



**GS GROUP LLC**  
Green S.P.A.C.E.S Protect Our Earth

## **Kid's Avenue Christian Learning Center Water Sampling Lead Analysis Report**

### **1. INTRODUCTION**

#### **1.1. GENERAL**

This report presents the results of our water sampling performed at the site of Kid's Avenue Christian Learning Center, 19222 Van Dyke., Detroit MI., on May 20<sup>th</sup>, 2016. The sample results taken in conjunction with this investigation are also presented on Appendix 1.

#### **1.2. OBJECTIVES AND SCOPE**

In general, the objectives of this investigation were to:

Accurately evaluate water outlets for lead above the EPA Maximum Contaminate Level (MCL).

#### **1.3. AUTHORIZATION**

Authorization was provided by phone for our Professional Services by Elizabeth Ojo on May 11<sup>th</sup>, 2016.

### **2. SITE INVESTIGATIONS**

#### **2.1. FIELD PROGRAM**

In order to sample and evaluate water, GSES took six samples, a First Draw sample and a Flush sample, from three different locations on the site.

The field portion of our investigation was under control and continual supervision of an experienced member of our field scientist staff.

#### **2.2 LABORATORY TESTING**

##### **2.2.1. General**

In accordance with ASTM D3559 and the U.S. Environmental Protection Agency guidelines for lead in drinking water at schools and child care facilities, we took two samples: first draw and flush, which is the required testing standard for drinking water lead contamination.



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Results of the tests indicate that the water is below the threshold for lead contamination. A copy of the lab report and Chain of Custody is attached (Appendix 1).

### **3. DISCUSSIONS AND RECOMMENDATIONS**

#### **3.1. DISCUSSIONS OF FINDINGS**

The water results are below the threshold for lead contamination.

We appreciate the opportunity of providing this service for you. If you have any questions concerning this report or require additional information, please do not hesitate to contact the undersigned.

Respectfully submitted,

Michael Etters  
Field Scientist

Monica Starks, CIEC  
Principal

Council-certified Indoor Environmental  
Consultant Board-awarded by the  
American Council for Accredited  
Certification



Appendix 1, Lab Results, Chain of Custody

17800 Woodward Ave Suite 200  
Detroit, MI 48203

Laboratory ID: 0055

**National Testing Laboratories, Ltd**  
556 South Mansfield, Ypsilanti, MI, 48197-5166  
(440) 449-2525, Fax: (440) 449-8585

**ANALYTICAL REPORTS**

**SAMPLE CODE: 355435**

**5/27/2016**

**Customer:** G. S. Group  
Monica Starks  
17800 Woodward Ave  
#200  
Detroit, MI 48203

**Source:** Kids Avenue Christian, DC-01-KC-01-P  
**Source City:** Detroit  
**Source State:** MI

**Date/Time Received:** 5/20/2016 14:25

**Collected by:** M. Ethers

The results herein conform to TNI and ISO/IEC 17025:2005 standards, where applicable, unless otherwise narrated in the body of the report. The uncertainty of the test results are available upon request. All Dates and Times are reported as U.S. Eastern Time.

**Legend:**

Any 'Level Detected' marked with an asterisk (\*) indicates that the value has exceeded the EPA Maximum Contaminant Level (MCL) or one of the Standards of Quality.

"ND" This contaminant was not detected at or above our lower reporting limit (LRL)

"NA" Not Analyzed

"Standard" This column indicates either the Maximum Contaminant Level (MCL) for EPA Primary Standards or the guideline values for EPA Secondary Standards

"LRL" This column indicates the Lower Reporting Limit, which is the lowest level that the laboratory can detect a contaminant.

"DF" This column indicates the contaminant dilution factor.

**Report Notes:**

Fed Id #	Contaminant	Method	Standard	Units	LRL	Level Detected	DF	Date/Time Sampled	Date Prepped	Date/Time Analyzed
<b>Inorganic Analytes - Metals</b>										
1030	Lead	200.8	0.015	mg/L	0.001	ND	1	5/20/2016 06:59		5/25/2016

These test results may be used for compliance purpose as required.

