.00792	ug/L	0.00198	0.00792		1
72-55-9	4,4'-DDE	U	0.0158	ug/L	0.00198	0.0158		1
60-57-1	Dieldrin	U	0.0158	ug/L	0.00198	0.0158		1
72-20-8	Endrin	U	0.0158	ug/L	0.00198	0.0158		1
72-54-8	4,4'-DDD	U	0.0158	ug/L	0.00198	0.0158		1
33213-65-9	Endosulfan II	U	0.0158	ug/L	0.00198	0.0158		1
7421-93-4	Endrin aldehyde	U	0.0158	ug/L	0.00198	0.0158		1
50-29-3	4,4'-DDT	U	0.0158	ug/L	0.00396	0.0158		1
1031-07-8	Endosulfan sulfate	U	0.0158	ug/L	0.00198	0.0158		1
57-74-9	Chlordane (tech.)	U	0.099	ug/L	0.0303	0.099		1
8001-35-2	Toxaphene	U	0.198	ug/L	0.0594	0.198		1
12674-11-2	Aroclor-1016	U	0.198	ug/L	0.0659	0.198	0.065	1
11104-28-2	Aroclor-1221	U	0.198	ug/L	0.0659	0.198	0.065	1
11141-16-5	Aroclor-1232	U	0.198	ug/L	0.0659	0.198	0.065	1
53469-21-9	Aroclor-1242	U	0.198	ug/L	0.0659	0.198	0.065	1
12672-29-6	Aroclor-1248	U	0.198	ug/L	0.0659	0.198	0.065	1
11097-69-1	Aroclor-1254	U	0.198	ug/L	0.0659	0.198	0.065	1
11096-82-5	Aroclor-1260	U	0.198	ug/L	0.0659	0.198	0.065	1

Outfall 001
Sampled 9/10/08
Grab

Pesticide
Certificate of Analysis
Sample Summary

SDG Number:	215739	Date Collected:	09/12/2008 13:45	Matrix:	WATER
Lab Sample ID:	215739002	Date Received:	09/13/2008 09:45		
Client Sample:	STP Effluent	Client:	BRKL005	Project:	BRKL00504
Client ID:	26256-002	Method:	EPA 608	SOP Ref:	GL-OA-E-041
Batch ID:	796878	Inst:	ECD7A.I	Dilution:	2
Run Date:	09/24/2008 19:15	Analyst:	CAK	Inj. Vol:	1 uL
Prep Date:	09/19/2008 21:00	Aliquot:	910 mL	Final Volume:	.5 mL
Data File:	017f1701.d	Column:	1 CLP-1	Level:	LOW
	017b1701.d		2 CLP-2		

CAS No.	Parmname	Qualifier	Result	Units	MDL/LOD	PQL/LOQ	RDL	Column
319-84-6	alpha-BHC	U	0.0044	ug/L	0.0011	0.0044		1
58-89-9	gamma-BHC (Lindane)	U	0.0044	ug/L	0.0011	0.0044		1
319-85-7	beta-BHC	U	0.0044	ug/L	0.00186	0.0044		1
319-86-8	delta-BHC		0.134	ug/L	0.0011	0.0044		1
76-44-8	Heptachlor	U	0.0044	ug/L	0.00144	0.0044		1
309-00-2	Aldrin	U	0.0044	ug/L	0.0011	0.0044		1
1024-57-3	Heptachlor epoxide	U	0.0044	ug/L	0.0011	0.0044		1
959-98-8	Endosulfan I	U	0.0044	ug/L	0.0011	0.0044		1
72-55-9	4,4'-DDE	U	0.00879	ug/L	0.0011	0.00879		1
60-57-1	Dieldrin	U	0.00879	ug/L	0.0011	0.00879		1
72-20-8	Endrin	U	0.00879	ug/L	0.0011	0.00879		1
72-54-8	4,4'-DDD	U	0.00879	ug/L	0.0011	0.00879		1
33213-65-9	Endosulfan II	U	0.00879	ug/L	0.0011	0.00879		1
7421-93-4	Endrin aldehyde	U	0.00879	ug/L	0.0011	0.00879		1
50-29-3	4,4'-DDT	U	0.00879	ug/L	0.0022	0.00879		1
1031-07-8	Endosulfan sulfate	U	0.00879	ug/L	0.0011	0.00879		1
57-74-9	Chlordane (tech.)	U	0.0549	ug/L	0.0168	0.0549		1
8001-35-2	Toxaphene	U	0.110	ug/L	0.033	0.110		1
12674-11-2	Aroclor-1016	U	0.110	ug/L	0.0366	0.110	0.065	1
11104-28-2	Aroclor-1221	U	0.110	ug/L	0.0366	0.110	0.065	1
11141-16-5	Aroclor-1232	U	0.110	ug/L	0.0366	0.110	0.065	1
53469-21-9	Aroclor-1242	U	0.110	ug/L	0.0366	0.110	0.065	1
12672-29-6	Aroclor-1248	U	0.110	ug/L	0.0366	0.110	0.065	1
11097-69-1	Aroclor-1254	U	0.110	ug/L	0.0366	0.110	0.065	1
11096-82-5	Aroclor-1260	U	0.110	ug/L	0.0366	0.110	0.065	1

Outfall 001
Sampled 9/12/08
6 rals

METALS
-1-
INORGANICS ANALYSIS DATA PACKAGE

SDG No: 215317 METHOD TYPE: SW846

SAMPLE ID: 215317001 CLIENT ID: 26067-001

CONTRACT: BRKL00504

MATRIX: W DATE RECEIVED 09-SEP-08 LEVEL: Low %SOLIDS:

CAS No	Analyte	Result	Units	C	Qual	M	MDL	DF	Instrument ID	Analytical Run
7429-90-5	Aluminum	68	ug/L	U		P	68	1	OPTIMA1	100208B-1
7440-36-0	Antimony	3	ug/L	U		P	3	1	OPTIMA1	100208B-1
7440-38-2	Arsenic	1.5	ug/L	U		MS	1.5	1	ICPMS5	080929-2
7440-39-3	Barium	14.4	ug/L	B		P	1	1	OPTIMA1	100208B-1
7440-41-7	Beryllium	1	ug/L	U		P	1	1	OPTIMA1	100208B-1
7440-43-9	Cadmium	1	ug/L	U		P	1	1	OPTIMA1	100208B-1
7440-70-2	Calcium	11900	ug/L			P	30	1	OPTIMA1	100208B-1
7440-47-3	Chromium	2	ug/L	U		P	2	1	OPTIMA1	100208B-1
7440-48-4	Cobalt	1	ug/L	U		P	1	1	OPTIMA1	100208B-1
7440-50-8	Copper	33.4	ug/L			P	3	1	OPTIMA1	100208B-1
7439-89-6	Iron	119	ug/L			P	25	1	OPTIMA1	100208B-1
7439-92-1	Lead	1.5	ug/L	B		MS	0.5	1	ICPMS5	080929-2
7439-95-4	Magnesium	3330	ug/L	B		P	85	1	OPTIMA1	100208B-1
7439-96-5	Manganese	3.2	ug/L	B		P	2	1	OPTIMA1	100208B-1
7439-97-6	Mercury	0.030	ug/L	U		AV	0.03	1	MER536	092508W3-3
7440-02-0	Nickel	6.1	ug/L	B		P	1	1	OPTIMA1	100208B-1
7440-09-7	Potassium	3920	ug/L	B	E	P	50	1	OPTIMA1	100208B-1
7782-49-2	Selenium	1	ug/L	U		MS	1	1	ICPMS5	080929-2
7440-22-4	Silver	1.6	ug/L	B		P	1	1	OPTIMA1	100208B-1
7440-23-5	Sodium	28800	ug/L			P	45	1	OPTIMA1	100208B-1
7440-28-0	Thallium	0.980	ug/L	B		MS	0.3	1	ICPMS5	080929-2
7440-31-5	Tin	2.5	ug/L	U		P	2.5	1	OPTIMA1	100208B-1
7440-62-2	Vanadium	4.8	ug/L	B		P	1	1	OPTIMA1	100208B-1
7440-66-6	Zinc	49	ug/L			P	2	1	OPTIMA1	100208B-1

Outfall 001
Sampled 9/8/08
24 hour composite

METALS
-1-
INORGANICS ANALYSIS DATA PACKAGE

SDG No: 215600 METHOD TYPE: SW846

SAMPLE ID: 215600001 CLIENT ID: 26249-001

CONTRACT: BRKL00504

MATRIX: W DATE RECEIVED 11-SEP-08 LEVEL: Low %SOLIDS:

CAS No	Analyte	Result	Units	C	Qual	M	MDL	DF	Instrument ID	Analytical Run
7429-90-5	Aluminum	68	ug/L	U		P	68	1	OPTIMA3	100708A-1
7440-36-0	Antimony	3	ug/L	U		P	3	1	OPTIMA3	100708A-1
7440-38-2	Arsenic	1.7	ug/L	B		MS	1.5	1	ICPMS6	080925-2
7440-39-3	Barium	15.7	ug/L	B		P	1	1	OPTIMA3	100708A-1
7440-41-7	Beryllium	1	ug/L	U		P	1	1	OPTIMA3	100708A-1
7440-43-9	Cadmium	1	ug/L	U		P	1	1	OPTIMA3	100708A-1
7440-70-2	Calcium	12700	ug/L			P	30	1	OPTIMA3	100708A-1
7440-47-3	Chromium	2	ug/L	U		P	2	1	OPTIMA3	100708A-1
7440-48-4	Cobalt	1	ug/L	U		P	1	1	OPTIMA3	100708A-1
7440-50-8	Copper	32.9	ug/L			P	3	1	OPTIMA3	100708A-1
7439-89-6	Iron	81	ug/L	B		P	25	1	OPTIMA3	100708A-1
7439-92-1	Lead	1.9	ug/L	B		MS	0.5	1	ICPMS6	080925-2
7439-95-4	Magnesium	3800	ug/L	B		P	85	1	OPTIMA3	100708A-1
7439-96-5	Manganese	2.4	ug/L	B		P	2	1	OPTIMA3	100708A-1
7439-97-6	Mercury	0.030	ug/L	U		AV	0.03	1	MER536	092608W3-3
7440-02-0	Nickel	4.8	ug/L	B		P	1	1	OPTIMA3	100708A-1
7440-09-7	Potassium	4070	ug/L	B		P	50	1	OPTIMA3	100708A-1
7782-49-2	Selenium	1	ug/L	U		MS	1	1	ICPMS6	080925-2
7440-22-4	Silver	1	ug/L	B		P	1	1	OPTIMA3	100708A-1
7440-23-5	Sodium	31800	ug/L			P	45	1	OPTIMA3	100708A-1
7440-28-0	Thallium	0.960	ug/L	B		MS	0.3	1	ICPMS6	080925-2
7440-31-5	Tin	2.5	ug/L	U		P	2.5	1	OPTIMA3	100708A-1
7440-62-2	Vanadium	5.3	ug/L	B		P	1	1	OPTIMA3	100708A-1
7440-66-6	Zinc	66.7	ug/L			P	2	1	OPTIMA3	100708A-1

