



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

November 19, 2007

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

Gentlemen:

**SUBJECT: State Pollutant Discharge Elimination System (SPDES) NY-0005835  
Brookhaven National Laboratory (BNL) Discharge Monitoring Report (DMR)  
for October 2007**

In accordance with our SPDES Permit (NY-0005835), enclosed as Attachment I, please find the DMR for the month of October 2007. 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. CHEMTEX Environmental Laboratory, Inc. (NELAP Certification #02077) performs specialty analyses for tolyltriazole, hydroxyethylidene 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 this reporting period.

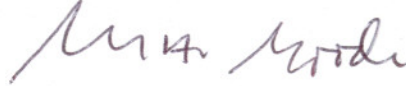
Collection and analysis of these samples are performed in accordance with the BNL Quality Assurance (QA) Program that specifies the standard operating procedures for collection and analysis of samples, QA data requirements, validation of contractor analytical data, and QA inspections performed periodically 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 October 2007.



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 & Waste Management Services  
Division Manager

GAG/JR:djp

Attachment I: Discharge Monitoring Report for October 2007.

Attachment II: Analytical Results from H2M Labs Inc. and General Engineering Laboratories, LLC for samples collected on 10/5/07 and 10/8/07 from Outfall 001 (BNL Use Only).

Attachment III: Analytical Results from General Engineering Laboratories for samples collected from Outfalls 002, 005, 006A, 006B, and 008 (BNL Use Only).

cc: M. Bebon, w/o Attachments  
G. Goode, w/o Attachments  
M. Holland, w/o Attachments  
C. Kao, w/ all Attachments  
E. Lessard, w/ all Attachments  
E. Murphy, w/ all Attachments  
J. Remien, w/ all Attachments  
R. Sorrentino, NYSDEC, w/ Attachment I  
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.07

**Brookhaven National Laboratory**  
**SPDES Permit No. NY0005835**  
**Discharge Monitoring Report for October 2007**  
**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).

**ATTACHMENT I**

**BROOKHAVEN NATIONAL LABORATORY**

**SPDES PERMIT NO. NY0005835**

**BNL's APPROVED COMPUTER GENERATED  
DISCHARGE MONITORING REPORT FOR OCTOBER 2007**

**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	002B
PERMIT NUMBER	DISCHARGE NUMBER

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

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
07	10	01	07	10	31

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	*****	*****			*****			0	01/30	GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		Req. Mon. MINIMUM	*****	9 MAXIMUM	SU		Once Per Month	GRAB
Oil & grease	SAMPLE MEASUREMENT	*****	*****		*****	*****			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	04/30	RC
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	Mgal/d	*****	*****	*****			Once Per Month	RCORDR

<b>NAME/TITLE PRINCIPAL EXECUTIVE OFFICER</b> George A. Goode Division Manager Environmental & Waste Management Services Division Typed or Printed	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	DATE		
		 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	2007	11
		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.**

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Page 2

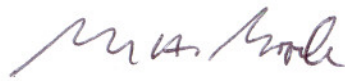
NY0005835	001M
PERMIT NUMBER	DISCHARGE NUMBER

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

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
07	10	01	07	10	31

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 00011 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****		*****	*****	73		0	01/01	GR
	PERMIT REQUIREMENT	*****	*****		*****	*****	90 DAILY MX	deg F		Daily	GRAB
BOD, 5-day, 20 deg. C 00310 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****		*****	< 2	< 2		0	02/30	24
	PERMIT REQUIREMENT	*****	*****		*****	10 DAILY AV	20 DAILY MX	mg/L		Once Per Month	COMP24
pH 00400 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****		6.1	*****	6.6		0	01/01	GR
	PERMIT REQUIREMENT	*****	*****		5.8 MINIMUM	*****	9.0 MAXIMUM	SU		Daily	GRAB
Solids, total suspended 00530 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****		*****	<0.6	<0.6		0	02/30	24
	PERMIT REQUIREMENT	*****	*****		*****	10 DAILY AV	20 DAILY MX	mg/L		Once Per Month	COMP24
Solids, settleable 00545 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.0		0	01/01	GR
	PERMIT REQUIREMENT	*****	*****		*****	*****	0.1 DAILY MX	mL/L		Daily	GRAB
Nitrogen, total (as N) 00600 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****		*****	*****	8.7		0	02/30	24
	PERMIT REQUIREMENT	*****	*****		*****	*****	10 DAILY MX	mg/L		Once Per Month	COMP24
Nitrogen, ammonia total (as N) 00610 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****		*****	*****	<0.10		0	02/30	24
	PERMIT REQUIREMENT	*****	*****		*****	*****	2 DAILY MX	mg/L		Once Per Month	COMP24

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		2007 11 19		
		YEAR MO DAY 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.

Page 2



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

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 UPTON, NY 11973  
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**LOCATION** 53 BELL AVENUE, BLDG 464  
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**ATTN:** MICHAEL HOLLAND, OFFICE MGR

Page 3

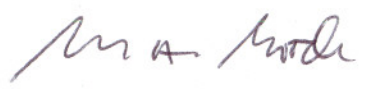
NY0005835	001M
PERMIT NUMBER	DISCHARGE NUMBER

