

EXHIBIT B INDEX – ENVIRONMENTAL

Exhibit B-1: April 2024 DMR;

Exhibit B-2: May sampling results;

Exhibit B-3: May sampling results.

NON-DISCHARGE MONITORING REPORT (NDMR)

Permit No.: WQ0004696			Facility Name: Carolina Village WWTP					County: Currituck		Month: April		Year: 2024				
PPI: 001		Flow Measuring Point: <input type="checkbox"/> Influent <input checked="" type="checkbox"/> Effluent <input type="checkbox"/> No flow generated					Parameter Monitoring Point: <input type="checkbox"/> Influent <input checked="" type="checkbox"/> Effluent <input type="checkbox"/> Groundwater Lowering <input type="checkbox"/> Surface Water									
Parameter Code	50050	00310	00940	50060	31616	00610	00625	00620	00600	00400	00665	70300	00530	00076		
Day	ORC Arrival Time	ORC Time On Site	Flow	BOD5	Chloride	Total Residual Chlorine	Fecal Coliform	Ammonia	Total Kjeldahl Nitrogen	Nitrate	Total Nitrogen	pH	Total Phosphorus	Total Dissolved Solids	Total Suspended Solids	Turbidity
	24-hr	hrs	GPD	mg/L	mg/L	mg/L	#/100 mL	mg/L	mg/L	mg/L	mg/L	su	mg/L	mg/L	mg/L	NTU
1			28,547													
2	12:00	1.5	38,430			0.5						7.2				
3	14:00	1	11,009			1.3						7.2				
4	16:30	2	10,357			0.9						7.4				
5	14:52	1	6,001			0.08						7.2				
6	14:48	1	5,174			1.3						7.3				
7	06:09	1	6,128			1.4						7.2				
8	15:00	0.5	3,987			1.3						7.4				
9	08:55	1	3,362			1.2						7.4				
10	13:10	0.5	5,161			2.1						7.6				
11			4,091													
12	15:00	1	4,098			1.8						7				
13	10:00	1	5,018			1.9						7.1				
14	09:29	1	4,019			2						7.2				
15	16:30	1	6,325			1.8						7.4				
16	14:40	1	7,900			2.2						7				
17	14:29	1	3,991			2.3						7.4				
18			2,895													
19	14:00	1	3,040			2.4						7.5				
20	08:30	1	3,858			2						7.4				
21	11:42	1	4,561			3.1						7				
22	07:32	1	3,848			3.4						7.2				
23	17:30	1	247			2.1						7.4				
24			9,108													
25			10,007	10			<1	2.77	4.4	0.04	4.5		0.3		3.9	
26	13:10	1	9,822			1.6						7.4				
27	11:45	1	8,209			1.9						7.2				
28	12:15	1	3,101			2						7				
29			5,987													
30	10:45	1	2,198			2.3	<1	0.55	1.1	2.23	3.3	6.9	0.07		<2.5	
31																
Average:			7,349	10.00		1.79	1.00	1.66	2.75	1.14	3.90		0.19		1.95	
Daily Maximum:			38,430	10.00		3.40	1.00	2.77	4.40	2.23	4.50	7.60	0.30		3.90	
Daily Minimum:			247	10.00		0.08	1.00	0.55	1.10	0.04	3.30	6.90	0.07		2.50	
Sampling Type:			Recorder	Composite	Composite	Grab	Grab	Composite	Composite	Composite	Composite	Grab	Composite	Composite	Composite	Recorder
Monthly Limit:			60,000	10			14	4		10	7		3		15	
Daily Limit:												6-9				10
Sample Frequency:			Continuous	2 X Month	3 X Year	5 X Week	2 X Month	2 X Month	2 X Month	2 X Month	2 X Month	5 X Week	2 X Month	3 X Year	2 X Month	Continuous

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NON-DISCHARGE MONITORING REPORT (NDMR)