Outfall 001
Sampled 9/10/08
24 hour composite

METALS
-1-
INORGANICS ANALYSIS DATA PACKAGE

SDG No: 215739 **METHOD TYPE:** SW846

SAMPLE ID: 215739001 **CLIENT ID:** 26256-001

CONTRACT: BRKL00504

MATRIX: W **DATE RECEIVED** 13-SEP-08 **LEVEL:** Low **%SOLIDS:**

CAS No	Analyte	Result	Units	C	Qual	M	MDL	DF	Instrument ID	Analytical Run
7429-90-5	Aluminum	68	ug/L	U		P	68	1	OPTIMA3	100708A-1
7440-36-0	Antimony	3	ug/L	U		P	3	1	OPTIMA3	100708A-1
7440-38-2	Arsenic	1.9	ug/L	B		MS	1.5	1	ICPMS6	080926-2
7440-39-3	Barium	20.7	ug/L	B		P	1	1	OPTIMA3	100708A-1
7440-41-7	Beryllium	1	ug/L	U		P	1	1	OPTIMA3	100708A-1
7440-43-9	Cadmium	1	ug/L	U		P	1	1	OPTIMA3	100708A-1
7440-70-2	Calcium	14800	ug/L			P	30	1	OPTIMA3	100708A-1
7440-47-3	Chromium	2	ug/L	U		P	2	1	OPTIMA3	100708A-1
7440-48-4	Cobalt	1	ug/L	U		P	1	1	OPTIMA3	100708A-1
7440-50-8	Copper	40.5	ug/L			P	3	1	OPTIMA3	100708A-1
7439-89-6	Iron	119	ug/L			P	25	1	OPTIMA3	100708A-1
7439-92-1	Lead	1.9	ug/L	B		MS	0.5	1	ICPMS6	080926-2
7439-95-4	Magnesium	4350	ug/L	B		P	85	1	OPTIMA3	100708A-1
7439-96-5	Manganese	3.4	ug/L	B		P	2	1	OPTIMA3	100708A-1
7439-97-6	Mercury	0.030	ug/L	U		AV	0.03	1	MER536	092908W5-3
7440-02-0	Nickel	6.2	ug/L	B		P	1	1	OPTIMA3	100708A-1
7440-09-7	Potassium	5220	ug/L			P	50	1	OPTIMA3	100708A-1
7782-49-2	Selenium	1	ug/L	U		MS	1	1	ICPMS6	080926-2
7440-22-4	Silver	1.1	ug/L	B		P	1	1	OPTIMA3	100708A-1
7440-23-5	Sodium	38200	ug/L			P	45	1	OPTIMA3	100708A-1
7440-28-0	Thallium	1.4	ug/L	B		MS	0.3	1	ICPMS6	080926-2
7440-31-5	Tin	2.5	ug/L	U		P	2.5	1	OPTIMA3	100708A-1
7440-62-2	Vanadium	4.3	ug/L	B		P	1	1	OPTIMA3	100708A-1
7440-66-6	Zinc	78.6	ug/L			P	2	1	OPTIMA3	100708A-1

Outfall 001
Sampled 9/12/08
24 hour sample

METALS
–1–
INORGANICS ANALYSIS DATA PACKAGE

SDG No: 215317 **METHOD TYPE:** SW846

SAMPLE ID: 215317003 **CLIENT ID:** 26067–003

CONTRACT: BRKL00504

MATRIX: W **DATE RECEIVED** 09–SEP–08 **LEVEL:** Low **%SOLIDS:**

CAS No	Analyte	Result	Units	C	Qual	M	MDL	DF	Instrument ID	Analytical Run
7429–90–5	Aluminum	103	ug/L	B		P	68	1	OPTIMA1	100208B–1
7440–36–0	Antimony	4	ug/L	B		P	3	1	OPTIMA1	100208B–1
7440–38–2	Arsenic	2.9	ug/L	B		MS	1.5	1	ICPMS5	080929–2
7440–39–3	Barium	52.8	ug/L	B		P	1	1	OPTIMA1	100208B–1
7440–41–7	Beryllium	1	ug/L	U		P	1	1	OPTIMA1	100208B–1
7440–43–9	Cadmium	1	ug/L	U		P	1	1	OPTIMA1	100208B–1
7440–70–2	Calcium	15100	ug/L			P	30	1	OPTIMA1	100208B–1
7440–47–3	Chromium	2	ug/L	U		P	2	1	OPTIMA1	100208B–1
7440–48–4	Cobalt	1	ug/L	U		P	1	1	OPTIMA1	100208B–1
7440–50–8	Copper	112	ug/L			P	3	1	OPTIMA1	100208B–1
7439–89–6	Iron	1110	ug/L			P	25	1	OPTIMA1	100208B–1
7439–92–1	Lead	11.9	ug/L			MS	0.5	1	ICPMS5	080929–2
7439–95–4	Magnesium	5030	ug/L			P	85	1	OPTIMA1	100208B–1
7439–96–5	Manganese	49.5	ug/L			P	2	1	OPTIMA1	100208B–1
7439–97–6	Mercury	0.030	ug/L	U		AV	0.03	1	MER536	092508W3–3
7440–02–0	Nickel	9.5	ug/L	B		P	1	1	OPTIMA1	100208B–1
7440–09–7	Potassium	4400	ug/L	B	E	P	50	1	OPTIMA1	100208B–1
7782–49–2	Selenium	1	ug/L	U		MS	1	1	ICPMS5	080929–2
7440–22–4	Silver	1	ug/L	U		P	1	1	OPTIMA1	100208B–1
7440–23–5	Sodium	43000	ug/L			P	45	1	OPTIMA1	100208B–1
7440–28–0	Thallium	0.30	ug/L	U		MS	0.3	1	ICPMS5	080929–2
7440–31–5	Tin	2.5	ug/L	U		P	2.5	1	OPTIMA1	100208B–1
7440–62–2	Vanadium	3.9	ug/L	B		P	1	1	OPTIMA1	100208B–1
7440–66–6	Zinc	107	ug/L			P	2	1	OPTIMA1	100208B–1

STP Influent
Sampled 9/8/08
24 hour composite

METALS
-1-
INORGANICS ANALYSIS DATA PACKAGE

SDG No: 215600 METHOD TYPE: SW846

SAMPLE ID: 215600003 CLIENT ID: 26249-003

CONTRACT: BRKL00504

MATRIX: W DATE RECEIVED 11-SEP-08 LEVEL: Low %SOLIDS:

CAS No	Analyte	Result	Units	C	Qual	M	MDL	DF	Instrument ID	Analytical Run
7429-90-5	Aluminum	176	ug/L	B		P	68	1	OPTIMA3	100708A-1
7440-36-0	Antimony	3	ug/L	U		P	3	1	OPTIMA3	100708A-1
7440-38-2	Arsenic	3.5	ug/L	B		MS	1.5	1	ICPMS6	080925-2
7440-39-3	Barium	49.9	ug/L	B		P	1	1	OPTIMA3	100708A-1
7440-41-7	Beryllium	1	ug/L	U		P	1	1	OPTIMA3	100708A-1
7440-43-9	Cadmium	1	ug/L	U		P	1	1	OPTIMA3	100708A-1
7440-70-2	Calcium	13100	ug/L			P	30	1	OPTIMA3	100708A-1
7440-47-3	Chromium	2	ug/L	U		P	2	1	OPTIMA3	100708A-1
7440-48-4	Cobalt	1.1	ug/L	B		P	1	1	OPTIMA3	100708A-1
7440-50-8	Copper	139	ug/L			P	3	1	OPTIMA3	100708A-1
7439-89-6	Iron	1060	ug/L			P	25	1	OPTIMA3	100708A-1
7439-92-1	Lead	13	ug/L			MS	0.5	1	ICPMS6	080925-2
7439-95-4	Magnesium	4210	ug/L	B		P	85	1	OPTIMA3	100708A-1
7439-96-5	Manganese	105	ug/L			P	2	1	OPTIMA3	100708A-1
7439-97-6	Mercury	0.070	ug/L	B		AV	0.03	1	MER536	092608W3-3
7440-02-0	Nickel	7.5	ug/L	B		P	1	1	OPTIMA3	100708A-1
7440-09-7	Potassium	6480	ug/L			P	50	1	OPTIMA3	100708A-1
7782-49-2	Selenium	1	ug/L	U		MS	1	1	ICPMS6	080925-2
7440-22-4	Silver	1	ug/L	U		P	1	1	OPTIMA3	100708A-1
7440-23-5	Sodium	42400	ug/L			P	45	1	OPTIMA3	100708A-1
7440-28-0	Thallium	0.30	ug/L	U		MS	0.3	1	ICPMS6	080925-2
7440-31-5	Tin	2.5	ug/L	U		P	2.5	1	OPTIMA3	100708A-1
7440-62-2	Vanadium	4.7	ug/L	B		P	1	1	OPTIMA3	100708A-1
7440-66-6	Zinc	109	ug/L			P	2	1	OPTIMA3	100708A-1

STP Influent
~~Outfall 02~~
Sampled 9/10/08
24 hour composite

METALS
-1-
INORGANICS ANALYSIS DATA PACKAGE

SDG No: 215739 **METHOD TYPE:** SW846

SAMPLE ID: 215739003 **CLIENT ID:** 26256-003

CONTRACT: BRKL00504

MATRIX: W **DATE RECEIVED** 13-SEP-08 **LEVEL:** Low **%SOLIDS:**

CAS No	Analyte	Result	Units	C	Qual	M	MDL	DF	Instrument ID	Analytical Run
7429-90-5	Aluminum	128	ug/L	B		P	68	1	OPTIMA3	100708A-1
7440-36-0	Antimony	3	ug/L	U		P	3	1	OPTIMA3	100708A-1
7440-38-2	Arsenic	3.1	ug/L	B		MS	1.5	1	ICPMS6	080926-2
7440-39-3	Barium	49	ug/L	B		P	1	1	OPTIMA3	100708A-1
7440-41-7	Beryllium	1	ug/L	U		P	1	1	OPTIMA3	100708A-1
7440-43-9	Cadmium	1	ug/L	U		P	1	1	OPTIMA3	100708A-1
7440-70-2	Calcium	14000	ug/L			P	30	1	OPTIMA3	100708A-1
7440-47-3	Chromium	2	ug/L	U		P	2	1	OPTIMA3	100708A-1
7440-48-4	Cobalt	1	ug/L	U		P	1	1	OPTIMA3	100708A-1
7440-50-8	Copper	90.8	ug/L			P	3	1	OPTIMA3	100708A-1
7439-89-6	Iron	862	ug/L			P	25	1	OPTIMA3	100708A-1
7439-92-1	Lead	6.6	ug/L	B		MS	0.5	1	ICPMS6	080926-2
7439-95-4	Magnesium	4620	ug/L	B		P	85	1	OPTIMA3	100708A-1
7439-96-5	Manganese	77.2	ug/L			P	2	1	OPTIMA3	100708A-1
7439-97-6	Mercury	0.030	ug/L	U		AV	0.03	1	MER536	092908W5-3
7440-02-0	Nickel	4.3	ug/L	B		P	1	1	OPTIMA3	100708A-1
7440-09-7	Potassium	6730	ug/L			P	50	1	OPTIMA3	100708A-1
7782-49-2	Selenium	1	ug/L	U		MS	1	1	ICPMS6	080926-2
7440-22-4	Silver	1	ug/L	U		P	1	1	OPTIMA3	100708A-1
7440-23-5	Sodium	40900	ug/L			P	45	1	OPTIMA3	100708A-1
7440-28-0	Thallium	0.30	ug/L	U		MS	0.3	1	ICPMS6	080926-2
7440-31-5	Tin	2.5	ug/L	U		P	2.5	1	OPTIMA3	100708A-1
7440-62-2	Vanadium	2.4	ug/L	B		P	1	1	OPTIMA3	100708A-1
7440-66-6	Zinc	71.9	ug/L			P	2	1	OPTIMA3	100708A-1