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

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
07	10	01	07	10	31

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	*****	*****		*****	*****	1.5		0	02/30	24
00665 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		*****	*****	Req. Mon. DAILY MX	mg/L		Once Per Month	COMP24
Cyanide, total (as CN)	SAMPLE MEASUREMENT	*****	*****		*****	*****	<1.5		0	02/30	GR
00720 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		*****	*****	100 DAILY MX	ug/L		Twice Per Month	GRAB
Copper, total (as Cu)	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.056		0	02/30	24
01042 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		*****	*****	0.15 DAILY MX	mg/L		Once Per Month	COMP24
Iron, total (as Fe)	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.13		0	02/30	24
01045 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		*****	*****	0.37 DAILY MX	mg/L		Once Per Month	COMP24
Lead, total (as Pb)	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.005		0	02/30	24
01051 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		*****	*****	0.019 DAILY MX	mg/L		Once Per Month	COMP24
Nickel, total (as Ni)	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.012		0	02/30	24
01067 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		*****	*****	0.11 DAILY MX	mg/L		Once Per Month	COMP24
Silver, total (as Ag)	SAMPLE MEASUREMENT	*****	*****		*****	*****	0.0017		0	02/30	24
01077 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		*****	*****	0.015 DAILY MX	mg/L		Once Per Month	COMP24

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		 2007 10 19 YEAR MO DAY		
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		TELEPHONE 631-344-4549		

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

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

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ATTN: MICHAEL HOLLAND, OFFICE MGR

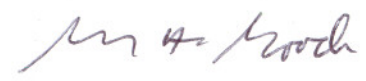
NY0005835	001M
PERMIT NUMBER	DISCHARGE NUMBER

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

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
07	10	01	07	10	31

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	*****	*****		*****	*****	0.04		0	02/30	24
01092 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		*****	*****	0.1 DAILY MX	mg/L		Once Per Month	COMP24
Toluene	SAMPLE MEASUREMENT	*****	*****		*****	*****	<1		0	02/30	GR
34010 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		*****	*****	5 DAILY MX	ug/L		Twice Per Month	GRAB
Methylene chloride	SAMPLE MEASUREMENT	*****	*****		*****	*****	<2		0	02/30	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	02/30	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	0.34	0.44		*****	*****	*****		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	02/30	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	02/30	GR
74055 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		*****	200 DAILY AV	400 DAILY MX	#/100mL		Once Per Month	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER  George A. Goode Division Manager Environmental & Waste Management Services Division Typed or Printed	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	DATE		
				
		2007 11 19 YEAR MO DAY	TELEPHONE	
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT		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 EXFILTRATION FROM SFBS. SEE PERMIT FOR ADDITIONAL NOTES, COMMENTS, AND REQUIREMENTS.



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Page 5

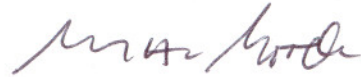
NY0005835	001M
PERMIT NUMBER	DISCHARGE NUMBER

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

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
07	10	01	07	10	31

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	02/30	GR
78356 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		*****	*****	50 DAILY MX	ug/L		Twice Per Month	GRAB
BOD, 5-day, percent removal	SAMPLE MEASUREMENT	*****	*****		>90	*****	*****		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	*****	*****		>99	*****	*****		0	01/30	CA
81011 K 0 Percent Removal	PERMIT REQUIREMENT	*****	*****		85 MO AV MN	*****	*****	%		Once Per Month	CALCTD

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			20	7	11	19
			YEAR	MO	DAY	
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			TELEPHONE			
			631-344-4549			

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

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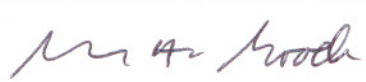
NY0005835	002M
PERMIT NUMBER	DISCHARGE NUMBER

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

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
07	10	01	07	10	31

No Discharge

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		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH	SAMPLE MEASUREMENT	*****	*****		7.3	*****	7.7		0	04/30	GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		Req. Mon. MINIMUM	*****	9 MAXIMUM	SU		Once Per Month	GRAB
Oil & grease	SAMPLE MEASUREMENT	*****	*****		*****	*****	<1.4		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	0.09	*****		*****	*****	*****		0	04/30	RC
50050 1 0 Effluent Gross	PERMIT REQUIREMENT	Req. Mon. DAILY AV	*****	Mgal/d	*****	*****	*****			Once Per Month	RCORDR

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			2007	11	19
			YEAR	MO	DAY
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.



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 ATTN: MICHAEL HOLLAND, OFFICE MGR

Page 7

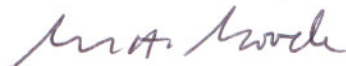
NY0005835	005M
PERMIT NUMBER	DISCHARGE NUMBER

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

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
07	10	01	07	10	31

No Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		VALUE	VALUE	UNITS	VALUE	VALUE	VALUE	UNITS			
pH 00400 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****		7.1	*****	7.8		0	04/30	GR
	PERMIT REQUIREMENT	*****	*****		Req. Mon. MINIMUM	*****	8.5 MAXIMUM	SU		Once Per Month	GRAB
Oil & grease 00556 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****		*****	*****	<1.6		0	01/30	GR
	PERMIT REQUIREMENT	*****	*****		*****	*****	15 DAILY MX	mg/L		Once Per Month	GRAB
Flow, in conduit or thru treatment plant 50050 1 0 Effluent Gross	SAMPLE MEASUREMENT	0.11	*****		*****	*****	*****		0	04/30	RC
	PERMIT REQUIREMENT	Req. Mon. MO AV	*****	Mgal/d	*****	*****	*****			Once Per Month	RCORDR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER George A. Goode Division Manager Environmental & Waste Management Services Division Typed or Printed	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	DATE		
				
		2007	11	19
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

Page 8

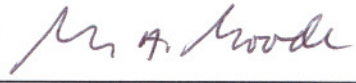
NY0005835	007M
PERMIT NUMBER	DISCHARGE NUMBER

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

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
07	10	01	07	10	31

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 00056 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	160000	*****	*****	*****	*****		0	11/30	IN
	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	gal/d	*****	*****	*****			Once Per Month	INSTAN
pH 00400 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****	*****	7.3	*****	7.3		0	01/30	GR
	PERMIT REQUIREMENT	*****	*****	*****	Req. Mon. MINIMUM	*****	9 MAXIMUM	SU		Once Per Month	GRAB

