



CERTIFICATE OF ANALYSIS

CUSTOMER INFORMATION:

Vinny Tirone
 Amesbury Board of Health
 39 South Hunt Rd.
 Amesbury, MA. 01903

SAMPLE INFORMATION:

Sample(s) Collected By: Jim Wilson
 Sample Information: Collected 8/10/22 see location and time below
 Date and Time Received: 8/10/22, 1055
 Date and Time Analyzed: 8/10/22, 1100

FINDINGS:

Biomarine Sample ID	Sample Location	Time Sampled	E. coli/100 mL
74848 A	Lake Gardner	0745	8
74848 B	Camp Kent	N/A	10
74848 C	Sandy Beach	0715	<1
74848 D	Glen Devin	0735	17
-	Camp Bauercrest	-	-

METHOD: IDEXX Coliert (MPN)

REMARKS: Mass. Department of Public Health currently accepts an E. coli count of <235/100 ml in fresh water bathing areas.


 Jim Groleau, Laboratory Director

Beach Sampling Field Data

Revised 2018

74897

Town/City: **AMESBURY**
 Date Collected: *8/10*
 Collected by: *Tim Wilson*

MB-024

Time Delivered to Lab: *1055*
 Delivered by: *MD*
 Relinquished to: *R*

ID #	Sample Location <small>If beach has multiple samples, note location.</small>	Marine or Fresh	Sample Time	Water Clarity:			Water Temp (°F)	Wave Intensity:			Days Since Rain <small>'0' if within 24 hrs.</small>	Potential Pollution Sources - if none, check "none"										
				Clear	Partly Murky	Murky		Calm	Normal	Rough		# People In Water	# Birds	# Dogs	Algae	Trash	Animal/ Human waste	Wrack	None			
	Lake Gardner Beach	F	<i>7:45 AM</i>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<i>80</i>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>						<input checked="" type="checkbox"/>	
	Camp Kent	F		<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<i>80</i>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>						<input checked="" type="checkbox"/>	
	Sandy Beach (ALSIA)	F	<i>7:15 AM</i>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<i>81</i>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<i>1</i>	<i>0</i>	<i>0</i>	<i>0</i>						<input checked="" type="checkbox"/>	
	Glen Devlin	F	<i>7:35 AM</i>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<i>80</i>	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>		<i>0</i>	<i>0</i>	<i>0</i>	<i>0</i>			<input checked="" type="checkbox"/>			<input checked="" type="checkbox"/>	
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>												
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>												
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>												
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>												
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>												
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>												
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>												
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>												
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>												
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>												
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>												
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>												
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>												
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>												
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>												
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>												
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>												
				<input type="radio"/>	<input type="radio"/>	<input type="radio"/>		<input type="radio"/>	<input type="radio"/>	<input type="radio"/>												

Cloud Cover: Clear Partly Cloudy Cloudy/Overcast

Comments:

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