STP Influent
Sampled 9/12/08
24 hour/sample
composite

GEL LABORATORIES LLC

2040 Savage Road Charleston SC 29407 - (843) 556-8171 - www.gel.com

Certificate of Analysis

Company : Brookhaven National Laboratory
Address : Building 51
Upton, New York 11973--5000

Report Date: September 23, 2008

Contact: Mr. John Burke
Project: **ES SPDES--Summary**

Client Sample ID:	26067-001	Project:	BRKL00504
Sample ID:	215317001	Client ID:	BRKL005
Matrix:	Water	COC:	26067
Collect Date:	08-SEP-08 11:00	Samp Recv.:	
Receive Date:	09-SEP-08 08:50	Client Desc.:	STP Effluent
Collector:	Client		

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
Nutrient Analysis Federal										
EPA 365.4 Phosphorus, Total in "As Received"										
Phosphorus, Total as P		1.31	0.024	0.050	mg/L	1	AXH3 09/12/08	1403	792740	1
Solids Analysis Federal										
EPA 160.2 Total Suspended Liq "As Received"										
Total Suspended Solids	U	1.00	1.14	5.00	mg/L	1	NXM 09/10/08	1518	793116	2

The following Prep Methods were performed

Method	Description	Analyst	Date	Time	Prep Batch
EPA 365.4 Prep	EPA 365.4 Phosphorus, Total in liquid-Fe	SXK1	09/11/08	1323	792739

The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 365.4	
2	EPA 160.2	

Outfall 001
Sampled 9/8/08
24 hour composite

GEL LABORATORIES LLC
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Certificate of Analysis

Company : Brookhaven National Laboratory
Address : Building 51
Upton, New York 11973--5000

Report Date: September 29, 2008

Contact: Mr. John Burke
Project: **ES SPDES--Summary**

Client Sample ID:	26249-001	Project:	BRKL00504
Sample ID:	215600001	Client ID:	BRKL005
Matrix:	Water	COC:	26249
Collect Date:	10-SEP-08 11:15	Samp Recv.:	
Receive Date:	11-SEP-08 08:45	Client Desc.:	STP Effluent
Collector:	Client		

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
Nutrient Analysis Federal										
EPA 365.4 Phosphorus, Total in "As Received"										
Phosphorus, Total as P		1.15	0.024	0.050	mg/L	1	AXH3 09/17/08	0914	794031	1
Solids Analysis Federal										
EPA 160.2 Total Suspended Liq "As Received"										
Total Suspended Solids	U	-0.20	1.14	5.00	mg/L	1	NXM 09/12/08	1107	794072	2

The following Prep Methods were performed

Method	Description	Analyst	Date	Time	Prep Batch
EPA 365.4 Prep	EPA 365.4 Phosphorus, Total in liquid-Fe	SXK1	09/15/08	1359	794030

The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 365.4	
2	EPA 160.2	

Outfall 001
Sampled 9/10/08
24 hour Composite

GEL LABORATORIES LLC
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Certificate of Analysis

Company : Brookhaven National Laboratory
Address : Building 51
Upton, New York 11973--5000

Report Date: October 7, 2008

Contact: Mr. John Burke
Project: **ES SPDES--Summary**

Client Sample ID:	26256-001	Project:	BRKL00504
Sample ID:	215739001	Client ID:	BRKL005
Matrix:	Water	COC:	26256
Collect Date:	12-SEP-08 10:45	Samp Recv.:	
Receive Date:	13-SEP-08 09:45	Client Desc.:	STP Effluent
Collector:	Client		

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
Nutrient Analysis Federal										
EPA 365.4 Phosphorus, Total in "As Received"										
Phosphorus, Total as P		1.16	0.024	0.050	mg/L	1	AXH3 09/24/08	1129	794764	1
Solids Analysis Federal										
EPA 160.2 Total Suspended Liq "As Received"										
Total Suspended Solids	U	0.300	0.570	2.50	mg/L	1	NXM 09/16/08	1238	795342	2

The following Prep Methods were performed

Method	Description	Analyst	Date	Time	Prep Batch
EPA 365.4 Prep	EPA 365.4 Phosphorus, Total in liquid-Fe	SXK1	09/17/08	1344	794763

The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 365.4	
2	EPA 160.2	

Outfall 001
Sampled 9/12/08
24 hour composite

GEL LABORATORIES LLC

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Certificate of Analysis

Company : Brookhaven National Laboratory
Address : Building 51
Upton, New York 11973--5000

Report Date: September 23, 2008

Contact: Mr. John Burke
Project: **ES SPDES--Summary**

Client Sample ID:	26067-002	Project:	BRKL00504
Sample ID:	215317002	Client ID:	BRKL005
Matrix:	Water	COC:	26067
Collect Date:	08-SEP-08 13:10	Samp Recv.:	
Receive Date:	09-SEP-08 08:50	Client Desc.:	STP Effluent
Collector:	Client		

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
Flow Injection Analysis Federal										
SW9012A Cyanide, Total Federal "As Received"										
Cyanide, Total	U	0.422	1.50	5.00	ug/L	1	KLP1 09/11/08	1417	792955	1

The following Prep Methods were performed

Method	Description	Analyst	Date	Time	Prep Batch
SW846 9010B Prep	SW846 9010B Prep	AXS5	09/10/08	1106	792954

The following Analytical Methods were performed

Method	Description	Analyst Comments
1	SW846 9012A	

Outfall 001
Sampled 9/8/08
Grab

GEL LABORATORIES LLC
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Certificate of Analysis

Company : Brookhaven National Laboratory
Address : Building 51
Upton, New York 11973--5000

Report Date: September 29, 2008

Contact: Mr. John Burke
Project: **ES SPDES--Summary**

Client Sample ID:	26249-002	Project:	BRKL00504
Sample ID:	215600002	Client ID:	BRKL005
Matrix:	Water	COC:	26249
Collect Date:	10-SEP-08 14:00	Samp Recv.:	
Receive Date:	11-SEP-08 08:45	Client Desc.:	STP Effluent
Collector:	Client		

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
Flow Injection Analysis Federal										
SW9012A Cyanide, Total Federal "As Received"										
Cyanide, Total	U	0.357	1.50	5.00	ug/L	1	KLP1 09/15/08	1522	794804	1

The following Prep Methods were performed

Method	Description	Analyst	Date	Time	Prep Batch
SW846 9010B Prep	SW846 9010B Prep	AXS5	09/15/08	1229	794795

The following Analytical Methods were performed

Method	Description	Analyst Comments
1	SW846 9012A	

Outfall 001
Sampled 9/10/08
Grab

Certificate of Analysis

Company : Brookhaven National Laboratory
Address : Building 51
Upton, New York 11973--5000

Report Date: October 7, 2008

Contact: Mr. John Burke
Project: **ES SPDES--Summary**

Client Sample ID:	26256-002	Project:	BRKL00504
Sample ID:	215739002	Client ID:	BRKL005
Matrix:	Water	COC:	26256
Collect Date:	12-SEP-08 13:45	Samp Recv.:	
Receive Date:	13-SEP-08 09:45	Client Desc.:	STP Effluent
Collector:	Client		

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
Flow Injection Analysis Federal										
SW9012A Cyanide, Total Federal "As Received"										
Cyanide, Total	U	-0.911	1.50	5.00	ug/L	1	KLP1 09/16/08	1440	794808	1

The following Prep Methods were performed

Method	Description	Analyst	Date	Time	Prep Batch
SW846 9010B Prep	SW846 9010B Prep	AXS5	09/15/08	1431	794806

The following Analytical Methods were performed

Method	Description	Analyst Comments
1	SW846 9012A	

Outfall 001
Sampled 9/12/08
Grab

GEL LABORATORIES LLC
2040 Savage Road Charleston SC 29407 - (843) 556-8171 - www.gel.com

Certificate of Analysis

Company : Brookhaven National Laboratory
Address : Building 51
Upton, New York 11973--5000

Report Date: September 23, 2008

Contact: Mr. John Burke
Project: **ES SPDES--Summary**

Client Sample ID:	26067-003	Project:	BRKL00504
Sample ID:	215317003	Client ID:	BRKL005
Matrix:	Water	COC:	26067
Collect Date:	08-SEP-08 11:50	Samp Recv.:	
Receive Date:	09-SEP-08 08:50	Client Desc.:	STP Influent
Collector:	Client		

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
Solids Analysis Federal										
EPA 160.2 Total Suspended Liq "As Received"										
Total Suspended Solids		24.5	1.61	7.04	mg/L	1	NXM 09/10/08	1518	793116	1

The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 160.2	

STP Influent
Sampled 9/8/08
24 hour Composite

GEL LABORATORIES LLC
2040 Savage Road Charleston SC 29407 - (843) 556-8171 - www.gel.com

Certificate of Analysis

Company : Brookhaven National Laboratory
Address : Building 51
Upton, New York 11973--5000

Report Date: September 29, 2008

Contact: Mr. John Burke
Project: **ES SPDES--Summary**

Client Sample ID:	26249-003	Project:	BRKL00504
Sample ID:	215600003	Client ID:	BRKL005
Matrix:	Water	COC:	26249
Collect Date:	10-SEP-08 11:30	Samp Recv.:	
Receive Date:	11-SEP-08 08:45	Client Desc.:	STP Influent
Collector:	Client		

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
Solids Analysis Federal										
EPA 160.2 Total Suspended Liq "As Received"										
Total Suspended Solids		40.4	2.28	10.0	mg/L	1	NXM 09/12/08	1107	794072	1

The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 160.2	

STP Influent
Sampled 9/10/08
24 hour Composite

GEL LABORATORIES LLC
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Certificate of Analysis

Company : Brookhaven National Laboratory
Address : Building 51
Upton, New York 11973--5000

Report Date: October 7, 2008

Contact: Mr. John Burke
Project: **ES SPDES--Summary**

Client Sample ID:	26256-003	Project:	BRKL00504
Sample ID:	215739003	Client ID:	BRKL005
Matrix:	Water	COC:	26256
Collect Date:	12-SEP-08 11:00	Samp Recv.:	
Receive Date:	13-SEP-08 09:45	Client Desc.:	STP Influent
Collector:	Client		

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
Solids Analysis Federal										
EPA 160.2 Total Suspended Liq "As Received"										
Total Suspended Solids		39.3	2.07	9.09	mg/L	1	NXM 09/16/08	1238	795342	1

The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 160.2	

STP Influent
Sampled 9/12/08
24 hour composite

ATTACHMENT III

BROOKHAVEN NATIONAL LABORATORY

SPDES PERMIT NO. NY0005835

DISCHARGE MONITORING REPORT FOR SEPTEMBER 2008

ANALYTICAL RESULTS FROM H2M LABS INC.,

GENERAL ENGINEERING LABORATORIES, LLC,

AND CHEMTEX, ENVIRONMENTAL LABORATORY, INC.