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER George A. Goode Division Manager Environmental & Waste Management Services Division Typed or Printed	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	DATE		
			2007	11	19
			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

Page 9

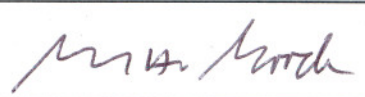
NY0005835	008M
PERMIT NUMBER	DISCHARGE NUMBER

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

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
07	10	01	07	10	31

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	*****	217000		*****	*****	*****		0	01/30	IN
00056 1 0 Effluent Gross		PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	gal/d	*****	*****	*****			Once Per Month	INSTAN
pH		SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.6		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	*****	*****		*****	*****	1.7		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 George A. Goode Division Manager Environmental & Waste Management Services Division Typed or Printed	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		DATE		
			2007	11	19
			YEAR	MO	DAY
SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT			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

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

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
07	10	01	07	10	31

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	*****			*****	*****	*****		0	01/30	IN
00056 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	Req. Mon. DAILY MX	gal/d	*****	*****	*****			Once Per Month	INSTAN
pH	SAMPLE MEASUREMENT	*****	*****			*****			0	01/30	GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		Req. Mon. MINIMUM	*****	8.5 MAXIMUM	SU		Once Per Month	GRAB
Oil & grease	SAMPLE MEASUREMENT	*****	*****		*****	*****			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 George A. Goode Division Manager Environmental & Waste Management Services Division Typed or Printed	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.	 SIGNATURE OF PRINCIPAL EXECUTIVE OFFICER OR AUTHORIZED AGENT	DATE				
			2007	11	19	TELEPHONE	
			YEAR	MO	DAY	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

Page 11

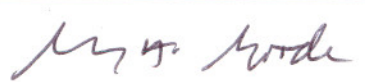
NY0005835	06AM
PERMIT NUMBER	DISCHARGE NUMBER

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

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
07	10	01	07	10	31

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	*****	*****		7.4	*****	7.9		0	04/30	GR
00400 1 0 Effluent Gross	PERMIT REQUIREMENT	*****	*****		Req. Mon. MINIMUM	*****	9 MAXIMUM	SU		Once Per Month	GRAB
Oil & grease	SAMPLE MEASUREMENT	*****	*****		*****	*****	<1.3		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	0.06	*****		*****	*****	*****		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 George A. Goode Division Manager Environmental & Waste Management Services Division Typed or Printed	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		DATE		
			2007	11	19
			YEAR	MO	DAY
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

Page 12

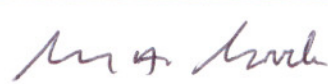
NY0005835	06BM
PERMIT NUMBER	DISCHARGE NUMBER

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

MONITORING PERIOD					
FROM			TO		
YEAR	MO	DAY	YEAR	MO	DAY
07	10	01	07	10	31

No Discharge

PARAMETER		QUANTITY OR LOADING			QUALITY OR CONCENTRATION				NO. EX	FREQUENCY OF ANALYSIS	SAMPLE TYPE
		AVERAGE	MAXIMUM	UNITS	MINIMUM	AVERAGE	MAXIMUM	UNITS			
pH 00400 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****		7.6	*****	7.9		0	04/30	GR
	PERMIT REQUIREMENT	*****	*****		Req. Mon. MINIMUM	*****	9 MAXIMUM	SU		Once Per Month	GRAB
Oil & grease 00556 1 0 Effluent Gross	SAMPLE MEASUREMENT	*****	*****		*****	*****	<1.4		0	01/30	GR
	PERMIT REQUIREMENT	*****	*****		*****	*****	15 DAILY MX	mg/L		Once Per Month	GRAB
Flow, in conduit or thru treatment plant 50050 1 0 Effluent Gross	SAMPLE MEASUREMENT	0.004	*****		*****	*****	*****		0	04/30	RC
	PERMIT REQUIREMENT	Req. Mon. DAILY AV	*****	Mgal/d	*****	*****	*****			Once Per Month	RCORDR

NAME/TITLE PRINCIPAL EXECUTIVE OFFICER George A. Goode Division Manager Environmental & Waste Management Services Division Typed or Printed	I certify under penalty of law that this document and all attachments were prepared under my direction or supervision in accordance with a system designed to assure that qualified personnel properly gather and evaluate the information submitted. Based on my inquiry of the person or persons who manage the system, or those persons directly responsible for gathering the information, the information submitted is, to the best of my knowledge and belief, true, accurate, and complete. I am aware that there are significant penalties for submitting false information, including the possibility of fine and imprisonment for knowing violations.		DATE		
			2007	11	19
		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.



**ATTACHMENT II**

**BROOKHAVEN NATIONAL LABORATORY**

**SPDES PERMIT NO. NY0005835**

**DISCHARGE MONITORING REPORT FOR OCTOBER 2007**

**ANALYTICAL RESULTS FROM H2M LABS**

**AND GENERAL ENGINEERING LABORATORIES, LLC**

**FOR REGULATORY COMPLIANCE SAMPLES COLLECTED**

**10/5/07 and 10/8/07**

**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. : 0711599-001

Sample Information...  
Type : Aqueous

Origin:

Client ID. : 24854-001

Collected : 10/5/2007 9:50:00 AM  
Received : 10/5/2007 3:15:00 PM  
Collected By CLIENT  
Copies To : Original  
CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Method Number</u>	<u>Analyzed</u>
Biochemical Oxygen Demand	< 2		1	mg/L	E405.1	10/05/2007 2:20 PM
Nitrogen, Total	9.2		1	mg/L	M4500-N C	10/15/2007
Nitrogen, Ammonia (As N)	< 0.10		1	mg/L	E350.1	10/10/2007 11:35 AM
Nitrite as N	0.01		1	mg/L	E353.2	10/06/2007 8:26 AM
Nitrate as N	8.71		10	mg/L	E353.2	10/10/2007 10:21 AM
Nitrogen, Kjeldahl, Total	0.51		1	mg/L	E351.2	10/12/2007 9:28 AM