Analyst	Tests
EC	200.8



James Abston, Operations Manager

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**SAMPLE CODE: 355436**

**5/27/2016**

**Customer:** G. S. Group  
Monica Starks  
17800 Woodward Ave  
#200  
Detroit, MI 48203

**Source:** Kids Avenue Christian, DC-01-KC-01-F  
**Source City:** Detroit  
**Source State:** MI

**Date/Time Received:** 5/20/2016 14:25

**Collected by:** M. Eiters

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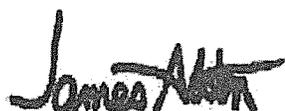
"DF" This column indicates the contaminant dilution factor.

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SAMPLE CODE: 355437

5/27/2016

Customer: G. S. Group  
Monica Starks  
17800 Woodward Ave  
#200  
Detroit, MI 48203

Source: Kids Avenue Christian, DC-01-WC-02-P  
Source City: Detroit  
Source State: MI

Date/Time Received: 5/20/2016 14:25

Collected by: M. Etters

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**SAMPLE CODE: 355438**

**5/27/2016**

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Monica Starks  
17800 Woodward Ave  
#200  
Detroit, MI 48203

**Source:** Kids Avenue Christian, DC-01-WC-02-F  
**Source City:** Detroit  
**Source State:** MI

**Date/Time Received:** 5/20/2016 14:25

**Collected by:** M. Ethers

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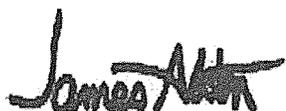
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SAMPLE CODE: 355439

5/27/2016

Customer: G. S. Group  
Monica Starks  
17800 Woodward Ave  
#200  
Detroit, MI 48203

Source: Kids Avenue Christian, DC-01-GBF-03-P  
Source City: Detroit  
Source State: MI

Date/Time Received: 5/20/2016 14:25

Collected by: M. Etters

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EC	200.8

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**ANALYTICAL REPORTS**

**SAMPLE CODE: 355440**

**5/27/2016**

**Customer:** G. S. Group  
Monica Starks  
17800 Woodward Ave  
#200  
Detroit, MI 48203

**Source:** Kids Avenue Christian, DC-01-GBF-03-F  
**Source City:** Detroit  
**Source State:** MI

**Date/Time Received:** 5/20/2016 14:25

**Collected by:** M. Eters

The results herein conform to TNI and ISO/IEC 17025:2005 standards, where applicable, unless otherwise narrated in the body of the report. The uncertainty of the test results are available upon request. All Dates and Times are reported as U.S. Eastern Time.

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Quality Water Analysis

1-800-458-3330

**General Compliance**

Order Number: 2077502

Order Date: 05/16/2016

Sample Number:



Product: Lead Only

Sample Paid: No Payment Method:

TSR: EF

Sold To:

G. S. Group

Monica Starks

17800 Woodward Ave

Detroit

MI 48203

Date Sampled: 5/20/16

Time Sampled: 6:59 Please Use Military Time, e.g. 3.00pm = 15.00

Check Time Zone:  EST  CST  MST  PST

Client Name: Kids Avenue Christian

Phone Number: 313-893-5439

Fax Number:

PWS ID# (if applicable): N/A

Sample ID or Source: DC-01-KC-01-P

Source Type:  Spring  Well  Municipal  Surface  Other:

City & State: Detroit, Mi. (If Different than Above)

Sample Collected By: [Signature] (Signature)

Sample Collected By: Michael Eppers (Please Print)

Form Completed By: Michael Eppers

Additional Comments:

3 locations sampled at this daycare, this is location #1, first draw!

For Laboratory Use ONLY	
Lab Accounting Information:	
Payment \$:	_____
Check #:	_____
Lab Comments/Special Instructions:	
State Forms:	
Lab Sample Information:	
Date Received:	MAY 20 2016
Time Received:	14:25
Received By:	DP
<input checked="" type="checkbox"/> Sample receipt criteria checked & acceptable. <input type="checkbox"/> Deviations from acceptable sample receipt criteria noted on PSA form.	



1-800-458-3330

# General Compliance

Order Number: 2077502  
Order Date: 05/16/2016  
Sample Number:

355436



Product: Lead Only  
Sample Paid: No Payment Method:  
TSR: EF

Sold To:  
G. S. Group  
Monica Starks  
17800 Woodward Ave  
Detroit MI 48203

For Laboratory Use ONLY	
Lab Accounting Information:	
Payment \$:	_____
Check #:	_____
Lab Comments/Special Instructions:	
State Forms:	
Lab Sample Information:	
Date Received:	<u>MAY 20 2016</u>
Time Received:	<u>14:25</u>
Received By:	<u>DF</u>
<input checked="" type="checkbox"/> Sample receipt criteria checked & acceptable.	
<input type="checkbox"/> Deviations from acceptable sample receipt criteria noted on PSA form.	