FOR REGULATORY COMPLIANCE SAMPLES COLLECTED FROM

OUTFALLS 001A, 001B, 001F, 002, 002B, 005, 006A, 006B, 008, AND 010

Semi-Volatile
Certificate of Analysis
Sample Summary

SDG Number:	213338	Date Collected:	08/06/2008 13:45	Matrix:	WATER
Lab Sample ID:	213338001	Date Received:	08/07/2008 09:00		
Client Sample:	535-PCB	Client:	BRKL005	Project:	BRKL00504
Client ID:	26158-001	Method:	EPA 625	SOP Ref:	GL-OA-E-009
Batch ID:	782533	Inst:	MSD8.I	Dilution:	1
Run Date:	08/12/2008 13:42	Analyst:	NAG1	Inj. Vol:	.5 uL
Prep Date:	08/08/2008 18:00	Aliquot:	1000 mL	Final Volume:	1 mL
Data File:	s8h1149.d	Column:	J&W DB-5MS	Level:	LOW

CAS No.	Parmname	Qualifier	Result	Units	MDL/LOD	PQL/LOQ	RDL
62-75-9	N-Methyl-N-nitrosomethylamine	U	10.0	ug/L	2.00	10.0	10.0
108-95-2	Phenol	U	10.0	ug/L	1.00	10.0	10.0
95-57-8	2-Chlorophenol	U	10.0	ug/L	2.00	10.0	10.0
106-46-7	1,4-Dichlorobenzene	U	10.0	ug/L	2.00	10.0	10.0
621-64-7	N-Nitrosodipropylamine	U	10.0	ug/L	2.00	10.0	10.0
59-50-7	4-Chloro-3-methylphenol	U	10.0	ug/L	2.00	10.0	10.0
83-32-9	Acenaphthene	U	1.00	ug/L	0.310	1.00	10.0
121-14-2	2,4-Dinitrotoluene	U	10.0	ug/L	2.00	10.0	10.0
100-02-7	4-Nitrophenol	U	10.0	ug/L	2.00	10.0	50.0
87-86-5	Pentachlorophenol	U	10.0	ug/L	2.00	10.0	50.0
129-00-0	Pyrene	U	1.00	ug/L	0.300	1.00	10.0
111-44-4	bis(2-Chloroethyl) ether	U	10.0	ug/L	2.00	10.0	10.0
541-73-1	1,3-Dichlorobenzene	U	10.0	ug/L	2.00	10.0	10.0
95-50-1	1,2-Dichlorobenzene	U	10.0	ug/L	2.00	10.0	10.0
108-60-1	bis(2-Chloroisopropyl)ether	U	10.0	ug/L	2.00	10.0	10.0
67-72-1	Hexachloroethane	U	10.0	ug/L	2.00	10.0	10.0
98-95-3	Nitrobenzene	U	10.0	ug/L	3.00	10.0	10.0
78-59-1	Isophorone	U	10.0	ug/L	2.00	10.0	10.0
88-75-5	2-Nitrophenol	U	10.0	ug/L	2.00	10.0	10.0
105-67-9	2,4-Dimethylphenol	U	10.0	ug/L	2.00	10.0	10.0
111-91-1	bis(2-Chloroethoxy)methane	U	10.0	ug/L	3.00	10.0	10.0
120-83-2	2,4-Dichlorophenol	U	10.0	ug/L	2.00	10.0	10.0
91-20-3	Naphthalene	U	1.00	ug/L	0.300	1.00	10.0
87-68-3	Hexachlorobutadiene	U	10.0	ug/L	2.00	10.0	10.0
77-47-4	Hexachlorocyclopentadiene	U	10.0	ug/L	2.00	10.0	10.0
88-06-2	2,4,6-Trichlorophenol	U	10.0	ug/L	2.00	10.0	10.0
91-58-7	2-Chloronaphthalene	U	1.00	ug/L	0.350	1.00	10.0
131-11-3	Dimethylphthalate	U	10.0	ug/L	2.00	10.0	10.0
606-20-2	2,6-Dinitrotoluene	U	10.0	ug/L	2.00	10.0	10.0
208-96-8	Acenaphthylene	U	1.00	ug/L	0.200	1.00	10.0
51-28-5	2,4-Dinitrophenol	U	20.0	ug/L	10.0	20.0	50.0
84-66-2	Diethylphthalate	U	10.0	ug/L	2.00	10.0	10.0
86-73-7	Fluorene	U	1.00	ug/L	0.200	1.00	10.0
7005-72-3	4-Chlorophenylphenylether	U	10.0	ug/L	2.00	10.0	10.0
534-52-1	2-Methyl-4,6-dinitrophenol	U	10.0	ug/L	3.00	10.0	50.0
122-39-4	Diphenylamine	U	10.0	ug/L	3.00	10.0	10.0
101-55-3	4-Bromophenylphenylether	U	10.0	ug/L	2.00	10.0	10.0
118-74-1	Hexachlorobenzene	U	10.0	ug/L	2.00	10.0	10.0

Building 535 PCB
8/6/08

Semi-Volatile
Certificate of Analysis
Sample Summary

SDG Number:	213338	Date Collected:	08/06/2008 13:45	Matrix:	WATER
Lab Sample ID:	213338001	Date Received:	08/07/2008 09:00		
Client Sample:	535-PCB	Client:	BRKL005	Project:	BRKL00504
Client ID:	26158-001	Method:	EPA 625	SOP Ref:	GL-OA-E-009
Batch ID:	782533	Inst:	MSD8.I	Dilution:	1
Run Date:	08/12/2008 13:42	Analyst:	NAG1	Inj. Vol:	.5 uL
Prep Date:	08/08/2008 18:00	Aliquot:	1000 mL	Final Volume:	1 mL
Data File:	s8h1149.d	Column:	J&W DB-5MS	Level:	LOW

CAS No.	Parmname	Qualifier	Result	Units	MDL/LOD	PQL/LOQ	RDL
85-01-8	Phenanthrene	U	1.00	ug/L	0.200	1.00	10.0
120-12-7	Anthracene	U	1.00	ug/L	0.200	1.00	10.0
84-74-2	Di-n-butylphthalate	U	10.0	ug/L	2.00	10.0	10.0
206-44-0	Fluoranthene	U	1.00	ug/L	0.200	1.00	10.0
85-68-7	Butylbenzylphthalate	U	10.0	ug/L	2.00	10.0	10.0
56-55-3	Benzo(a)anthracene	U	1.00	ug/L	0.200	1.00	10.0
91-94-1	3,3'-Dichlorobenzidine	U	10.0	ug/L	1.00	10.0	40.0
218-01-9	Chrysene	U	1.00	ug/L	0.200	1.00	10.0
117-81-7	bis(2-Ethylhexyl)phthalate	J	4.35	ug/L	2.00	10.0	10.0
117-84-0	Di-n-octylphthalate	U	10.0	ug/L	3.00	10.0	10.0
205-99-2	Benzo(b)fluoranthene	U	1.00	ug/L	0.200	1.00	10.0
207-08-9	Benzo(k)fluoranthene	U	1.00	ug/L	0.200	1.00	10.0
50-32-8	Benzo(a)pyrene	U	1.00	ug/L	0.200	1.00	10.0
193-39-5	Indeno(1,2,3-cd)pyrene	U	1.00	ug/L	0.200	1.00	10.0
53-70-3	Dibenzo(a,h)anthracene	U	1.00	ug/L	0.200	1.00	10.0
191-24-2	Benzo(ghi)perylene	U	1.00	ug/L	0.200	1.00	10.0
120-82-1	1,2,4-Trichlorobenzene	U	10.0	ug/L	2.00	10.0	10.0

METALS
-1-
INORGANICS ANALYSIS DATA PACKAGE

SDG No: 213338 METHOD TYPE: SW846

SAMPLE ID: 213338001 CLIENT ID: 26158-001

CONTRACT: BRKL00504

MATRIX: W DATE RECEIVED 07-AUG-08 LEVEL: Low %SOLIDS:

CAS No	Analyte	Result	Units	C	Qual	M	MDL	DF	Instrument ID	Analytical Run
7429-90-5	Aluminum	68	ug/L	U		P	68	1	OPTIMA1	082608-1
7440-36-0	Antimony	3	ug/L	U		P	3	1	OPTIMA1	082608-1
7440-38-2	Arsenic	1.5	ug/L	U		MS	1.5	1	ICPMS6	080902-2
7440-39-3	Barium	20.1	ug/L	B		P	1	1	OPTIMA1	082608-1
7440-41-7	Beryllium	1	ug/L	U		P	1	1	OPTIMA1	082608-1
7440-43-9	Cadmium	1	ug/L	U		P	1	1	OPTIMA1	082608-1
7440-70-2	Calcium	8140	ug/L			P	30	1	OPTIMA1	082608-1
7440-47-3	Chromium	2	ug/L	U		P	2	1	OPTIMA1	082608-1
7440-48-4	Cobalt	1	ug/L	U		P	1	1	OPTIMA1	082608-1
7440-50-8	Copper	377	ug/L			P	3	1	OPTIMA1	082608-1
7439-89-6	Iron	136	ug/L			P	25	1	OPTIMA1	082608-1
7439-92-1	Lead	8.7	ug/L	B		MS	0.5	1	ICPMS6	080902-2
7439-95-4	Magnesium	2550	ug/L	B		P	85	1	OPTIMA1	082608-1
7439-96-5	Manganese	34.1	ug/L			P	2	1	OPTIMA1	082608-1
7439-97-6	Mercury	0.030	ug/L	U		AV	0.03	1	MER536	082208W1-3
7440-02-0	Nickel	12	ug/L	B		P	1	1	OPTIMA1	082608-1
7440-09-7	Potassium	1010	ug/L	B		P	50	1	OPTIMA1	082608-1
7782-49-2	Selenium	1	ug/L	U		MS	1	1	ICPMS6	080902-2
7440-22-4	Silver	1	ug/L	U		P	1	1	OPTIMA1	082608-1
7440-23-5	Sodium	19500	ug/L			P	45	1	OPTIMA1	082608-1
7440-28-0	Thallium	0.590	ug/L	B		MS	0.3	1	ICPMS6	080902-2
7440-31-5	Tin	164	ug/L			P	2.5	1	OPTIMA1	082608-1
7440-62-2	Vanadium	1	ug/L	U		P	1	1	OPTIMA1	082608-1
7440-66-6	Zinc	61.3	ug/L			P	2	1	OPTIMA1	082608-1