Outfall 001  
Sampled 10/5/07  
24 hour composite

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

D.F. = Dilution Factor

Date Reported : 10/18/2007

*Joann M. Slavin*

Laboratory Manager

# 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. : 0711622-001

Sample Information...  
Type : Aqueous

Origin:

Client ID. : 24858-001

Collected : 10/8/2007 10:40:00 AM  
Received : 10/8/2007 3:00:00 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	10/10/2007 10:40 AM
Nitrogen, Total	6.8		1	mg/L	M4500-N C	10/15/2007
Nitrogen, Ammonia (As N)	< 0.10		1	mg/L	E350.1	10/10/2007 11:39 AM
Nitrite as N	< 0.01		1	mg/L	E353.2	10/10/2007 8:29 AM
Nitrate as N	6.31		10	mg/L	E353.2	10/10/2007 10:25 AM
Nitrogen, Kjeldahl, Total	0.44		1	mg/L	E351.2	10/12/2007 9:30 AM

Outfall 001  
Sampled 10/8/07  
24 hour composite

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

D.F. = Dilution Factor

Date Reported : 10/18/2007

*Joann M. Slavin*

Laboratory Manager

# 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. : 0711599-002

Sample Information...  
Type : Aqueous

Origin:

Client ID. : 24854-002

Collected : 10/5/2007 1:45:00 PM  
Received : 10/5/2007 3:15:00 PM  
Collected By CLIENT  
Copies To : Original  
CC

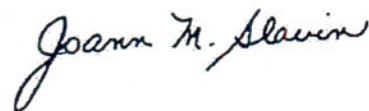
<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Method Number</u>	<u>Analyzed</u>
Total Coliform	< 2		1	MPN	M9221 BC	10/05/2007 3:30 PM
Fecal Coliform	< 2		1	MPN	M9221 BC	10/05/2007 3:30 PM

outfall 001  
sampled 10/5/07  
Grab

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

D.F. = Dilution Factor

Date Reported : 10/18/2007



Laboratory Manager



# 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. : 0711622-002

Sample Information...  
Type : Aqueous

Origin:

Client ID. : 24858-002

Collected : 10/8/2007 2:00:00 PM  
Received : 10/8/2007 3:00:00 PM  
Collected By CLIENT  
Copies To : Original  
CC

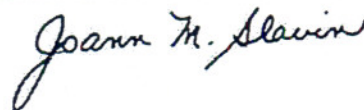
Parameter(s)	Results	Qualifier	D.F.	Units	Method Number	Analyzed
Total Coliform	< 2		1	MPN	M9221 BC	10/08/2007 3:45 PM
Fecal Coliform	< 2		1	MPN	M9221 BC	10/08/2007 3:45 PM

Outfall 001  
sampled 10/8/07  
Grab

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

D.F. = Dilution Factor

Date Reported : 10/18/2007



Laboratory Manager

# 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. : 0711599-003

Sample Information...  
Type : Aqueous

Origin:

Client ID. : 24854-003

Collected : 10/5/2007 10:30:00 AM  
Received : 10/5/2007 3:15:00 PM  
Collected By CLIENT  
Copies To : Original  
CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Method Number</u>	<u>Analyzed</u>
Biochemical Oxygen Demand	22		1	mg/L	E405.1	10/05/2007 2:30 PM

STP Influent  
Sampled 10/5/07  
24 hour composite

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

D.F. = Dilution Factor

Date Reported : 10/18/2007

*Joann M. Slavin*

Laboratory Manager



# 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. : 0711622-003

Sample Information...  
Type : Aqueous

Origin:

Client ID. : 24858-003

Collected : 10/8/2007 11:00:00 AM  
Received : 10/8/2007 3:00:00 PM  
Collected By CLIENT  
Copies To : Original  
CC

<u>Parameter(s)</u>	<u>Results</u>	<u>Qualifier</u>	<u>D.F.</u>	<u>Units</u>	<u>Method Number</u>	<u>Analyzed</u>
Biochemical Oxygen Demand	< 20		1	mg/L	E405.1	10/10/2007 10:45 AM

*STP Influent  
Sampled 10/8/07  
24 hour composite*

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

D.F. = Dilution Factor

Date Reported : 10/18/2007

*Joann M. Slavin*

Laboratory Manager

Volatile  
Certificate of Analysis  
Sample Summary

SDG Number: 195226	Date Collected: 10/05/2007 13:45	Matrix: WATER
Lab Sample ID: 195226002	Date Received: 10/06/2007 09:30	
Client Sample: STP Effluent	Client: BRKL005	Project: BRKL00504
Client ID: 24853-002	Method: EPA 624	SOP Ref: GL-OA-E-026
Batch ID: 692132	Inst: VOA9.I	Dilution: 1
Run Date: 10/16/2007 19:31	Analyst: RXY1	Purge Vol: 5 mL
Prep Date: 10/16/2007 19:31		
Data File: 9g218.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	J	1.29	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 10/5/07*



**Volatile  
Certificate of Analysis  
Sample Summary**

SDG Number: 195305	Date Collected: 10/08/2007 14:00	Matrix: WATER
Lab Sample ID: 195305002	Date Received: 10/09/2007 13:30	
Client Sample: STP Effluent	Client: BRKL005	Project: BRKL00504
Client ID: 24857-002	Method: EPA 624	SOP Ref: GL-OA-E-026
Batch ID: 692132	Inst: VOA9.I	Dilution: 1
Run Date: 10/16/2007 20:27	Analyst: RXY1	Purge Vol: 5 mL
Prep Date: 10/16/2007 20:27		
Data File: 9g220.d	Column: RTX-Volatiles	Level: LOW

