



Garden State Laboratories, Inc.

Report of Analysis

410 Hillside Ave.
Hillside, NJ 07205

Telephone: 800-273-8901
Email: info@gsllabs.com
Internet: www.gsllabs.com

Main Lab
NJDEP Lab Cert. #20044

Jersey Shore Lab
NJDEP Lab Cert. #15037

Lakehurst Lab
NJDEP Lab Cert. #15041

Mathew Klein, M.S., Founder (1916-1996)
Harvey Klein, M.S., Laboratory Director
Jordan B. Klein, B.A., Exec. Vice President
Sharon Ercoliani, B.A. Manager Emerita

For: Alpha School
935 Bennetts Mills Rd.

Jackson, NJ 08527

Laboratory Director:

Report Date: 04/08/2025

Attention: Mark Costa

Client Number: ALP18

Sample ID: Alpha School, 935 Bennetts Mills Rd, Jackson NJ 08527

Lab Sample ID: 250401087-01

Site: Field Blank

Collection Date/Time: 04/01/2025 06:12

Matrix: Potable water

Sample Type: Grab

Analyte	Method	SM YR	DF	Sample Result	MCL	Rep. Limit	MDL	Lab Cert No.	Analysis Date/Time	Qualifiers
Lead, Total Recoverable	EPA 200.9		1	< 0.00100 mg/l	0.015	0.00100	0.00055	20044	04/06/25 17:09	

Sample ID: Alpha School, 935 Bennetts Mills Rd, Jackson NJ 08527 - Gym Kitchen

Lab Sample ID: 250401087-02

Site: Field Blank

Collection Date/Time: 04/01/2025 06:15

Matrix: Potable water

Sample Type: Grab

Analyte	Method	SM YR	DF	Sample Result	MCL	Rep. Limit	MDL	Lab Cert No.	Analysis Date/Time	Qualifiers
Lead, Total Recoverable	EPA 200.9		1	0.00383 mg/l	0.015	0.00100	0.00055	20044	04/06/25 17:12	

Sample ID: Alpha School, 935 Bennetts Mills Rd, Jackson NJ 08527 - Gym Water Fountain

Lab Sample ID: 250401087-03

Site: Field Blank

Collection Date/Time: 04/01/2025 06:17

Matrix: Potable water

Sample Type: Grab

Analyte	Method	SM YR	DF	Sample Result	MCL	Rep. Limit	MDL	Lab Cert No.	Analysis Date/Time	Qualifiers
Lead, Total Recoverable	EPA 200.9		1	< 0.00100 mg/l	0.015	0.00100	0.00055	20044	04/06/25 17:15	

Sample ID: Alpha School, 935 Bennetts Mills Rd, Jackson NJ 08527 - Handicap Gym Water Fountain

Lab Sample ID: 250401087-04

Site: Field Blank

Collection Date/Time: 04/01/2025 06:18

Matrix: Potable water

Sample Type: Grab

Analyte	Method	SM YR	DF	Sample Result	MCL	Rep. Limit	MDL	Lab Cert No.	Analysis Date/Time	Qualifiers
Lead, Total Recoverable	EPA 200.9		1	< 0.00100 mg/l	0.015	0.00100	0.00055	20044	04/06/25 17:18	



Garden State Laboratories, Inc.

Sample ID: Alpha School, 935 Bennetts Mills Rd, Jackson NJ 08527 - Maintenance Room Water Fountain
 Lab Sample ID: 250401087-05

Site: Collection Date/Time: 04/01/2025 06:23

Matrix: Potable water Sample Type: Grab

Analyte	Method	SM YR	DF	Sample Result	MCL	Rep. Limit	MDL	Lab Cert No.	Analysis Date/Time	Qualifiers
Lead, Total Recoverable	EPA 200.9		1	< 0.00100 mg/l	0.015	0.00100	0.00055	20044	04/06/25 17:26	

Sample ID: Alpha School, 935 Bennetts Mills Rd, Jackson NJ 08527 - Faculty Room
 Lab Sample ID: 250401087-06

