

COC #: DEC Chena River

CLIENT INFORMATION			Contact Person: Jeff Fisher			Requested Analysis										Page 1 of 1	
Name: Alaska DEC			WWTP APDES #: N/A PWS ID #: N/A Send Results to ADEC: <input type="checkbox"/> Yes <input type="checkbox"/> No Purchase Order/Charge Code:			Perservative Added										Requested TAT: <input type="checkbox"/> Normal Turnaround <input type="checkbox"/> RUSH by: DATE: _____	
Billing Address: 610 University Ave																	
City, State, Zip: Fairbanks, Ak 99709																	
Phone: (907) 451-2347																	
Fax:																	
Email: jeff.fisher@alaska.gov																	
Project Name: Chena River Monitoring			Number of Containers E. Coli SM9223B-QT Fecal Coliform SM9222D														
Sampled By:																	
Sample Identification	Sample Date	Sample Time	Matrix	Lab ID#	Sub Lab ID#												Sample Comments
Chena River Site 1	5/12/25	10:35 AM	W	PEF104995		2	X	X									
Chena River Site 1 Duplicate	5/12/25	10:35 AM	W	PEF104996		2	X	X									
Chena River Site 2	5/12/25	11:05 AM	W	PEF104997		2	X	X									
Chena River Site 3	5/12/25	11:30 AM	W	PEF104998		2	X	X									
Special Instructions/QC Requirements & Comments:															Sample Temperatures		
															Pollen Env Temperature on arrival: <u>2.0</u> °C		
															Sub Lab Temperature on arrival: _____ °C		
Relinquished by: <u>JEFF FISHER</u>	Company: <u>DEC</u>	Date & Time: <u>5/12/25 @ 12:00 pm</u>	Received by: <u>[Signature]</u>	Company: <u>Pollen Env.</u>	Date & Time: <u>5/12/25 @ 1207</u>												
Relinquished by:	Company:	Date & Time:	Received by:	Company:	Date & Time:												
Relinquished by:	Company:	Date & Time:	Received by:	Company:	Date & Time:												

POLLEN

ENVIRONMENTAL, LLC

3039 Davis Road Fairbanks, AK 99709 | 907.479.8368 | www.pollenenv.com

CERTIFICATE OF ANALYSIS

Alaska Department of Environmental Conservation

Attn: Jeff Fisher

610 University Avenue

Fairbanks, AK 99709

Phone: (907) 451-2347

E-mail: jeff.fisher@alaska.gov

Report Date: 5/16/2025

Receipt Date: 5/12/2025

Sample Date: 5/12/2025

Sample Time: 10:35 AM

Sampled By: JF

Project / Location: **Chena River Monitoring**

Client Sample ID: **Chena River Site 1**

Pollen Env. Lab ID: **PEF104995**

COC #: **DEC Chena River**

Sample Matrix: **Water**

Definitions:

MRL = Method Reporting Limit

MPN = Most Probable Number

CFU = Colony Forming Unit

mg/L = milligrams per Liter

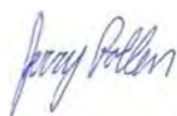
M = Matrix Interference

E = Estimated Result

Comments: Fecal run started 5/12/25 at 4:05 PM.

Comments: E. coli run started 5/12/2025 at 3:50 PM.

Parameter	Analysis Method	Result	Units	MRL	Analyst	Analysis Date	Notes
Fecal Coliform	SM9222D	1.0	CFU/100mL	1.0	JEP/JKI	5/12/2025	
E. coli	SM9223B-QT	2.0	MPN/100mL	1.0	JEP/JKI	5/12/2025	



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Report Date: 5/16/2025

Receipt Date: 5/12/2025

Sample Date: 5/12/2025

Sample Time: 10:35 AM

Sampled By: JF

Project / Location: **Chena River Monitoring**Client Sample ID: **Chena River Site 1 Dup**Pollen Env. Lab ID: **PEF104996**COC #: **DEC Chena River**Sample Matrix: **Water****Definitions:**

MRL = Method Reporting Limit

MPN = Most Probable Number

CFU = Colony Forming Unit

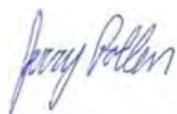
mg/L = milligrams per Liter

M = Matrix Interference

E = Estimated Result

Comments: Fecal run started 5/12/25 at 4:05 PM.**Comments:** E. coli run started 5/12/2025 at 3:50 PM.