CAS No.	Parmname	Qualifier	Result	Units	MDL/LOD	PQL/LOQ
74-87-3	Chloromethane		1.62	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	1.52	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

out fall 001  
sampled 10/8/07

METALS  
-1-  
INORGANICS ANALYSIS DATA PACKAGE

SDG No: 195226

METHOD TYPE: SW846

SAMPLE ID: 195226001

CLIENT ID: 24853-001

CONTRACT: BRKL00504

MATRIX: W

DATE RECEIVED 06-OCT-07

LEVEL: Low %SOLIDS:

<u>CAS No</u>	<u>Analyte</u>	<u>Result</u>	<u>Units</u>	<u>C</u>	<u>Qual</u>	<u>M</u>	<u>MDL</u>	<u>DF</u>	<u>Instrument ID</u>	<u>Analytical Run</u>
7429-90-5	Aluminum	68	ug/L	U		P	68	1	TRACE2	101807-1
7440-36-0	Antimony	3	ug/L	U		P	3	1	TRACE2	101807-1
7440-38-2	Arsenic	1.5	ug/L	U		MS	1.5	1	ICPMS5	071014-3
7440-39-3	Barium	18.2	ug/L	B		P	1	1	TRACE2	101807-1
7440-41-7	Beryllium	1	ug/L	U		P	1	1	TRACE2	101807-1
7440-43-9	Cadmium	1	ug/L	U		P	1	1	TRACE2	101807-1
7440-70-2	Calcium	14300	ug/L			P	30	1	TRACE2	101807-1
7440-47-3	Chromium	2.2	ug/L	B		P	1	1	TRACE2	101807-1
7440-48-4	Cobalt	1	ug/L	U		P	1	1	TRACE2	101807-1
7440-50-8	Copper	56.3	ug/L			P	3	1	TRACE2	101807-1
7439-89-6	Iron	114	ug/L			P	25	1	TRACE2	101807-1
7439-92-1	Lead	0.540	ug/L	B		MS	0.5	1	ICPMS5	071014-3
7439-95-4	Magnesium	4750	ug/L	B		P	85	1	TRACE2	101807-1
7439-96-5	Manganese	3.9	ug/L	B		P	2	1	TRACE2	101807-1
7439-97-6	Mercury	0.030	ug/L	U		AV	0.03	1	MER536	102407W1-2
7440-02-0	Nickel	12.4	ug/L	B		P	1	1	TRACE2	101807-1
7440-09-7	Potassium	5800	ug/L			P	50	1	TRACE2	101807-1
7782-49-2	Selenium	1	ug/L	U		MS	1	1	ICPMS5	071014-3
7440-22-4	Silver	1.1	ug/L	B		P	1	1	TRACE2	101807-1
7440-23-5	Sodium	45900	ug/L			P	45	1	TRACE2	101807-1
7440-28-0	Thallium	0.30	ug/L	U		MS	0.3	1	ICPMS5	071014-3
7440-31-5	Tin	2.5	ug/L	U		P	2.5	1	TRACE2	101807-1
7440-62-2	Vanadium	9.2	ug/L	B		P	1	1	TRACE2	101807-1
7440-66-6	Zinc	37.5	ug/L			P	2	1	TRACE2	101807-1

Outfall 001  
sampled 10/5/07  
24 hour composite



METALS  
-1-  
INORGANICS ANALYSIS DATA PACKAGE

SDG No: 195305

METHOD TYPE: SW846

SAMPLE ID: 195305001

CLIENT ID: 24857-001

CONTRACT: BRKL00504

MATRIX: W

DATE RECEIVED 09-OCT-07

LEVEL: Low %SOLIDS:

<u>CAS No</u>	<u>Analyte</u>	<u>Result</u>	<u>Units</u>	<u>C</u>	<u>Qual</u>	<u>M</u>	<u>MDL</u>	<u>DF</u>	<u>Instrument ID</u>	<u>Analytical Run</u>
7429-90-5	Aluminum	68	ug/L	U		P	68	1	TRACE2	101907-1
7440-36-0	Antimony	3	ug/L	U		P	3	1	TRACE2	101907-1
7440-38-2	Arsenic	1.5	ug/L	U		MS	1.5	1	ICPMS5	071014-3
7440-39-3	Barium	16.3	ug/L	B		P	1	1	TRACE2	101907-1
7440-41-7	Beryllium	1	ug/L	U		P	1	1	TRACE2	101907-1
7440-43-9	Cadmium	1	ug/L	U		P	1	1	TRACE2	101907-1
7440-70-2	Calcium	11500	ug/L			P	30	1	TRACE2	101907-1
7440-47-3	Chromium	1.5	ug/L	B		P	1	1	TRACE2	101907-1
7440-48-4	Cobalt	1	ug/L	U		P	1	1	TRACE2	101907-1
7440-50-8	Copper	46.7	ug/L			P	3	1	TRACE2	101907-1
7439-89-6	Iron	131	ug/L			P	25	1	TRACE2	101907-1
7439-92-1	Lead	0.520	ug/L	B		MS	0.5	1	ICPMS5	071014-3
7439-95-4	Magnesium	3660	ug/L	B		P	85	1	TRACE2	101907-1
7439-96-5	Manganese	2.9	ug/L	B		P	2	1	TRACE2	101907-1
7439-97-6	Mercury	0.030	ug/L	U		AV	0.03	1	MER536	102407W1-2
7440-02-0	Nickel	11.2	ug/L	B		P	1	1	TRACE2	101907-1
7440-09-7	Potassium	4900	ug/L	B		P	50	1	TRACE2	101907-1
7782-49-2	Selenium	1	ug/L	U		MS	1	1	ICPMS5	071014-3
7440-22-4	Silver	1.7	ug/L	B		P	1	1	TRACE2	101907-1
7440-23-5	Sodium	33500	ug/L			P	45	1	TRACE2	101907-1
7440-28-0	Thallium	0.380	ug/L	B		MS	0.3	1	ICPMS5	071014-3
7440-31-5	Tin	2.5	ug/L	U		P	2.5	1	TRACE2	101907-1
7440-62-2	Vanadium	6.9	ug/L	B		P	1	1	TRACE2	101907-1
7440-66-6	Zinc	40.9	ug/L			P	2	1	TRACE2	101907-1