Site: Collection Date/Time: 04/01/2025 06:25

Matrix: Potable water Sample Type: Grab

Analyte	Method	SM YR	DF	Sample Result	MCL	Rep. Limit	MDL	Lab Cert No.	Analysis Date/Time	Qualifiers
Lead, Total Recoverable	EPA 200.9		1	< 0.00100 mg/l	0.015	0.00100	0.00055	20044	04/06/25 17:29	

Sample ID: Alpha School, 935 Bennetts Mills Rd, Jackson NJ 08527 - Nurse
 Lab Sample ID: 250401087-07

Site: Collection Date/Time: 04/01/2025 06:28

Matrix: Potable water Sample Type: Grab

Analyte	Method	SM YR	DF	Sample Result	MCL	Rep. Limit	MDL	Lab Cert No.	Analysis Date/Time	Qualifiers
Lead, Total Recoverable	EPA 200.9		1	< 0.00100 mg/l	0.015	0.00100	0.00055	20044	04/06/25 17:32	

Sample ID: Alpha School, 935 Bennetts Mills Rd, Jackson NJ 08527 - ADL Room
 Lab Sample ID: 250401087-08

Site: Collection Date/Time: 04/01/2025 06:32

Matrix: Potable water Sample Type: Grab

Analyte	Method	SM YR	DF	Sample Result	MCL	Rep. Limit	MDL	Lab Cert No.	Analysis Date/Time	Qualifiers
Lead, Total Recoverable	EPA 200.9		1	< 0.00100 mg/l	0.015	0.00100	0.00055	20044	04/06/25 17:35	

Sample ID: Alpha School, 935 Bennetts Mills Rd, Jackson NJ 08527 - Classroom 12
 Lab Sample ID: 250401087-09

Site: Collection Date/Time: 04/01/2025 06:36

Matrix: Potable water Sample Type: Grab

Analyte	Method	SM YR	DF	Sample Result	MCL	Rep. Limit	MDL	Lab Cert No.	Analysis Date/Time	Qualifiers
Lead, Total Recoverable	EPA 200.9		1	< 0.00100 mg/l	0.015	0.00100	0.00055	20044	04/06/25 17:37	



Garden State Laboratories, Inc.

Sample ID: Alpha School, 935 Bennetts Mills Rd, Jackson NJ 08527 - Classroom 10 Lab Sample ID: 250401087-10

Site: Collection Date/Time: 04/01/2025 06:38

Matrix: Potable water Sample Type: Grab

Analyte	Method	SM YR	DF	Sample Result	MCL	Rep. Limit	MDL	Lab Cert No.	Analysis Date/Time	Qualifiers
Lead, Total Recoverable	EPA 200.9		1	< 0.00100 mg/l	0.015	0.00100	0.00055	20044	04/06/25 17:40	

*DF=Dilution factor; <=less than, MCL=Maximum Contaminant Level, Rep. Limit=Reporting Limit, MDL=Method Detection Limit, SM YR=Standard Methods Publication Year, and NC=Not Certified.
The liability of Garden State Laboratories, Inc. for services rendered shall in no event exceed the amount of the invoice.
Main Lab certified by NJDEP #20044-TNI, NY Dept. of Health #11550 and PADEP #68-03680.*

Garden State Laboratories, Inc.

Main Lab - 410 Hillside Avenue, Hillside NJ 07205 - NJDEP Lab Cert. #20044
Jersey Shore Lab - 54 Main Street, Waretown NJ 08758 - NJDEP Lab Cert. #15037
 Tel. 800-273-8901/908-688-8900 Fax 908-688-8966 www.gslabs.com info@gslabs.com

Office and Drop off Locations

North Jersey Office: 225 Sparta Avenue, Sparta, NJ 07871 Tel. 973-729-1827
 West Jersey Office: 2050 Route 31 North, Glen Gardner, NJ 08826 Tel. 908-537-7414

FOR SAMPLE RECEIVING USE ONLY

DATE/TIME/TEMP. REC'D AT LAB:
 4/1/25 12:25
 22.3°C

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GSL CLIENT # **ALP18**

CLIENT INFORMATION (REPORT TO BE SENT TO)