Date Sampled: 5/20/16

Time Sampled: 6:59 Please Use Military Time, e.g. 3:00pm = 15:00

Check Time Zone:  EST  CST  MST  PST

Client Name: Kids Avenue Christian

Phone Number: 313-893-5439

Fax Number: \_\_\_\_\_

PWS ID# (if applicable): N/A

Sample ID or Source: DC-01-KC-01-F

Source Type:  Spring  Well  Municipal  Surface  
 Other: \_\_\_\_\_

City & State: Detroit Mi  
(If Different than Above)

Sample Collected By: [Signature]  
(Signature)

Sample Collected By: Michael Eppers  
(Please Print)

Form Completed By: Michael Eppers

Additional Comments: 3 locations sampled at this daycare. This is location # 1, Flush Sample.

**National Testing Laboratories, Ltd.**

Quality Water Analysis

1-800-458-3330

**General Compliance**

Order Number: 2077502  
Order Date: 05/16/2016  
Sample Number:  
Product: Lead Only



Sample Paid: No Payment Method:  
TSR: EF

Sold To:  
G. S. Group  
Monica Starks  
17800 Woodward Ave  
Detroit

MI 48203

Date Sampled: 5/20/16

Time Sampled: 6:59 Please Use Military Time, e.g. 3.00pm = 15.00

Check Time Zone:  EST  CST  MST  PST

Client Name: Kids Avenue Christian

Phone Number: 313-893-5439

Fax Number: \_\_\_\_\_

PWS ID# (if applicable): N/A

Sample ID or Source: DC-01-WC-02-P

Source Type:  Spring  Well  Municipal  Surface  
 Other

City & State: Detroit Mi.  
(If Different than Above)

Sample Collected By: [Signature]  
(Signature)

Sample Collected By: Michael Eilers  
(Please Print)

Form Completed By: Michael Eilers

**For Laboratory Use ONLY**

Lab Accounting Information:

Payment \$: \_\_\_\_\_

Check #: \_\_\_\_\_

Lab Comments/Special Instructions:

State Forms:

Lab Sample Information:

Date Received: MAY 20 2016

Time Received: 17:25

Received By: BF

Sample receipt criteria checked & acceptable.  
 Deviations from acceptable sample receipt criteria noted on PSA form.

Additional Comments: 3 locations sampled at this day care. This is location #2, first draw.





**National Testing Laboratories, Ltd.**

Quality Water Analysis

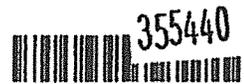
1-800-458-3330

**General Compliance**

Order Number: 2077502

Order Date: 05/16/2016

Sample Number:



Product: Lead Only

Sample Paid: No Payment Method:

TSR: EF

Sold To:

G. S. Group

Monica Starks

17800 Woodward Ave

Detroit

MI 48203

Date Sampled: 5/20/16

Time Sampled: 6:59 Please Use Military Time, e.g. 3.00pm = 15:00

Check Time Zone:  EST  CST  MST  PST

Client Name: Kids Avenue Christian

Phone Number: 313-893-5439

Fax Number: \_\_\_\_\_

PWS ID# (if applicable): N/A

Sample ID or Source: DC-01-GBF-03-F

Source Type:  Spring  Well  Municipal  Surface  
 Other: \_\_\_\_\_

City & State: Detroit Mi  
(If Different than Above)

Sample Collected By: [Signature]  
(Signature)

Sample Collected By: Michael Etters  
(Please Print)

Form Completed By: Michael Etters

For Laboratory Use ONLY	
Lab Accounting Information:	
Payment \$:	_____
Check #:	_____
Lab Comments/Special Instructions:	
State Forms:	
Lab Sample Information:	
Date Received:	<u>MAY 20 2016</u>
Time Received:	<u>14:25</u>
Received By:	<u>BP</u>
<input checked="" type="checkbox"/> Sample receipt criteria checked & acceptable.	
<input type="checkbox"/> Deviations from acceptable sample receipt criteria noted on PSA form.	

Additional Comments: 3 locations sampled at this daycare. This is location #3, flush sample.