Outfall 001  
Sampled 10/8/07  
24 hour composite

METALS  
-1-  
INORGANICS ANALYSIS DATA PACKAGE

SDG No: 195226

METHOD TYPE: SW846

SAMPLE ID: 195226003

CLIENT ID: 24853-003

CONTRACT: BRKL00504

MATRIX: W

DATE RECEIVED 06-OCT-07

LEVEL: Low %SOLIDS:

<u>CAS No</u>	<u>Analyte</u>	<u>Result</u>	<u>Units</u>	<u>C</u>	<u>Qual</u>	<u>M</u>	<u>MDL</u>	<u>DF</u>	<u>Instrument ID</u>	<u>Analytical Run</u>
7429-90-5	Aluminum	195	ug/L	B		P	68	1	TRACE2	101807-1
7440-36-0	Antimony	3.1	ug/L	B		P	3	1	TRACE2	101807-1
7440-38-2	Arsenic	1.5	ug/L	U		MS	1.5	1	ICPMS5	071014-3
7440-39-3	Barium	59.1	ug/L	B		P	1	1	TRACE2	101807-1
7440-41-7	Beryllium	1	ug/L	U		P	1	1	TRACE2	101807-1
7440-43-9	Cadmium	1	ug/L	U		P	1	1	TRACE2	101807-1
7440-70-2	Calcium	11900	ug/L			P	30	1	TRACE2	101807-1
7440-47-3	Chromium	2.4	ug/L	B		P	1	1	TRACE2	101807-1
7440-48-4	Cobalt	1.2	ug/L	B		P	1	1	TRACE2	101807-1
7440-50-8	Copper	212	ug/L			P	3	1	TRACE2	101807-1
7439-89-6	Iron	1290	ug/L			P	25	1	TRACE2	101807-1
7439-92-1	Lead	18.9	ug/L			MS	0.5	1	ICPMS5	071014-3
7439-95-4	Magnesium	4170	ug/L	B		P	85	1	TRACE2	101807-1
7439-96-5	Manganese	57.8	ug/L			P	2	1	TRACE2	101807-1
7439-97-6	Mercury	0.230	ug/L			AV	0.03	1	MER536	102407W1-2
7440-02-0	Nickel	7.9	ug/L	B		P	1	1	TRACE2	101807-1
7440-09-7	Potassium	6570	ug/L			P	50	1	TRACE2	101807-1
7782-49-2	Selenium	1	ug/L	U		MS	1	1	ICPMS5	071014-3
7440-22-4	Silver	1.3	ug/L	B		P	1	1	TRACE2	101807-1
7440-23-5	Sodium	38100	ug/L			P	45	1	TRACE2	101807-1
7440-28-0	Thallium	0.30	ug/L	U		MS	0.3	1	ICPMS5	071014-3
7440-31-5	Tin	9.1	ug/L	B		P	2.5	1	TRACE2	101807-1
7440-62-2	Vanadium	5.5	ug/L	B		P	1	1	TRACE2	101807-1
7440-66-6	Zinc	121	ug/L			P	2	1	TRACE2	101807-1

STP Influent  
Sampled 10/5/07  
24 hour composite



METALS  
-1-  
INORGANICS ANALYSIS DATA PACKAGE

SDG No: 195305

METHOD TYPE: SW846

SAMPLE ID: 195305003

CLIENT ID: 24857-003

CONTRACT: BRKL00504

MATRIX: W

DATE RECEIVED 09-OCT-07

LEVEL: Low %SOLIDS:

<u>CAS No</u>	<u>Analyte</u>	<u>Result</u>	<u>Units</u>	<u>C</u>	<u>Qual</u>	<u>M</u>	<u>MDL</u>	<u>DF</u>	<u>Instrument ID</u>	<u>Analytical Run</u>
7429-90-5	Aluminum	93.2	ug/L	B		P	68	1	TRACE2	101907-1
7440-36-0	Antimony	3	ug/L	U		P	3	1	TRACE2	101907-1
7440-38-2	Arsenic	2.5	ug/L	B		MS	1.5	1	ICPMS5	071014-3
7440-39-3	Barium	48.1	ug/L	B		P	1	1	TRACE2	101907-1
7440-41-7	Beryllium	1	ug/L	U		P	1	1	TRACE2	101907-1
7440-43-9	Cadmium	1	ug/L	U		P	1	1	TRACE2	101907-1
7440-70-2	Calcium	12300	ug/L			P	30	1	TRACE2	101907-1
7440-47-3	Chromium	2.2	ug/L	B		P	1	1	TRACE2	101907-1
7440-48-4	Cobalt	1	ug/L	U		P	1	1	TRACE2	101907-1
7440-50-8	Copper	124	ug/L			P	3	1	TRACE2	101907-1
7439-89-6	Iron	965	ug/L			P	25	1	TRACE2	101907-1
7439-92-1	Lead	10.6	ug/L			MS	0.5	1	ICPMS5	071014-3
7439-95-4	Magnesium	4320	ug/L	B		P	85	1	TRACE2	101907-1
7439-96-5	Manganese	36.7	ug/L			P	2	1	TRACE2	101907-1
7439-97-6	Mercury	0.080	ug/L	B		AV	0.03	1	MER536	102407W1-2
7440-02-0	Nickel	9.3	ug/L	B		P	1	1	TRACE2	101907-1
7440-09-7	Potassium	3800	ug/L	B		P	50	1	TRACE2	101907-1
7782-49-2	Selenium	1	ug/L	U		MS	1	1	ICPMS5	071014-3
7440-22-4	Silver	1	ug/L	U		P	1	1	TRACE2	101907-1
7440-23-5	Sodium	37900	ug/L			P	45	1	TRACE2	101907-1
7440-28-0	Thallium	0.30	ug/L	U		MS	0.3	1	ICPMS5	071014-3
7440-31-5	Tin	5.3	ug/L	B		P	2.5	1	TRACE2	101907-1
7440-62-2	Vanadium	3.2	ug/L	B		P	1	1	TRACE2	101907-1
7440-66-6	Zinc	66.9	ug/L			P	2	1	TRACE2	101907-1

