



Per- and Polyfluoroalkyl Substances (PFAS) Report

I. PWS INFORMATION: Please refer to your DEP Water Quality Sampling Schedule (WQSS) to help complete this form

PWS ID #: **3164000** City/Town: **LYNNFIELD**
 PWS Name: **LYNNFIELD CENTER WATER DISTRICT** PWS Class: **COM** NTNC TNC

DEP LOCATION (LOC) ID#	DEP Location Name	Sample Information	Date Collected	Collected By
	PFAS PROJECT STA. #2 - GAC EFFLUENT	<input type="checkbox"/> (M)ultiple <input type="checkbox"/> (R)aw <input type="checkbox"/> (S)ingle <input type="checkbox"/> (F)inished	10/5/2022	B. Deshaies
Routine or Special Sample	Original, Resubmitted or Confirmation Report	If Resubmitted Report, list below:		
<input type="checkbox"/> RS <input checked="" type="checkbox"/> SS	X Original <input type="checkbox"/> Resubmitted <input type="checkbox"/> Confirmation	(1) Reason for Resubmission <input type="checkbox"/> Resample <input type="checkbox"/> Reanalysis <input type="checkbox"/> Report Correction	(2) Collection Date of Original Sample	

SAMPLE NOTES -- (Such as, if a Manifold/Multiple sample, list any sources that were on-line during sample collection).

II. ANALYTICAL LABORATORY INFORMATION:

Primary Lab Cert. #: **M-MA1118** Primary Lab Name: **Nashoba Analytical** Subcontracted? (Y/N) **Y**
 Analysis Lab Cert. #: **M-MA030** Analysis Lab Name: **Alpha Analytical - Mansfield**

If Analysis Lab is not certified by MassDEP or U.S. EPA, list certification authority:

Lab Method	Date Extracted	Date Analyzed	Dilution Factor	Lab Sample IDs#
EPA537.1	10/6/2022	10/9/2022	1	Primary Lab: 2210-01213-002 Subcontracted Lab: L2255997-03

CAS #	Regulated PFAS Contaminants	Result ng/L	Result Qualifier	MCL ng/L	MDL ng/L	MRL ng/L
1763-23-1	PERFLUOROCTANESULFONIC ACID-PFOS	ND			0.624	2.00
335-67-1	PERFLUOROCTANOIC ACID-PFOA	ND			0.624	2.00
355-46-4	PERFLUOROHXANESULFONIC ACID-PFHXS	ND			0.624	2.00
375-95-1	PERFLUORONONANOIC ACID-PFNA	ND			0.624	2.00
375-85-9	PERFLUOROHEPTANOIC ACID-PFHPA	ND			0.624	2.00
335-76-2	PERFLUORODECANOIC ACID - PFDA	ND			0.624	2.00
	PFAS6 (sum of PFOS, PFOA, PFHxS, PFNA, PFHpA, and PFDA; only include results at or above the MRL; do not include estimated results as described by a Result Qualifier in the next column)	ND		20	0.624	2.00
UNREGULATED PFAS CONTAMINANTS						
375-73-5	PERFLUOROBUTANESULFONIC ACID-PFBS	ND			0.624	2.00
307-55-1	PERFLUORODODECANOIC ACID - PFDOA	ND			0.624	2.00
307-24-4	PERFLUOROHXANOIC ACID - PFHXA	ND			0.624	2.00
376-06-7	PERFLUOROTETRADECANOIC ACID - PFTA	ND			0.624	2.00
72629-94-8	PERFLUOROTRIDECANOIC ACID - PFTRDA	ND			0.624	2.00
2058-94-8	PERFLUOROUNDECANOIC ACID - PFUNA	ND			0.624	2.00
2991-50-6	N-ETHYL PERFLUOROCTANESULFONAMIDOACETIC ACID - NE7FOSAA	ND			0.624	2.00
2355-31-9	N-METHYL PERFLUOROCTANESULFONAMIDOACETIC ACID - NMEFOSAA	ND			0.624	2.00
763051-92-9	11-CHLOROHEXADecaFLUORO-3-OXALANDECANE-1-SULFONIC ACID-11CL-PF3OU6S	ND			0.624	2.00
756426-58-1	9-CHLOROHEXADecaFLUORO-3-OXANONE-1-SULFONIC ACID-9CL-PF3ONS	ND			0.624	2.00
919005-14-4	4,8-DIOXA-3H-PERFLUORONONANOIC ACID - ADONA	ND			0.624	2.00
13252-13-6	HEXAFLUOROPROPYLENE OXIDE DIMER ACID - HFPO-DA	ND			0.624	2.00

1. A field reagent blank (FRB) must be analyzed and reported on a separate PFAS form if any PFAS are detected above the MRL.
 2. All qualifiers must be described under Lab Analysts Comments on page 2.
 Rev 9/9/2020



Per- and Polyfluoroalkyl Substances (PFAS) Report

PWS ID# 3164000

Lab Sample ID#: 2210-01213-002

CAS #	UNREGULATED PFAS CONTAMINANTS	Result µg/L	Result Qualifier	MCL µg/L	MDL µg/L	MRL ug/L		

Surrogate Name	% Recovery (70-130%)	Alternate Surrogate (must document reason for change)
13C2-PFHXA	101	
13C2-PFDA	83	
D5-NETFOSAA	71	
13C3-HFPO-DA	93	

Note: 13C3-HFPO-DA is not required for EPA Method 537 v1.1

In addition to the SUR above you must attach the results of the ongoing QC results as specified by the method for the sample's extraction batch

Laboratory analytical report with QC attached (check one item below)

All associated QC criteria reported within control limits including Lab Reagent/Method Blank (LRB), Field Reagent blank (FRB), Surrogate Standards (SUR), Laboratory Fortified Blank, Matrix Spike/Duplicate (LFSM/LFSDM or FD) and RPD.