Building 535 PCB
Sampled 8/6/08

Semi-Volatile
Certificate of Analysis
Sample Summary

SDG Number:	213254	Date Collected:	08/05/2008 11:00	Matrix:	WATER
Lab Sample ID:	213254001	Date Received:	08/06/2008 09:30		
Client Sample:	498-CF	Client:	BRKL005	Project:	BRKL00504
Client ID:	26146-001	Method:	EPA 625	SOP Ref:	GL-OA-E-009
Batch ID:	782533	Inst:	MSD8.I	Dilution:	1
Run Date:	08/12/2008 12:14	Analyst:	NAG1	Inj. Vol:	.5 uL
Prep Date:	08/08/2008 18:00	Aliquot:	920 mL	Final Volume:	1 mL
Data File:	s8h1145.d	Column:	J&W DB-5MS	Level:	LOW

CAS No.	Parmname	Qualifier	Result	Units	MDL/LOD	PQL/LOQ	RDL
62-75-9	N-Methyl-N-nitrosomethylamine	U	10.9	ug/L	2.17	10.9	10.0
108-95-2	Phenol	U	10.9	ug/L	1.09	10.9	10.0
95-57-8	2-Chlorophenol	U	10.9	ug/L	2.17	10.9	10.0
106-46-7	1,4-Dichlorobenzene	U	10.9	ug/L	2.17	10.9	10.0
621-64-7	N-Nitrosodipropylamine	U	10.9	ug/L	2.17	10.9	10.0
59-50-7	4-Chloro-3-methylphenol	U	10.9	ug/L	2.17	10.9	10.0
83-32-9	Acenaphthene	U	1.09	ug/L	0.337	1.09	10.0
121-14-2	2,4-Dinitrotoluene	U	10.9	ug/L	2.17	10.9	10.0
100-02-7	4-Nitrophenol	U	10.9	ug/L	2.17	10.9	50.0
87-86-5	Pentachlorophenol	U	10.9	ug/L	2.17	10.9	50.0
129-00-0	Pyrene	U	1.09	ug/L	0.326	1.09	10.0
111-44-4	bis(2-Chloroethyl) ether	U	10.9	ug/L	2.17	10.9	10.0
541-73-1	1,3-Dichlorobenzene	U	10.9	ug/L	2.17	10.9	10.0
95-50-1	1,2-Dichlorobenzene	U	10.9	ug/L	2.17	10.9	10.0
108-60-1	bis(2-Chloroisopropyl)ether	U	10.9	ug/L	2.17	10.9	10.0
67-72-1	Hexachloroethane	U	10.9	ug/L	2.17	10.9	10.0
98-95-3	Nitrobenzene	U	10.9	ug/L	3.26	10.9	10.0
78-59-1	Isophorone	U	10.9	ug/L	2.17	10.9	10.0
88-75-5	2-Nitrophenol	U	10.9	ug/L	2.17	10.9	10.0
105-67-9	2,4-Dimethylphenol	U	10.9	ug/L	2.17	10.9	10.0
111-91-1	bis(2-Chloroethoxy)methane	U	10.9	ug/L	3.26	10.9	10.0
120-83-2	2,4-Dichlorophenol	U	10.9	ug/L	2.17	10.9	10.0
91-20-3	Naphthalene	U	1.09	ug/L	0.326	1.09	10.0
87-68-3	Hexachlorobutadiene	U	10.9	ug/L	2.17	10.9	10.0
77-47-4	Hexachlorocyclopentadiene	U	10.9	ug/L	2.17	10.9	10.0
88-06-2	2,4,6-Trichlorophenol	U	10.9	ug/L	2.17	10.9	10.0
91-58-7	2-Chloronaphthalene	U	1.09	ug/L	0.380	1.09	10.0
131-11-3	Dimethylphthalate	U	10.9	ug/L	2.17	10.9	10.0
606-20-2	2,6-Dinitrotoluene	U	10.9	ug/L	2.17	10.9	10.0
208-96-8	Acenaphthylene	U	1.09	ug/L	0.217	1.09	10.0
51-28-5	2,4-Dinitrophenol	U	21.7	ug/L	10.9	21.7	50.0
84-66-2	Diethylphthalate	U	10.9	ug/L	2.17	10.9	10.0
86-73-7	Fluorene	U	1.09	ug/L	0.217	1.09	10.0
7005-72-3	4-Chlorophenylphenylether	U	10.9	ug/L	2.17	10.9	10.0
534-52-1	2-Methyl-4,6-dinitrophenol	U	10.9	ug/L	3.26	10.9	50.0
122-39-4	Diphenylamine	U	10.9	ug/L	3.26	10.9	10.0
101-55-3	4-Bromophenylphenylether	U	10.9	ug/L	2.17	10.9	10.0
118-74-1	Hexachlorobenzene	U	10.9	ug/L	2.17	10.9	10.0

Building 498 Cleaning Facility
Sampled 8/5/08

Semi-Volatile
Certificate of Analysis
Sample Summary

SDG Number:	213254	Date Collected:	08/05/2008 11:00	Matrix:	WATER
Lab Sample ID:	213254001	Date Received:	08/06/2008 09:30		
Client Sample:	498-CF	Client:	BRKL005	Project:	BRKL00504
Client ID:	26146-001	Method:	EPA 625	SOP Ref:	GL-OA-E-009
Batch ID:	782533	Inst:	MSD8.I	Dilution:	1
Run Date:	08/12/2008 12:14	Analyst:	NAG1	Inj. Vol:	.5 uL
Prep Date:	08/08/2008 18:00	Aliquot:	920 mL	Final Volume:	1 mL
Data File:	s8h1145.d	Column:	J&W DB-5MS	Level:	LOW

CAS No.	Parmname	Qualifier	Result	Units	MDL/LOD	PQL/LOQ	RDL
85-01-8	Phenanthrene	U	1.09	ug/L	0.217	1.09	10.0
120-12-7	Anthracene	U	1.09	ug/L	0.217	1.09	10.0
84-74-2	Di-n-butylphthalate	U	10.9	ug/L	2.17	10.9	10.0
206-44-0	Fluoranthene	U	1.09	ug/L	0.217	1.09	10.0
85-68-7	Butylbenzylphthalate	U	10.9	ug/L	2.17	10.9	10.0
56-55-3	Benzo(a)anthracene	U	1.09	ug/L	0.217	1.09	10.0
91-94-1	3,3'-Dichlorobenzidine	U	10.9	ug/L	1.09	10.9	40.0
218-01-9	Chrysene	U	1.09	ug/L	0.217	1.09	10.0
117-81-7	bis(2-Ethylhexyl)phthalate	J	2.95	ug/L	2.17	10.9	10.0
117-84-0	Di-n-octylphthalate	U	10.9	ug/L	3.26	10.9	10.0
205-99-2	Benzo(b)fluoranthene	U	1.09	ug/L	0.217	1.09	10.0
207-08-9	Benzo(k)fluoranthene	U	1.09	ug/L	0.217	1.09	10.0
50-32-8	Benzo(a)pyrene	U	1.09	ug/L	0.217	1.09	10.0
193-39-5	Indeno(1,2,3-cd)pyrene	U	1.09	ug/L	0.217	1.09	10.0
53-70-3	Dibenzo(a,h)anthracene	U	1.09	ug/L	0.217	1.09	10.0
191-24-2	Benzo(ghi)perylene	U	1.09	ug/L	0.217	1.09	10.0
120-82-1	1,2,4-Trichlorobenzene	U	10.9	ug/L	2.17	10.9	10.0

METALS
-1-
INORGANICS ANALYSIS DATA PACKAGE

SDG No: 213254 METHOD TYPE: SW846

SAMPLE ID: 213254001 CLIENT ID: 26146-001

CONTRACT: BRKL00504

MATRIX: W DATE RECEIVED 06-AUG-08 LEVEL: Low %SOLIDS:

CAS No	Analyte	Result	Units	C	Qual	M	MDL	DF	Instrument ID	Analytical Run
7429-90-5	Aluminum	68	ug/L	U		P	68	1	OPTIMA3	081108-1
7440-36-0	Antimony	9.3	ug/L	B		P	3	1	OPTIMA3	081108-1
7440-38-2	Arsenic	1.5	ug/L	U		MS	1.5	1	ICPMS6	080808-2
7440-39-3	Barium	1	ug/L	U		P	1	1	OPTIMA3	081108-1
7440-41-7	Beryllium	1	ug/L	U		P	1	1	OPTIMA3	081108-1
7440-43-9	Cadmium	1	ug/L	U		P	1	1	OPTIMA3	081108-1
7440-70-2	Calcium	134	ug/L	B		P	30	1	OPTIMA3	081108-1
7440-47-3	Chromium	41.3	ug/L			P	2	1	OPTIMA3	081108-1
7440-48-4	Cobalt	1	ug/L	U		P	1	1	OPTIMA3	081108-1
7440-50-8	Copper	634	ug/L			P	3	1	OPTIMA3	081108-1
7439-89-6	Iron	201	ug/L			P	25	1	OPTIMA3	081108-1
7439-92-1	Lead	3.6	ug/L	B		MS	0.5	1	ICPMS6	080808-2
7439-95-4	Magnesium	85	ug/L	U		P	85	1	OPTIMA3	081108-1
7439-96-5	Manganese	8.2	ug/L	B		P	2	1	OPTIMA3	081108-1
7439-97-6	Mercury	0.030	ug/L	U		AV	0.03	1	MER536	081208W1-3
7440-02-0	Nickel	16.4	ug/L	B		P	1	1	OPTIMA3	081108-1
7440-09-7	Potassium	77.6	ug/L	B		P	50	1	OPTIMA3	081108-1
7782-49-2	Selenium	1	ug/L	U		MS	1	1	ICPMS6	080808-2
7440-22-4	Silver	1	ug/L	U		P	1	1	OPTIMA3	081108-1
7440-23-5	Sodium	6790	ug/L			P	45	1	OPTIMA3	081108-1
7440-28-0	Thallium	0.780	ug/L	B		MS	0.3	1	ICPMS6	080808-2
7440-31-5	Tin	5.4	ug/L	B		P	2.5	1	OPTIMA3	081108-1
7440-62-2	Vanadium	1.1	ug/L	B		P	1	1	OPTIMA3	081108-1
7440-66-6	Zinc	7	ug/L	B		P	2	1	OPTIMA3	081108-1

Building 498 Cleaning Facility
Sampled 8/5/08

CHEMTEX

Environmental & Industrial Hygiene Services

3082 25th Street, Port Arthur, TX 77642
Phone: (409) 983-4575; Fax; (409) 982-1522
E-mail: chemtexpa@sbcglobal.net