STP Influent  
sampled 10/8/07  
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: October 25, 2007

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

Client Sample ID: 24853-001  
 Sample ID: 195226001  
 Matrix: Water  
 Collect Date: 05-OCT-07 09:50  
 Receive Date: 06-OCT-07 09:30  
 Collector: Client

Project: BRKL00504  
 Client ID: BRKL005  
 COC: 24853  
 Samp Recv.:  
 Client Desc.: STP Effluent

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
<b>Nutrient Analysis Federal</b>										
<i>EPA 365.4 Phosphorus, Total in</i>										
Phosphorus, Total as P		1.52	0.024	0.050	mg/L	1	AXH3 10/09/07	1321	690394	1
<b>Solids Analysis Federal</b>										
<i>EPA 160.2 Total Suspended Liq</i>										
Total Suspended Solids	U	0.211	0.600	2.63	mg/L		NXM 10/08/07	1208	690448	2
										1

**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	10/08/07	1024	690392

**The following Analytical Methods were performed**

Method	Description	Analyst Comments
1	EPA 365.4	
2	EPA 160.2	

outfall 001  
 sampled 10/5/07  
 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

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

Report Date: October 25, 2007

Client Sample ID: 24857-001  
Sample ID: 195305001  
Matrix: Water  
Collect Date: 08-OCT-07 10:40  
Receive Date: 09-OCT-07 13:30  
Collector: Client  
Project: BRKL00504  
Client ID: BRKL005  
COC: 24857  
Samp Recv.:  
Client Desc.: STP Effluent

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
<b>Nutrient Analysis Federal</b>										
<i>EPA 365.4 Phosphorus, Total in</i>										
Phosphorus, Total as P		1.53	0.024	0.050	mg/L	1	AXH3 10/11/07	0931	691367	1
<b>Solids Analysis Federal</b>										
<i>EPA 160.2 Total Suspended Liq</i>										
Total Suspended Solids	U	-0.104	0.594	2.60	mg/L		NXM 10/10/07	1050	691470	2 1

### 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	10/10/07	1118	691366

### The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 365.4	
2	EPA 160.2	

Outfall 001  
sampled 10/8/07  
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: October 25, 2007

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

Client Sample ID: 24853-002  
Sample ID: 195226002  
Matrix: Water  
Collect Date: 05-OCT-07 13:45  
Receive Date: 06-OCT-07 09:30  
Collector: Client

Project: BRKL00504  
Client ID: BRKL005  
COC: 24853  
Samp Recv.:  
Client Desc.: STP Effluent

Parameter	Qualifier	Result	DL	RL	Units	DF	Analyst	Date	Time	Batch	Method
<b>Flow Injection Analysis Federal</b>											
<i>SW9012A Cyanide, Total Federal</i>											
Cyanide, Total	U	-1.08	1.50	5.00	ug/L	1	KLP1	10/09/07	1602	690435	1

### The following Prep Methods were performed

Method	Description	Analyst	Date	Time	Prep Batch
SW846 9010B Prep	SW846 9010B Prep	AXS5	10/09/07	1132	690434

### The following Analytical Methods were performed

Method	Description	Analyst Comments
1	SW846 9012A	

Outfall 001  
sampled 10/5/07  
Grab

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## Certificate of Analysis

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

Report Date: October 25, 2007

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

Client Sample ID: 24857-002  
Sample ID: 195305002  
Matrix: Water  
Collect Date: 08-OCT-07 14:00  
Receive Date: 09-OCT-07 13:30  
Collector: Client

Project: BRKL00504  
Client ID: BRKL005  
COC: 24857  
Samp Recv.:  
Client Desc.: STP Effluent

Parameter	Qualifier	Result	DL	RL	Units	DF	Analyst	Date	Time	Batch	Method
<b>Flow Injection Analysis Federal</b>											
<i>SW9012A Cyanide, Total Federal</i>											
Cyanide, Total	U	0.621	1.50	5.00	ug/L	1	KLP1	10/12/07	1217	691524	1

### The following Prep Methods were performed

Method	Description	Analyst	Date	Time	Prep Batch
SW846 9010B Prep	SW846 9010B Prep	AXS5	10/11/07	1216	691523

### The following Analytical Methods were performed

Method	Description	Analyst Comments
1	SW846 9012A	

Outfall 001  
sampled 10/8/07  
Grab

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## Certificate of Analysis

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

Report Date: October 25, 2007

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

Client Sample ID: 24853-003  
Sample ID: 195226003  
Matrix: Water  
Collect Date: 05-OCT-07 10:30  
Receive Date: 06-OCT-07 09:30  
Collector: Client

Project: BRKL00504  
Client ID: BRKL005  
COC: 24853  
Samp Recv.:  
Client Desc.: STP Influent

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
<b>Solids Analysis Federal</b>										
<i>EPA 160.2 Total Suspended Liq</i>										
Total Suspended Solids		106	6.71	29.4	mg/L		NXM 10/08/07	1208	690448	1