Name: Alpha School Contact/Authorized by: Dennis Disano
 Mailing Address: 935 Bennetts Mills Rd. Phone: 908-839-5704
 City/State/Zip: Jackson, NJ 08527 Fax:

MICRO #
 CHEM. # **250401087-01-05**

SAMPLE REC'D BY:
 GSL FIELD SAMPLER/PICK-UP
 PICK-UP AT DROP OFF LOCATION
 DELIVERED BY CLIENT

SAMPLE INFORMATION

SAMPLE TYPE: DW
 SAMPLE LOCATION Alpha School, 935 Bennetts Mills Rd., Jackson, NJ 08527

Grab	Comp	SAMPLE ID	SAMPLE COLLECTION				ANALYSIS REQUIRED (Print Legibly)		CONTAINER INFORMATION				Lab # Extension
			Date	Time	AM	PM	<input checked="" type="checkbox"/> List attached	Total Pages	No.	Type*	Size	Pres.*	
X		Field Blank	4/1	6:12	✓		Lead (First Draw)	87-01	1	P	250ml	A	
X		Gym KITCHEN	4/1	6:15	✓		Lead (First Draw)	87-02	1	P	250ml	A	
X		Gym WATER FOUNTAIN	4/1	6:17	✓		Lead (First Draw)	87-03	1	P	250ml	A	
X		HANDICAP Gym WATER FOUNTAIN	4/1	6:18	✓		Lead (First Draw)	87-04	1	P	250ml	A	
X		MAINTENANCE ROOM WATER FOUNTAIN	4/1	6:23	✓		Lead (First Draw)	87-05	1	P	250ml	A	

Container type: P = Plastic G = Glass A = Amber Glass T = Sterile Thio V = Vial Other/Specify: _____
 *Preservation Code: A = Non Preserved B = Sulfuric Acid C = Sodium Hydroxide D = Nitric Acid
 E = Hydrochloric Acid F = Zinc Acetate G = Sodium Ithiosulfate H = Ascorbic Acid I = Cooled Other/Specify: _____

SUBCONTRACTED WORK

TURNAROUND TIME: Standard Rush (if RUSH REQUESTED) Rush Due by:
 REPORT FORMAT: Standard Report Other/Specify:
 Standard Report + E2 PWSID#:

SEND TO:
 DATE/TIME:
 METHOD OF SHIPMENT:

PAYMENT INFORMATION

Sampling/Pick-up Fee: \$ Composite Fee: \$ Rush Fee: \$ Amount Due: \$
 Payment Method: Credit Card Type: Check # Other:

Note: **LEAD SAMPLING FOR SCHOOL-BOE Regulations - *IF BOTTLES ARE NOT FILLED TO THE 250ml LINE , THEY WILL BE REJECTED***

E-MAIL RESULT

SAMPLE CUSTODY EXCHANGES MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION
PLEASE PRINT YOUR NAME LEGIBLY, USE FULL LEGAL SIGNATURE, DATE AND TIME

Sampled by (PRINT): **DENNIS DISANO JR.** Signature: *Dennis Disano Jr.* Date/Time: **4/1/2025 6:46**
 Client/Client's Representative (PRINT): **DENNIS DISANO JR.** Signature: *Dennis Disano Jr.* Date/Time: **4/1/25 12:25**
 1. Received/Relinquished by (PRINT): **Faith Jacobus** Signature: *F. Jacobus* Date/Time: **4/1/25 12:25**
 2. Received/Relinquished by (PRINT): _____ Signature: _____ Date/Time: _____

CHAIN OF CUSTODY RECORD - PRESS HARD AND PRINT CLEARLY - USE BALL POINT PEN
 IMPORTANT: PRINTED NAMES & SIGNATURES ARE REQUIRED

Garden State Laboratories, Inc.