Report Date: 07/24/08

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

Attn: *Mr. B. Lee*

AIHA *Laboratory* # 101478

nelap *certificate* # T104704239-08A-TX

RESULTS OF ANALYSIS
PROJECT: ES SPDES

Cooling Tower (902)
Sampled 7/8/08

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
26022	902 CT	W	902 CT	07/08/08	11:52	07/10/08		P8070343	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)	< 0.5		0.5	mg/l	07/18/08	SOP # O081-045	P8070346							

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

GEL LABORATORIES LLC
2040 Savage Road Charleston SC 29407 - (843) 556-8171 - www.gel.com

Certificate of Analysis

Company : Brookhaven National Laboratory
Address : Building 51
Upton, New York 11973--5000

Report Date: October 1, 2008

Contact: Mr. John Burke
Project: **ES SPDES--Summary**

Client Sample ID:	26245-004	Project:	BRKL00504
Sample ID:	215608004	Client ID:	BRKL005
Matrix:	Water	COC:	26245
Collect Date:	09-SEP-08 13:55	Samp Recv.:	
Receive Date:	11-SEP-08 08:45	Client Desc.:	1004/1002
Collector:	Client		

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
Oil & Grease Analysis Federal										
EPA 1664A n-Hexane Extractable Material (Oil and G "As Received"										
Oil and Grease	J	1.50	1.40	5.00	mg/L		JXT1 09/17/08	0902	795627	1

The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 1664A	

Outfall 002B (1004/1002)
Sampled 9/9/08

CHEMTEX

Environmental & Industrial Hygiene Services

3082 25th Street, Port Arthur, TX 77642
Phone: (409) 983-4575; Fax; (409) 982-1522
E-mail: chemtexpa@sbcglobal.net

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

Report Date: 08/01/08

AIHA *Laboratory* # 101478

nelap *certificate* # T104704239-08A-TX

RESULTS OF ANALYSIS
PROJECT: ES SPDES

Outfall 002B (1004/1002)
Sampled 7/24/08

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
26123	1004/1002	W	1004/1002	07/24/08	09:50	07/25/08		P8071033	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	07/25/08	EPA 365.3	P8071034	04/14/08	1000ml 1 ml					
	Inorganic Phosphorus	0.09		0.05	mg/l	07/25/08	EPA 365.3								
	Total Phosphorus	0.11		0.05	mg/l	07/25/08	EPA 365.3								
	Tolyltriazole(TTA)	< 0.005		0.005	mg/l	08/01/08	SOP # O121-049								

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

GEL LABORATORIES LLC
2040 Savage Road Charleston SC 29407 - (843) 556-8171 - www.gel.com

Certificate of Analysis

Company : Brookhaven National Laboratory
Address : Building 51
Upton, New York 11973--5000

Contact: Mr. John Burke
Project: **ES SPDES--Summary**

Report Date: September 23, 2008

Client Sample ID:	26219-003	Project:	BRKL00504
Sample ID:	215191003	Client ID:	BRKL005
Matrix:	Water	COC:	26219
Collect Date:	03-SEP-08 13:52	Samp Recv.:	
Receive Date:	05-SEP-08 09:00	Client Desc.:	HN
Collector:	Client		

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
Oil & Grease Analysis Federal										
EPA 1664A n-Hexane Extractable Material (Oil and G "As Received"										
Oil and Grease	J	2.10	1.40	5.00	mg/L		JXT1 09/15/08	0728	794737	1

The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 1664A	

Outfall 002 (HN)
Sampled 9/3/08

Volatile
Certificate of Analysis
Sample Summary

SDG Number:	211759	Date Collected:	07/08/2008 11:15	Matrix:	WATER
Lab Sample ID:	211759002	Date Received:	07/10/2008 09:30		
Client Sample:	HN	Client:	BRKL005	Project:	BRKL00504
Client ID:	26023-003	Method:	EPA 624	SOP Ref:	GL-OA-E-026
Batch ID:	773319	Inst:	VOA9.I	Dilution:	1
Run Date:	07/11/2008 15:33	Analyst:	RXY1	Purge Vol:	5 mL
Prep Date:	07/11/2008 15:33				
Data File:	9s514.d	Column:	RTX-Volatiles	Level:	LOW

CAS No.	Parmname	Qualifier	Result	Units	MDL/LOD	PQL/LOQ	RDL
74-87-3	Chloromethane	U	1.00	ug/L	0.500	1.00	10.0
75-01-4	Vinyl chloride	U	1.00	ug/L	0.500	1.00	10.0
74-83-9	Bromomethane	U	1.00	ug/L	0.500	1.00	10.0
75-00-3	Chloroethane	U	1.00	ug/L	0.500	1.00	10.0
75-69-4	Trichlorofluoromethane	U	1.00	ug/L	0.310	1.00	5.00
75-05-8	Acetonitrile	U	25.0	ug/L	6.25	25.0	
75-35-4	1,1-Dichloroethylene	U	1.00	ug/L	0.300	1.00	5.00
75-09-2	Methylene chloride	U	2.00	ug/L	2.00	2.00	5.00
1634-04-4	tert-Butyl methyl ether	U	5.00	ug/L	0.250	5.00	10.0
156-60-5	trans-1,2-Dichloroethylene	U	1.00	ug/L	0.300	1.00	5.00
75-34-3	1,1-Dichloroethane	U	1.00	ug/L	0.300	1.00	5.00
67-66-3	Chloroform	U	1.00	ug/L	0.250	1.00	5.00
71-55-6	1,1,1-Trichloroethane	U	1.00	ug/L	0.300	1.00	5.00
56-23-5	Carbon tetrachloride	U	1.00	ug/L	0.250	1.00	5.00
107-06-2	1,2-Dichloroethane	U	1.00	ug/L	0.250	1.00	5.00
71-43-2	Benzene	U	1.00	ug/L	0.300	1.00	5.00
79-01-6	Trichloroethylene	U	1.00	ug/L	0.250	1.00	5.00
78-87-5	1,2-Dichloropropane	U	1.00	ug/L	0.250	1.00	5.00
75-27-4	Bromodichloromethane	J	0.356	ug/L	0.250	1.00	5.00
110-75-8	2-Chloroethylvinyl ether	U	5.00	ug/L	1.50	5.00	10.0
10061-01-5	cis-1,3-Dichloropropylene	U	1.00	ug/L	0.250	1.00	5.00
108-88-3	Toluene	U	1.00	ug/L	0.250	1.00	5.00
10061-02-6	trans-1,3-Dichloropropylene	U	1.00	ug/L	0.250	1.00	5.00
79-00-5	1,1,2-Trichloroethane	U	1.00	ug/L	0.250	1.00	5.00
127-18-4	Tetrachloroethylene	U	1.00	ug/L	0.250	1.00	5.00
124-48-1	Dibromochloromethane	J	0.988	ug/L	0.250	1.00	5.00
108-90-7	Chlorobenzene	U	1.00	ug/L	0.250	1.00	5.00
100-41-4	Ethylbenzene	U	1.00	ug/L	0.250	1.00	5.00
75-25-2	Bromoform	J	2.14	ug/L	0.250	1.00	5.00
79-34-5	1,1,2,2-Tetrachloroethane	U	1.00	ug/L	0.250	1.00	5.00
541-73-1	1,3-Dichlorobenzene	U	1.00	ug/L	0.250	1.00	5.00
106-46-7	1,4-Dichlorobenzene	U	1.00	ug/L	0.250	1.00	5.00
95-50-1	1,2-Dichlorobenzene	U	1.00	ug/L	0.250	1.00	5.00

Outfall 002 (HN)
Sampled 7/8/08

METALS
-1-
INORGANICS ANALYSIS DATA PACKAGE

SDG No: 211759 METHOD TYPE: SW846

SAMPLE ID: 211759002 CLIENT ID: 26023-003

CONTRACT: BRKL00504

MATRIX: W DATE RECEIVED 10-JUL-08 LEVEL: Low %SOLIDS:

CAS No	Analyte	Result	Units	C	Qual	M	MDL	DF	Instrument ID	Analytical Run
7429-90-5	Aluminum	73.6	ug/L	B		P	68	1	OPTIMA1	071708A-1
7440-36-0	Antimony	4.5	ug/L	B		P	3	1	OPTIMA1	071708A-1
7440-38-2	Arsenic	1.5	ug/L	U		MS	1.5	1	ICPMS5	080722-3
7440-39-3	Barium	21.4	ug/L	B		P	1	1	OPTIMA1	071708A-1
7440-41-7	Beryllium	1.1	ug/L	B		P	1	1	OPTIMA1	071708A-1
7440-43-9	Cadmium	1.6	ug/L	B		P	1	1	OPTIMA1	071708A-1
7440-70-2	Calcium	8490	ug/L			P	30	1	OPTIMA1	071708A-1
7440-47-3	Chromium	2	ug/L	U		P	2	1	OPTIMA1	071708A-1
7440-48-4	Cobalt	1.1	ug/L	B		P	1	1	OPTIMA1	071708A-1
7440-50-8	Copper	16.6	ug/L	B		P	3	1	OPTIMA1	071708A-1
7439-89-6	Iron	381	ug/L			P	25	1	OPTIMA1	071708A-1
7439-92-1	Lead	2.6	ug/L	B		MS	0.5	1	ICPMS5	080722-3
7439-95-4	Magnesium	2990	ug/L	B		P	85	1	OPTIMA1	071708A-1
7439-96-5	Manganese	31.3	ug/L			P	2	1	OPTIMA1	071708A-1
7439-97-6	Mercury	0.030	ug/L	U		AV	0.03	1	MER536	072908W1-4
7440-02-0	Nickel	1.8	ug/L	B		P	1	1	OPTIMA1	071708A-1
7440-09-7	Potassium	1070	ug/L	B		P	50	1	OPTIMA1	071708A-1
7782-49-2	Selenium	1	ug/L	U		MS	1	1	ICPMS5	080722-3
7440-22-4	Silver	1.2	ug/L	B		P	1	1	OPTIMA1	071708A-1
7440-23-5	Sodium	20200	ug/L			P	45	1	OPTIMA1	071708A-1
7440-28-0	Thallium	0.640	ug/L	B		MS	0.3	1	ICPMS5	080722-3
7440-31-5	Tin	2.5	ug/L	U		P	2.5	1	OPTIMA1	071708A-1
7440-62-2	Vanadium	1.8	ug/L	B		P	1	1	OPTIMA1	071708A-1
7440-66-6	Zinc	45.3	ug/L			P	2	1	OPTIMA1	071708A-1