### The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 160.2	

STP Influent  
Sampled 10/5/07  
24 hour composite



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## 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: October 25, 2007

Client Sample ID: 24857-003  
Sample ID: 195305003  
Matrix: Water  
Collect Date: 08-OCT-07 11:00  
Receive Date: 09-OCT-07 13:30  
Collector: Client

Project: BRKL00504  
Client ID: BRKL005  
COC: 24857  
Samp Recv.:  
Client Desc.: STP Influent

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
<b>Solids Analysis Federal</b>										
<i>EPA 160.2 Total Suspended Liq</i>										
Total Suspended Solids		30.3	3.26	14.3	mg/L		NXM 10/10/07	1050	691470	1
							1			

### The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 160.2	

STP Influent  
Sampled 10/8/07  
24 hour composite

**ATTACHMENT III**

**BROOKHAVEN NATIONAL LABORATORY**

**SPDES PERMIT NO. NY0005835**

**DISCHARGE MONITORING REPORT FOR OCTOBER 2007**

**ANALYTICAL RESULTS FROM**

**GENERAL ENGINEERING LABORATORIES, LLC**

**FOR REGULATORY COMPLIANCE SAMPLES COLLECTED FROM**

**OUTFALLS 002, 005, 006A, 006B, AND 008**

# 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: October 23, 2007

Client Sample ID:	24838-003	Project:	BRKL00504
Sample ID:	194944003	Client ID:	BRKL005
Matrix:	Water	COC:	24838
Collect Date:	02-OCT-07 14:00	Samp Recv.:	
Receive Date:	03-OCT-07 09:30	Client Desc.:	HN
Collector:	Client		

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
<b>Oil &amp; Grease Analysis Federal</b>										
<i>EPA 1664A n-Hexane Extractable Material (Oil and G</i>										
Oil and Grease	U	1.12	1.43	5.10	mg/L		JXT1 10/22/07	0631	694713	1

### The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 1664A	

Outfall 002 (HN)  
Sampled 10/2/07



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## 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: October 23, 2007

Client Sample ID:	24838-005	Project:	BRKL00504
Sample ID:	194944005	Client ID:	BRKL005
Matrix:	Water	COC:	24838
Collect Date:	02-OCT-07 14:30	Samp Recv.:	
Receive Date:	03-OCT-07 09:30	Client Desc.:	HS
Collector:	Client		

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
<b>Oil &amp; Grease Analysis Federal</b>										
<i>EPA 1664A n-Hexane Extractable Material (Oil and G</i>										
Oil and Grease	U	0.795	1.59	5.68	mg/L		JXT1 10/22/07	0747	694713	1

### The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 1664A	

Outfall 005(HS)  
Sampled 10/2/07

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## Certificate of Analysis

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

Report Date: October 23, 2007

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

Client Sample ID: 24838-001  
Sample ID: 194944001  
Matrix: Water  
Collect Date: 02-OCT-07 14:15  
Receive Date: 03-OCT-07 09:30  
Collector: Client

Project: BRKL00504  
Client ID: BRKL005  
COC: 24838  
Samp Recv.:  
Client Desc.: HT-W

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
<b>Oil &amp; Grease Analysis Federal</b>										
<i>EPA 1664A n-Hexane Extractable Material (Oil and G</i>										
Oil and Grease	U	1.15	1.34	4.79	mg/L		JXT1 10/22/07	0631	694713	1

### The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 1664A	

Outfall 006A (HT-W)  
Sampled 10/2/07

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## Certificate of Analysis

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

Report Date: October 23, 2007

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

Client Sample ID: 24838-002  
Sample ID: 194944002  
Matrix: Water  
Collect Date: 02-OCT-07 14:10  
Receive Date: 03-OCT-07 09:30  
Collector: Client

Project: BRKL00504  
Client ID: BRKL005  
COC: 24838  
Samp Recv.:  
Client Desc.: HT-E

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
<b>Oil &amp; Grease Analysis Federal</b>										
<i>EPA 1664A n-Hexane Extractable Material (Oil and G</i>										
Oil and Grease	U	1.11	1.41	5.05	mg/L		JXT1 10/22/07	0631	694713	1

### The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 1664A	

Outfall 006B (HT-E)  
Sampled 10/2/07



**Volatile**  
**Certificate of Analysis**  
**Sample Summary**

SDG Number: 196228	Date Collected: 10/19/2007 16:10	Matrix: WATER
Lab Sample ID: 196228001	Date Received: 10/23/2007 10:00	
Client Sample: HW	Client: BRKL005	Project: BRKL00504
Client ID: 24885-001	Method: EPA 624	SOP Ref: GL-OA-E-026
Batch ID: 696665	Inst: VOA5.I	Dilution: 1
Run Date: 10/26/2007 16:39	Analyst: DXX1	Purge Vol: 5 mL
Prep Date: 10/26/2007 16:39		
Data File: 5h516.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 10/19/07

# 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 27, 2007

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

Client Sample ID: 24885-001  
Sample ID: 196228001  
Matrix: Water  
Collect Date: 19-OCT-07 16:10  
Receive Date: 23-OCT-07 10:00  
Collector: Client

Project: BRKL00504  
Client ID: BRKL005  
COC: 24885  
Samp Recv.:  
Client Desc.: HW

Parameter	Qualifier	Result	DL	RL	Units	DF	AnalystDate	Time	Batch	Method
<b>Oil &amp; Grease Analysis Federal</b>										
<i>EPA 1664A n-Hexane Extractable Material (Oil and G</i>										
Oil and Grease	J	1.70	1.59	5.68	mg/L		JXT1 10/24/07	1116	695615	1

### The following Analytical Methods were performed

Method	Description	Analyst Comments
1	EPA 1664A	

Outfall 008 (HW)  
Sampled 10/19/07