Parameter	Analysis Method	Result	Units	MRL	Analyst	Analysis Date	Notes
Fecal Coliform	SM9222D	3.0	CFU/100mL	1.0	JEP/JKI	5/12/2025	
E. coli	SM9223B-QT	2.0	MPN/100mL	1.0	JEP/JKI	5/12/2025	

**Jerry Pollen****Pollen Environmental, LLC**

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E-mail: jeff.fisher@alaska.gov

Report Date: 5/16/2025

Receipt Date: 5/12/2025

Sample Date: 5/12/2025

Sample Time: 11:05 AM

Sampled By: JF

Project / Location: **Chena River Monitoring**

Client Sample ID: **Chena River Site 2**

Pollen Env. Lab ID: **PEF104997**

COC #: **DEC Chena River**

Sample Matrix: **Water**

Definitions:

MRL = Method Reporting Limit

MPN = Most Probable Number

CFU = Colony Forming Unit

mg/L = milligrams per Liter

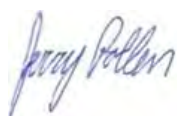
M = Matrix Interference

E = Estimated Result

Comments: Fecal run started 5/12/25 at 4:05 PM.

Comments: E. coli run started 5/12/2025 at 3:50 PM.

Parameter	Analysis Method	Result	Units	MRL	Analyst	Analysis Date	Notes
Fecal Coliform	SM9222D	11.0	CFU/100mL	1.0	JEP/JKI	5/12/2025	
E. coli	SM9223B-QT	9.7	MPN/100mL	1.0	JEP/JKI	5/12/2025	



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E-mail: jeff.fisher@alaska.gov

Report Date: 5/16/2025

Receipt Date: 5/12/2025

Sample Date: 5/12/2025

Sample Time: 11:30 AM

Sampled By: JF

Project / Location: **Chena River Monitoring**
Client Sample ID: **Chena River Site 3 Duplicate**
Pollen Env. Lab ID: **PEF104998**
COC #: **DEC Chena River**
Sample Matrix: **Water**

Definitions:

MRL = Method Reporting Limit

MPN = Most Probable Number

CFU = Colony Forming Unit

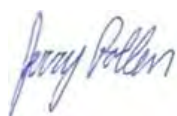
mg/L = milligrams per Liter

M = Matrix Interference

E = Estimated Result

Comments: Fecal run started 5/12/25 at 4:05 PM.
Comments: E. coli run started 5/12/2025 at 3:50 PM.

Parameter	Analysis Method	Result	Units	MRL	Analyst	Analysis Date	Notes
Fecal Coliform	SM9222D	7.0	CFU/100mL	1.0	JEP/JKI	5/12/2025	
E. coli	SM9223B-QT	10.9	MPN/100mL	1.0	JEP/JKI	5/12/2025	

**Jerry Pollen****Pollen Environmental, LLC**

SAMPLE RECEIPT CHECKLIST

Date & Time Received 5/12/25 @ 1207 Initials AMC

Laboratory Identification PEF104995 - 104998

N/A YES NO

- | | | | |
|-------------------------------------|-------------------------------------|--------------------------|---|
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Custody Seals intact? (N/A if hand delivered) |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Chain of Custody (COC) present and properly filled out? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Samples received in hold-time? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Proper container and preservatives used? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Bottles received intact and properly labeled? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Do sample labels match the COC? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Sufficient volume of sample for all analysis? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Temperature Blank received in cooler? |
| <input type="checkbox"/> | <input checked="" type="checkbox"/> | <input type="checkbox"/> | Did samples arrive in container with ice/ice packs? |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | If samples are above 6 Degrees Celsius, were samples taken within two hours of delivery to lab? If so, mark ITTC (Insufficient Time To Cool) on COC form. |
| <input checked="" type="checkbox"/> | <input type="checkbox"/> | <input type="checkbox"/> | Are air bubbles larger than ¼" present in VOA vials? |

Notes: _____

*Temperature upon receipt at the laboratory 2.0 °C

☐ internal sample kit thermometer ☒ infra-red thermometer