All associated sample and/or QC batch criteria not met. See Lab Analysis Comments below and narrative in attached report.

Lab Analysis Comments: (include sample/method parameters outside of or affecting QC controls/limits and result qualifiers.

Result Qualifier	Qualifier Description

Other Analysis Comments:

I certify under penalties of law that I am the person authorized to fill out this form and the information contained herein is true, accurate and complete to the best extent of my knowledge.

Primary Lab Director Signature: *[Signature]*

Date: 10/11/22

If not submitting these results electronically, mail TWO copies of this report to your DEP Regional Office no later than 10 days after the end of the month in which you received this report or no later than 10 days after the end of the reporting

DEP REVIEW STATUS (Initial & Date)		Review Comments	<input type="checkbox"/> WQTS Data Entered
<input type="checkbox"/> Accepted	<input type="checkbox"/> Disapproved		



Per- and Polyfluoroalkyl Substances (PFAS) Report

I. PWS INFORMATION: Please refer to your DEP Water Quality Sampling Schedule (WQSS) to help complete this form

PWS ID #: 3164000 City/Town: LYNNFIELD

PWS Name: LYNNFIELD CENTER WATER DISTRICT PWS Class: COM NTNC TNC

Table with columns: DEP LOCATION (LOC) ID#, DEP Location Name, Sample Information, Date Collected, Collected By. Includes checkboxes for Multiple, Raw, Single, Finished and Routine or Special Sample options.

SAMPLE NOTES -- (Such as, if a Manifold/Multiple sample, list any sources that were on-line during sample collection).

II. ANALYTICAL LABORATORY INFORMATION:

Primary Lab Cert. #: M-MA1118 Primary Lab Name: Nashoba Analytical
Analysis Lab Cert. #: M-MA030 Analysis Lab Name: Alpha Analytical - Mansfield
Subcontracted? (Y/N) Y

Table with columns: Lab Method, Date Extracted, Date Analyzed, Dilution Factor, Lab Sample IDs#. Includes rows for EPA537.1 with dates 10/8/2022 and 10/9/2022.

Main PFAS results table with columns: CAS #, Regulated PFAS Contaminants, Result ng/L, Result Qualifier, MCL ng/L, MDL ng/L, MRL ng/L. Lists various PFAS like PERFLUOROOCTANESULFONIC ACID-PFOS, etc.

1. A field reagent blank (FRB) must be analyzed and reported on a separate PFAS form if any PFAS are detected above the MRL.
2. All qualifiers must be described under Lab Analysis Comments on page 2.
Rev 9/9/2020



Per- and Polyfluoroalkyl Substances (PFAS) Report

PWS ID# 3164000

Lab Sample ID#: 2210-01213-003

CAS #	UNREGULATED PFAS CONTAMINANTS	Result µg/L	Result Qualifier	MCL µg/L	MDL µg/L	MRL ug/L			

Surrogate Name	% Recovery (70-130%)	Alternate Surrogate (must document reason for change)
13C2-PFHXA	106	
13C2-PFDA	92	
D5-NETFOSAA	91	
13C3-HFPO-DA	93	

Note: 13C3-HFPO-DA is not required for EPA Method 537 v1.1

In addition to the SUR above you must attach the results of the ongoing QC results as specified by the method for the sample's extraction batch

Laboratory analytical report with QC attached (check one item below)

All associated QC criteria reported within control limits including Lab Reagent/Method Blank (LRB), Field Reagent blank (FRB), Surrogate Standards (SUR), Laboratory Fortified Blank, Matrix Spike/Duplicate (LFSM/LFSMD or FD) and RPD.

All associated sample and/or QC batch criteria not met. See Lab Analysis Comments below and narrative in attached report.

Lab Analysis Comments: (include sample/method parameters outside of or affecting QC controls/limits and result qualifiers.)

Result Qualifier	Qualifier Description

Other Analysis Comments:

I certify under penalties of law that I am the person authorized to fill out this form and the information contained herein is true, accurate and complete to the best extent of my knowledge.

Primary Lab Director Signature: *[Signature]*

Date: 10/11/22

If not submitting these results electronically, mail TWO copies of this report to your DEP Regional Office no later than 10 days after the end of the month in which you received this report or no later than 10 days after the end of the reporting

DEP REVIEW STATUS (Initial & Date)		Review	<input type="checkbox"/> WQTS Data Entered
<input type="checkbox"/> Accepted	<input type="checkbox"/> Disapproved	Comments	