



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

Tot's Early 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 Tot's Early Learning Center, 20000 W. Chicago, Detroit, MI., on May 18th, 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 Demetrius Danforth on April 21st, 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.



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

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: 355489
5/27/2016

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

Source: Tots Early Learning Center, DC-01-KC-01-P
Source City: Detroit
Source State: MI

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

Collected by: M. Etters

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
Inorganic Analytes - Metals										
1030	Lead	200.8	0.015	mg/L	0.001	ND	1	5/18/2016 07:15		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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ANALYTICAL REPORTS

SAMPLE CODE: 355490

5/27/2016

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

Source: Tots Early Learning Center, DC-01-KC-01-F
Source City: Detroit
Source State: MI

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

Collected by: M. Etters

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SAMPLE CODE: 355491

5/27/2016

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

Source: Tots Early Learning Center, DC-01-CF-02-P
Source City: Detroit
Source State: MI

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

Collected by: M. Etters

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1030	Lead	200.8	0.015	mg/L	0.001	0.004	1	5/18/2016 07:15		5/25/2016

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ANALYTICAL REPORTS

SAMPLE CODE: 355492

5/27/2016

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

Source: Tots Early Learning Center, DC-01-CF-02-F
Source City: Detroit
Source State: MI

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

Collected by: M. Etters

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SAMPLE CODE: 355493

5/27/2016

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

Source: Tots Early Learning Center, DC-01-BF-03-P
Source City: Detroit
Source State: MI

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

Collected by: M. Ethers

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ANALYTICAL REPORTS

SAMPLE CODE: 355494

5/27/2016

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

Source: Tots Early Learning Center, DC-01-BF-03-F
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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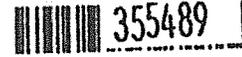
National Testing Laboratories, Ltd.

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
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:	MAY 20, 2016
Time Received:	14:25
Received By:	BF
<input checked="" type="checkbox"/> Sample receipt criteria checked & acceptable. <input type="checkbox"/> Deviations from acceptable sample receipt criteria noted on PSA form.	

Date Sampled: 5/18/16
Time Sampled: 7:15 Please Use Military Time, e.g. 3 00pm = 15:00
Check Time Zone: EST CST MST PST
Client Name: Tots Early Learning Center
Phone Number: 313-835-4400
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.

National Testing Laboratories, Ltd.

Quality Water Analysis

1-800-458-3330

General Compliance

Order Number: 2077502

Order Date: 05/16/2016

Sample Number:

355490

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: 5/18/16

Time Sampled: 7:15 Please Use Military Time, e.g. 3:00pm = 15:00

Check Time Zone: EST CST MST PST

Client Name: Tots Early Learning Center

Phone Number: 313-835-4400

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)

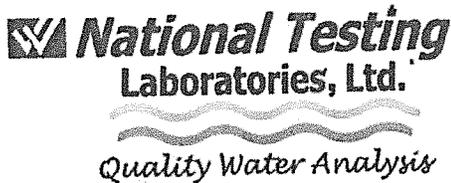
Sample Collected By: Michael Eppers
(Please Print)

Form Completed By: Michael Eppers

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

For Laboratory Use ONLY	
Lab Accounting Information:	1
Payment \$:	_____
Check #:	_____
Lab Comments/Special Instructions:	
State Forms:	
Lab Sample Information:	
Date Received:	MAY 20 2016 /
Time Received:	14:25
Received By:	DF
<input checked="" type="checkbox"/> Sample receipt criteria checked & acceptable. <input type="checkbox"/> Deviations from acceptable sample receipt criteria noted on PSA form.	

INCOMPLETE INFORMATION MAY DELAY ANALYSIS AND/OR INVALIDATE RESULTS



1-800-458-3330

General Compliance

Order Number: 2077502
Order Date: 05/16/2016
Sample Number:
Product: Lead Only
Sample Paid: No
TSR: EF



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.

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

MI 48203

Date Sampled: 5/16/16

Time Sampled: 7:15 Please Use Military Time, e.g. 3:00pm = 15:00

Check Time Zone: EST CST MST PST

Client Name: Tots Early Learning Center

Phone Number: 313-835-4400

Fax Number: _____

PWS ID# (if applicable): N/A

Sample ID or Source: DC-01-CF-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 Eppers
(Please Print)

Form Completed By: Michael Eppers

Additional Comments: 3 locations sampled at this degree, 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:

355492


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:

5/18/16 EF-5/23/16
~~5/16/16~~

Time Sampled: 7:15 Please Use Military Time, e.g. 3:00pm = 15.00

Check Time Zone: EST CST MST PST

Client Name: Tots Early Learning Center

Phone Number: 313-835-4400

Fax Number: _____

PWS ID# (if applicable): N/A

Sample ID or Source: DC-01-CF-02-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 Evers
 (Please Print)

Form Completed By: Michael Evers

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>17:35</u>
Received By:	<u>EF</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 # 2, PLUSH 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

355493



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>BP</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: 5/18/16
 Time Sampled: 7:15 Please Use Military Time, e.g. 3.00pm = 15:00
 Check Time Zone: EST CST MST PST
 Client Name: TOTS Early Learning Center
 Phone Number: 313-835-4440
 Fax Number: _____

PWS ID# (if applicable): N/A

Sample ID or Source: DE-01-BF-03-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 Ethers
 (Please Print)

Form Completed By: Michael Ethers

Additional Comments: MI
3 Samples Sampled at this daycare, this is location #3, First draw!

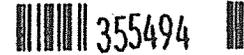
National Testing Laboratories, Ltd.

Quality Water Analysis

1-800-458-3330

General Compliance

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



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

Date Sampled: 5/16/16

Time Sampled: 7:15 Please Use Military Time, e.g. 3.00pm = 15.00

Check Time Zone: EST CST MST PST

Client Name: Tots Early Learning Center

Phone Number: 313-835-4400

Fax Number:

PWS ID# (if applicable): W/A

Sample ID or Source: DC-01-BF-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

Additional Comments:

3 locations sampled at this daycare, this is location #3, Flush Sample.

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:	BF
<input checked="" type="checkbox"/>	Sample receipt criteria checked & acceptable.
<input type="checkbox"/>	Deviations from acceptable sample receipt criteria noted on PSA form.