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FOR SAMPLE RECEIVING USE ONLY

DATE/TIME/TEMP. REC'D AT LAB:

4/1/25 12:25
22.3°C

Page 2 of 2

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North Jersey Office: 225 Sparta Avenue, Sparta, NJ 07871 Tel. 973-729-1827
 West Jersey Office: 2050 Route 31 North, Glen Gardner, NJ 08826 Tel. 908-537-7414

GSL CLIENT # **ALP18**

CLIENT INFORMATION (REPORT TO BE SENT TO)

Name: Alpha School Contact/Authorized by: Dennis Disano
 Mailing Address: 935 Bennetts Mills Rd. Phone: 908-839-5704
 City/State/Zip: Jackson, NJ 08527 EMAIL Fax: COSTAM@RKS ASSOCIATES

MICRO #

CHEM. # 25040187-06-10

SAMPLE REC'D BY:

GSL FIELD SAMPLER/PICK-UP

PICK-UP AT DROP OFF LOCATION

DELIVERED BY CLIENT

SAMPLE INFORMATION

SAMPLE TYPE: DW
 SAMPLE LOCATION Alpha School, 935 Bennetts Mills Rd., Jackson, NJ 08527

Grab	Comp	SAMPLE ID	SAMPLE COLLECTION				ANALYSIS REQUIRED (Print Legibly)	CONTAINER INFORMATION				Lab # Extension
			Date	Time	AM	PM		No.	Type*	Size	Pres.*	
X		FACULTY Room	4/1	6:25	✓	✓	Lead (First Draw) 87-06	1	P	250ml	A	
X		NURSE	4/1	6:28	✓	✓	Lead (First Draw) 87-07	1	P	250ml	A	
X		ADL Room	4/1	6:32	✓	✓	Lead (First Draw) 87-08	1	P	250ml	A	
X		CLASSROOM 12	4/1	6:36	✓	✓	Lead (First Draw) 87-09	1	P	250ml	A	
X		CLASSROOM 10	4/1	6:38	✓	✓	Lead (First Draw) 87-10	1	P	250ml	A	

*Container Type: P=Plastic G=Glass A=Amber Glass T=Sterile Thio V=Vial Other/Specify: _____
 *Preservation Code: A=Non Preserved B=Sulfuric Acid C=Sodium Hydroxide D=Nitric Acid
 E=Hydrochloric Acid F=Zinc Acetate G=Sodium Iodosulfate H=Ascorbic Acid I=Cooled Other/Specify: _____

SUBCONTRACTED WORK

TURNAROUND TIME: Standard Rush (if RUSH REQUESTED) Rush Due by:

REPORT FORMAT: Standard Report Other/Specify:

Standard Report + E2 PWSID#:

SEND TO:

DATE/TIME:

METHOD OF SHIPMENT:

PAYMENT INFORMATION

Sampling/Pick-up Fee: \$ Composite Fee: \$ Rush Fee: \$ Amount Due: \$

Payment Method: Credit Card Type: Check # Other:

Note: **LEAD SAMPLING FOR SCHOOL-BOE Regulations - *IF BOTTLES ARE NOT FILLED TO THE 250ml LINE , THEY WILL BE REJECTED***
 E-MAIL RESULTS

SAMPLE CUSTODY EXCHANGES MUST BE DOCUMENTED BELOW EACH TIME SAMPLES CHANGE POSSESSION
PLEASE PRINT YOUR NAME LEGIBLY, USE FULL LEGAL SIGNATURE, DATE AND TIME

Sampled by (PRINT): DENNIS DISANO JR Signature: [Signature] Date/Time: 4/1/2025 6:46
 Client/Client's Representative (PRINT): DENNIS DISANO JR Signature: [Signature] Date/Time: 4/1/25 12:25
 1. Received/Relinquished by (PRINT): Faith Jacobus Signature: [Signature] Date/Time: 4/1/25 12:25
 2. Received/Relinquished by (PRINT): Signature: Date/Time:

CHAIN OF CUSTODY RECORD - PRESS HARD AND PRINT CLEARLY - USE BALL POINT PEN
 IMPORTANT: PRINTED NAMES & SIGNATURES ARE REQUIRED