Outfall 002 (HN)
Sampled 7/8/08
Unfiltered

METALS
-1-
INORGANICS ANALYSIS DATA PACKAGE

SDG No: 211759 **METHOD TYPE:** SW846

SAMPLE ID: 211759003 **CLIENT ID:** 26023-004

CONTRACT: BRKL00504

MATRIX: W **DATE RECEIVED** 10-JUL-08 **LEVEL:** Low **%SOLIDS:**

CAS No	Analyte	Result	Units	C	Qual	M	MDL	DF	Instrument ID	Analytical Run
7429-90-5	Aluminum	68	ug/L	U		P	68	1	OPTIMA1	071708A-1
7440-36-0	Antimony	3	ug/L	U		P	3	1	OPTIMA1	071708A-1
7440-38-2	Arsenic	1.5	ug/L	U		MS	1.5	1	ICPMS5	080722-3
7440-39-3	Barium	18.4	ug/L	B		P	1	1	OPTIMA1	071708A-1
7440-41-7	Beryllium	1	ug/L	U		P	1	1	OPTIMA1	071708A-1
7440-43-9	Cadmium	1	ug/L	U		P	1	1	OPTIMA1	071708A-1
7440-70-2	Calcium	8020	ug/L			P	30	1	OPTIMA1	071708A-1
7440-47-3	Chromium	2	ug/L	U		P	2	1	OPTIMA1	071708A-1
7440-48-4	Cobalt	1	ug/L	U		P	1	1	OPTIMA1	071708A-1
7440-50-8	Copper	3.7	ug/L	B		P	3	1	OPTIMA1	071708A-1
7439-89-6	Iron	71.2	ug/L	B		P	25	1	OPTIMA1	071708A-1
7439-92-1	Lead	0.50	ug/L	U		MS	0.5	1	ICPMS5	080722-3
7439-95-4	Magnesium	2790	ug/L	B		P	85	1	OPTIMA1	071708A-1
7439-96-5	Manganese	8.8	ug/L	B		P	2	1	OPTIMA1	071708A-1
7439-97-6	Mercury	0.030	ug/L	U		AV	0.03	1	MER536	072908W1-4
7440-02-0	Nickel	1	ug/L	U		P	1	1	OPTIMA1	071708A-1
7440-09-7	Potassium	1030	ug/L	B		P	50	1	OPTIMA1	071708A-1
7782-49-2	Selenium	1	ug/L	U		MS	1	1	ICPMS5	080722-3
7440-22-4	Silver	1	ug/L	U		P	1	1	OPTIMA1	071708A-1
7440-23-5	Sodium	19500	ug/L			P	45	1	OPTIMA1	071708A-1
7440-28-0	Thallium	0.30	ug/L	U		MS	0.3	1	ICPMS5	080722-3
7440-31-5	Tin	2.5	ug/L	U		P	2.5	1	OPTIMA1	071708A-1
7440-62-2	Vanadium	1	ug/L	U		P	1	1	OPTIMA1	071708A-1
7440-66-6	Zinc	27.3	ug/L			P	2	1	OPTIMA1	071708A-1

Outfall 002 (HN)
Sampled 7/8/08
Filtered

CHEMTEX

Environmental & Industrial Hygiene Services

3082 25th Street, Port Arthur, TX 77642
Phone: (409) 983-4575; Fax; (409) 982-1522
E-mail: chemtexpa@sbcglobal.net

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

Report Date: 07/24/08

AIHA *Laboratory* # 101478

nelap *certificate* # T104704239-08A-TX

RESULTS OF ANALYSIS
PROJECT: ES SPDES

Outfall 002 (HN)
Sampled 7/8/08

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
26022	HN	W	HN	07/08/08	11:15	07/10/08		P8070343	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	07/11/08	EPA 365.3	P8070344	04/14/08	1000ml 1 ml					
	Inorganic Phosphorus	0.07		0.05	mg/l	07/11/08	EPA 365.3								
	Total Phosphorus	0.08		0.05	mg/l	07/11/08	EPA 365.3								
	Tolyltriazole(TTA)	< 0.005		0.005	mg/l	07/15/08	SOP # O121-049								

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

GEL LABORATORIES LLC
2040 Savage Road Charleston SC 29407 - (843) 556-8171 - www.gel.com

Certificate of Analysis

Company : Brookhaven National Laboratory
Address : Building 51
Upton, New York 11973--5000

Report Date: September 23, 2008

Contact: Mr. John Burke
Project: **ES SPDES--Summary**

Client Sample ID:	26219-004	Project:	BRKL00504
Sample ID:	215191004	Client ID:	BRKL005
Matrix:	Water	COC:	26219
Collect Date:	03-SEP-08 14:13	Samp Recv.:	
Receive Date:	05-SEP-08 09:00	Client Desc.:	HS
Collector:	Client		

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
Oil & Grease Analysis Federal										
EPA 1664A n-Hexane Extractable Material (Oil and G "As Received"										
Oil and Grease	J	1.90	1.40	5.00	mg/L		JXT1 09/15/08	0728	794737	1

The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 1664A	

Outfall 005 (HS)
Sampled 9/3/08

METALS
–1–
INORGANICS ANALYSIS DATA PACKAGE

SDG No: 211759 **METHOD TYPE:** SW846

SAMPLE ID: 211759004 **CLIENT ID:** 26023–005

CONTRACT: BRKL00504

MATRIX: W **DATE RECEIVED** 10–JUL–08 **LEVEL:** Low **%SOLIDS:**

CAS No	Analyte	Result	Units	C	Qual	M	MDL	DF	Instrument ID	Analytical Run
7440–50–8	Copper	3	ug/L	U		P	3	1	OPTIMA1	071708A–1

Outfall 005 (HS)
Sampled 7/8/08

CHEMTEX

Environmental & Industrial Hygiene Services

3082 25th Street, Port Arthur, TX 77642
Phone: (409) 983-4575; Fax; (409) 982-1522
E-mail: chemtexpa@sbcglobal.net

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

Report Date: 07/24/08

AIHA *Laboratory* # 101478

nelap *certificate* # T104704239-08A-TX

RESULTS OF ANALYSIS
PROJECT: ES SPDES

ATTACHMENT 1

Outfall 005 (HS)
Sampled 7/8/08

COC_num	Site-ID	Samp_type	Samp-ID	Samp_date	Samp_time	Rec_date	SDG	Lab_file-ID	Samp_depth	Flow_rate	Notes
26022	HS	W	HS	07/08/08	13:40	07/10/08		P8070343	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	07/11/08	EPA 365.3	P8070345							
	Inorganic Phosphorus	0.06		0.05	mg/l	07/11/08	EPA 365.3								
	Total Phosphorus	0.10		0.05	mg/l	07/11/08	EPA 365.3								
	Tolyltriazole(TTA)	< 0.005		0.005	mg/l	07/15/08	SOP # O121-049								

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

GEL LABORATORIES LLC
2040 Savage Road Charleston SC 29407 - (843) 556-8171 - www.gel.com

Certificate of Analysis

Company : Brookhaven National Laboratory
Address : Building 51
Upton, New York 11973--5000

Report Date: September 23, 2008

Contact: Mr. John Burke
Project: **ES SPDES--Summary**

Client Sample ID:	26219-001	Project:	BRKL00504
Sample ID:	215191001	Client ID:	BRKL005
Matrix:	Water	COC:	26219
Collect Date:	03-SEP-08 14:10	Samp Recv.:	
Receive Date:	05-SEP-08 09:00	Client Desc.:	HT-W
Collector:	Client		

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
Oil & Grease Analysis Federal										
EPA 1664A n-Hexane Extractable Material (Oil and G "As Received"										
Oil and Grease	J	1.90	1.40	5.00	mg/L		JXT1 09/15/08	0728	794737	1

The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 1664A	

Outfall 006A (HT-W)
Sampled 9/3/08

CHEMTEX

Environmental & Industrial Hygiene Services

3082 25th Street, Port Arthur, TX 77642
Phone: (409) 983-4575; Fax; (409) 982-1522
E-mail: chemtexpa@sbcglobal.net

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

Report Date: 07/24/08

AIHA *Laboratory* # 101478

nelap *certificate* # T104704239-08A-TX

RESULTS OF ANALYSIS
PROJECT: ES SPDES

Outfall 006A (HT-W)
Sampled 7/8/08

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
26022	HT-W	W	HT-W	07/08/08	11:40	07/10/08		P8070343	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	07/11/08	EPA 365.3	P8070343							
	Inorganic Phosphorus	< 0.05		0.05	mg/l	07/11/08	EPA 365.3								
	Total Phosphorus	< 0.05		0.05	mg/l	07/11/08	EPA 365.3								
	Tolyltriazole(TTA)	< 0.005		0.005	mg/l	07/15/08	SOP # O121-049								

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

GEL LABORATORIES LLC
2040 Savage Road Charleston SC 29407 - (843) 556-8171 - www.gel.com

Certificate of Analysis

Company : Brookhaven National Laboratory
Address : Building 51
Upton, New York 11973--5000

Report Date: September 23, 2008

Contact: Mr. John Burke
Project: **ES SPDES--Summary**

Client Sample ID:	26219-002	Project:	BRKL00504
Sample ID:	215191002	Client ID:	BRKL005
Matrix:	Water	COC:	26219
Collect Date:	03-SEP-08 14:00	Samp Recv.:	
Receive Date:	05-SEP-08 09:00	Client Desc.:	HT-E
Collector:	Client		

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
Oil & Grease Analysis Federal										
EPA 1664A n-Hexane Extractable Material (Oil and G "As Received"										
Oil and Grease	J	2.00	1.40	5.00	mg/L		JXT1 09/15/08	0728	794737	1

The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 1664A	

Outfall 006B (HT-E)
Sampled 9/3/08

CHEMTEX

Environmental & Industrial Hygiene Services

3082 25th Street, Port Arthur, TX 77642
Phone: (409) 983-4575; Fax; (409) 982-1522
E-mail: chemtexpa@sbcglobal.net

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

Report Date: 08/01/08

AIHA *Laboratory* # 101478

nelap *certificate* # T104704239-08A-TX

RESULTS OF ANALYSIS
PROJECT: ES SPDES

Outfall 006B (HT-E)
Sampled 7/24/08

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
26123	HT-E	W	HT-E	07/24/08	10:10	07/25/08		P8071033	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	07/25/08	EPA 365.3	P8071033							
	Inorganic Phosphorus	0.08		0.05	mg/l	07/25/08	EPA 365.3								
	Total Phosphorus	0.11		0.05	mg/l	07/25/08	EPA 365.3								
	Tolyltriazole(TTA)	< 0.005		0.005	mg/l	08/01/08	SOP # O121-049								

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

GEL LABORATORIES LLC
2040 Savage Road Charleston SC 29407 - (843) 556-8171 - www.gel.com

Certificate of Analysis

Company : Brookhaven National Laboratory
Address : Building 51
Upton, New York 11973--5000

Report Date: October 1, 2008

Contact: Mr. John Burke
Project: **ES SPDES--Summary**

Client Sample ID:	26245-001	Project:	BRKL00504
Sample ID:	215608001	Client ID:	BRKL005
Matrix:	Water	COC:	26245
Collect Date:	09-SEP-08 14:05	Samp Recv.:	
Receive Date:	11-SEP-08 08:45	Client Desc.:	HW
Collector:	Client		

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
Oil & Grease Analysis Federal										
EPA 1664A n-Hexane Extractable Material (Oil and G "As Received"										
Oil and Grease	J	2.00	1.40	5.00	mg/L		JXT1 09/17/08	0902	795627	1

The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 1664A	

Outfall 008 (HW)
Sampled 9/9/08

Volatile
Certificate of Analysis
Sample Summary

SDG Number:	215608	Date Collected:	09/09/2008 14:05	Matrix:	WATER
Lab Sample ID:	215608001	Date Received:	09/11/2008 08:45		
Client Sample:	HW	Client:	BRKL005	Project:	BRKL00504
Client ID:	26245-001	Method:	EPA 624	SOP Ref:	GL-OA-E-026
Batch ID:	794425	Inst:	VOA6.I	Dilution:	1
Run Date:	09/13/2008 00:18	Analyst:	RXD1	Purge Vol:	5 mL
Prep Date:	09/13/2008 00:18				
Data File:	6a531.d	Column:	DB-624	Level:	LOW

CAS No.	Parmname	Qualifier	Result	Units	MDL/LOD	PQL/LOQ	RDL
74-87-3	Chloromethane	U	1.00	ug/L	0.500	1.00	10.0
75-01-4	Vinyl chloride	U	1.00	ug/L	0.500	1.00	10.0
74-83-9	Bromomethane	U	1.00	ug/L	0.500	1.00	10.0
75-00-3	Chloroethane	U	1.00	ug/L	0.500	1.00	10.0
75-69-4	Trichlorofluoromethane	U	1.00	ug/L	0.310	1.00	5.00
75-05-8	Acetonitrile	U	25.0	ug/L	6.25	25.0	
75-35-4	1,1-Dichloroethylene	U	1.00	ug/L	0.300	1.00	5.00
75-09-2	Methylene chloride	U	2.00	ug/L	2.00	2.00	5.00
1634-04-4	tert-Butyl methyl ether	U	5.00	ug/L	0.250	5.00	10.0
156-60-5	trans-1,2-Dichloroethylene	U	1.00	ug/L	0.300	1.00	5.00
75-34-3	1,1-Dichloroethane	U	1.00	ug/L	0.300	1.00	5.00
67-66-3	Chloroform	U	1.00	ug/L	0.250	1.00	5.00
71-55-6	1,1,1-Trichloroethane	U	1.00	ug/L	0.300	1.00	5.00
56-23-5	Carbon tetrachloride	U	1.00	ug/L	0.250	1.00	5.00
107-06-2	1,2-Dichloroethane	U	1.00	ug/L	0.250	1.00	5.00
71-43-2	Benzene	U	1.00	ug/L	0.300	1.00	5.00
79-01-6	Trichloroethylene	U	1.00	ug/L	0.250	1.00	5.00
78-87-5	1,2-Dichloropropane	U	1.00	ug/L	0.250	1.00	5.00
75-27-4	Bromodichloromethane	U	1.00	ug/L	0.250	1.00	5.00
110-75-8	2-Chloroethylvinyl ether	U	5.00	ug/L	1.50	5.00	10.0
10061-01-5	cis-1,3-Dichloropropylene	U	1.00	ug/L	0.250	1.00	5.00
108-88-3	Toluene	U	1.00	ug/L	0.250	1.00	5.00
10061-02-6	trans-1,3-Dichloropropylene	U	1.00	ug/L	0.250	1.00	5.00
79-00-5	1,1,2-Trichloroethane	U	1.00	ug/L	0.250	1.00	5.00
127-18-4	Tetrachloroethylene	U	1.00	ug/L	0.250	1.00	5.00
124-48-1	Dibromochloromethane	U	1.00	ug/L	0.250	1.00	5.00
108-90-7	Chlorobenzene	U	1.00	ug/L	0.250	1.00	5.00
100-41-4	Ethylbenzene	U	1.00	ug/L	0.250	1.00	5.00
75-25-2	Bromoform	U	1.00	ug/L	0.250	1.00	5.00
79-34-5	1,1,2,2-Tetrachloroethane	U	1.00	ug/L	0.250	1.00	5.00
541-73-1	1,3-Dichlorobenzene	U	1.00	ug/L	0.250	1.00	5.00
106-46-7	1,4-Dichlorobenzene	U	1.00	ug/L	0.250	1.00	5.00
95-50-1	1,2-Dichlorobenzene	U	1.00	ug/L	0.250	1.00	5.00

Outfall 008 (HW)
Sampled 9/9/08

METALS
-1-
INORGANICS ANALYSIS DATA PACKAGE

SDG No: 212702 **METHOD TYPE:** SW846

SAMPLE ID: 212702003 **CLIENT ID:** 26124-003

CONTRACT: BRKL00504

MATRIX: W **DATE RECEIVED** 25-JUL-08 **LEVEL:** Low **%SOLIDS:**

CAS No	Analyte	Result	Units	C	Qual	M	MDL	DF	Instrument ID	Analytical Run
7429-90-5	Aluminum	68	ug/L	U		P	68	1	OPTIMA2	073008-1
7440-36-0	Antimony	3.4	ug/L	B		P	3	1	OPTIMA2	073008-1
7440-38-2	Arsenic	1.5	ug/L	U		MS	1.5	1	ICPMS5	080804-2
7440-39-3	Barium	5.9	ug/L	B		P	1	1	OPTIMA2	073008-1
7440-41-7	Beryllium	1	ug/L	U		P	1	1	OPTIMA2	073008-1
7440-43-9	Cadmium	1	ug/L	U		P	1	1	OPTIMA2	073008-1
7440-70-2	Calcium	7460	ug/L		E	P	30	1	OPTIMA2	073008-1
7440-47-3	Chromium	2	ug/L	U		P	2	1	OPTIMA2	073008-1
7440-48-4	Cobalt	1	ug/L	U		P	1	1	OPTIMA2	073008-1
7440-50-8	Copper	4.7	ug/L	B		P	3	1	OPTIMA2	073008-1
7439-89-6	Iron	97.4	ug/L	B		P	25	1	OPTIMA2	073008-1
7439-92-1	Lead	0.710	ug/L	B		MS	0.5	1	ICPMS5	080804-2
7439-95-4	Magnesium	1210	ug/L	B		P	85	1	OPTIMA2	073008-1
7439-96-5	Manganese	12.6	ug/L	B		P	2	1	OPTIMA2	073008-1
7439-97-6	Mercury	0.030	ug/L	U		AV	0.03	1	MER536	073108W1-3
7440-02-0	Nickel	1.8	ug/L	B		P	1	1	OPTIMA2	073008-1
7440-09-7	Potassium	627	ug/L	B		P	50	1	OPTIMA2	073008-1
7782-49-2	Selenium	1	ug/L	U		MS	1	1	ICPMS5	080804-2
7440-22-4	Silver	1	ug/L	U		P	1	1	OPTIMA2	073008-1
7440-23-5	Sodium	2310	ug/L	B	E	P	45	1	OPTIMA2	073008-1
7440-28-0	Thallium	0.30	ug/L	U		MS	0.3	1	ICPMS5	080804-2
7440-31-5	Tin	5.5	ug/L	B		P	2.5	1	OPTIMA2	073008-1
7440-62-2	Vanadium	2.2	ug/L	B		P	1	1	OPTIMA2	073008-1
7440-66-6	Zinc	14.8	ug/L	B		P	2	1	OPTIMA2	073008-1

Outfall 008 (HN)
Sampled 7/24/08
Filtered

GEL LABORATORIES LLC
2040 Savage Road Charleston SC 29407 - (843) 556-8171 - www.gel.com

Certificate of Analysis

Company : Brookhaven National Laboratory
Address : Building 51
Upton, New York 11973--5000

Report Date: October 1, 2008

Contact: Mr. John Burke
Project: **ES SPDES--Summary**

Client Sample ID:	26245-002	Project:	BRKL00504
Sample ID:	215608002	Client ID:	BRKL005
Matrix:	Water	COC:	26245
Collect Date:	09-SEP-08 13:50	Samp Recv.:	
Receive Date:	11-SEP-08 08:45	Client Desc.:	CSF-Outfall
Collector:	Client		

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
Oil & Grease Analysis Federal										
EPA 1664A n-Hexane Extractable Material (Oil and G "As Received"										
Oil and Grease	J	2.00	1.40	5.00	mg/L		JXT1	09/17/08 0902	795627	1

The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 1664A	

Outfall 010 (CSF Outfall)
Sampled 9/9/08

METALS
-1-
INORGANICS ANALYSIS DATA PACKAGE

SDG No: 212702 METHOD TYPE: SW846

SAMPLE ID: 212702002 CLIENT ID: 26124-002

CONTRACT: BRKL00504

MATRIX: W DATE RECEIVED 25-JUL-08 LEVEL: Low %SOLIDS:

CAS No	Analyte	Result	Units	C	Qual	M	MDL	DF	Instrument ID	Analytical Run
7429-90-5	Aluminum	68	ug/L	U		P	68	1	OPTIMA2	073008-1
7440-36-0	Antimony	3.3	ug/L	B		P	3	1	OPTIMA2	073008-1
7440-38-2	Arsenic	1.5	ug/L	U		MS	1.5	1	ICPMS5	080804-2
7440-39-3	Barium	3.7	ug/L	B		P	1	1	OPTIMA2	073008-1
7440-41-7	Beryllium	1	ug/L	U		P	1	1	OPTIMA2	073008-1
7440-43-9	Cadmium	1	ug/L	U		P	1	1	OPTIMA2	073008-1
7440-70-2	Calcium	7510	ug/L		E	P	30	1	OPTIMA2	073008-1
7440-47-3	Chromium	2	ug/L	U		P	2	1	OPTIMA2	073008-1
7440-48-4	Cobalt	1.3	ug/L	B		P	1	1	OPTIMA2	073008-1
7440-50-8	Copper	4.2	ug/L	B		P	3	1	OPTIMA2	073008-1
7439-89-6	Iron	83.6	ug/L	B		P	25	1	OPTIMA2	073008-1
7439-92-1	Lead	0.50	ug/L	U		MS	0.5	1	ICPMS5	080804-2
7439-95-4	Magnesium	622	ug/L	B		P	85	1	OPTIMA2	073008-1
7439-96-5	Manganese	6.1	ug/L	B		P	2	1	OPTIMA2	073008-1
7439-97-6	Mercury	0.030	ug/L	U		AV	0.03	1	MER536	073108W1-3
7440-02-0	Nickel	2.7	ug/L	B		P	1	1	OPTIMA2	073008-1
7440-09-7	Potassium	717	ug/L	B		P	50	1	OPTIMA2	073008-1
7782-49-2	Selenium	1	ug/L	U		MS	1	1	ICPMS5	080804-2
7440-22-4	Silver	1	ug/L	U		P	1	1	OPTIMA2	073008-1
7440-23-5	Sodium	2450	ug/L	B	E	P	45	1	OPTIMA2	073008-1
7440-28-0	Thallium	0.50	ug/L	B		MS	0.3	1	ICPMS5	080804-2
7440-31-5	Tin	2.5	ug/L	U		P	2.5	1	OPTIMA2	073008-1
7440-62-2	Vanadium	5.7	ug/L	B		P	1	1	OPTIMA2	073008-1
7440-66-6	Zinc	12.9	ug/L	B		P	2	1	OPTIMA2	073008-1

Outfall 010 (CSF)
Sampled 7/24/08
Filtered