Permit No.: WQ0004696			Facility Name: Carolina Village WWTP						County: Currituck		Month: April		Year: 2024				
PPI: 002			Flow Measuring Point: <input type="checkbox"/> Influent <input type="checkbox"/> Effluent <input checked="" type="checkbox"/> No flow generated						Parameter Monitoring Point: <input type="checkbox"/> Influent <input checked="" type="checkbox"/> Effluent <input type="checkbox"/> Groundwater Lowering <input type="checkbox"/> Surface Water								
Day	Parameter Code →		50050	00940	31616	70300	00610	00620	00600	00400	00665						
	ORC Arrival Time	ORC Time On Site	Flow	Chloride	Fecal Coliform	Total Dissolved Solids	Ammonia	Nitrate	Total Nitrogen	pH	Total Phosphorus						
	24-hr	hrs	GPD	mg/L	#/100 mL	mg/L	mg/L	mg/L	mg/L	su	mg/L						
1			28,547														
2	12:00	1.5	38,430							7.2							
3	14:00	1	11,009							7.2							
4	16:30	2	10,357							7.4							
5	14:52	1	6,001							7.2							
6	14:48	1	5,174							7.3							
7	6:09	1	6,128							7.2							
8	15:00	0.5	3,987							7.4							
9	8:55	1	3,362							7.4							
10	13:10	0.5	5,161							7.6							
11			4,091														
12	15:00	1	4,098							7							
13	10:00	1	5,018							7.1							
14	9:29	1	4,019							7.2							
15	16:30	1	6,325							7.4							
16	14:40	1	7,900							7							
17	14:29	1	3,991							7.4							
18			2,895														
19	14:00	1	3,040							7.5							
20	8:30	1	3,858							7.4							
21	11:42	1	4,561							7							
22	7:32	1	3,848							7.2							
23	17:30	1	247							7.4							
24			9,108														
25			10,007		<1		1.66	0.7	6.3		0.59						
26	13:10	1	9,822							7.4							
27	11:45	1	8,209							7.2							
28	12:15	1	3,101							7							
29			5,987														
30	10:45	1	2,198		<1		<0.1	0.02	0.6	6.9	0.13						
31																	
Average:			7,349		1.00		0.83	0.36	3.45		0.36						
Daily Maximum:			38,430		1.00		1.66	0.70	6.30	7.60	0.59						
Daily Minimum:			247		1.00		0.10	0.02	0.60	6.90	0.13						
Sampling Type:			Recorder	Grab	Grab	Grab	Grab	Grab	Grab	Grab	Grab						
Monthly Limit:				250		500	1.5	10									
Daily Limit:			43,387							6.5-8.5							
Sample Frequency:			Continuous	3 X Year	2 X Month	3 X Year	2 X Month	2 X Month	2 X Month	5 X Week	2 X Month						

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NON-DISCHARGE MONITORING REPORT (NDMR)

Permit No.: WQ0004696			Facility Name: Carolina Village WWTP				County: Currituck		Month: April		Year: 2024	
PPI: 003		Flow Measuring Point: <input type="checkbox"/> Influent <input type="checkbox"/> Effluent <input checked="" type="checkbox"/> No flow generated				Parameter Monitoring Point: <input type="checkbox"/> Influent <input type="checkbox"/> Effluent <input checked="" type="checkbox"/> Groundwater Lowering <input checked="" type="checkbox"/> Surface Water						
Day	Parameter Code →		00310	00300	00600	00400	00665					
	ORC Arrival Time	ORC Time On Site	BOD5	Dissolved Oxygen	Total Nitrogen	pH	Total Phosphorus					
	24-hr	hrs	mg/L	mg/L	mg/L	su	mg/L					
1												
2	12:00	1.5										
3	14:00	1										
4	16:30	2										
5	14:52	1										
6	14:48	1										
7	6:09	1										
8	15:00	0.5										
9	8:55	1										
10	13:10	0.5										
11												
12	15:00	1										
13	10:00	1										
14	9:29	1										
15	16:30	1										
16	14:40	1										
17	14:29	1										
18												
19	14:00	1										
20	8:30	1										
21	11:42	1										
22	7:32	1										
23	17:30	1										
24												
25												
26	13:10	1										
27	11:45	1										
28	12:15	1										
29												
30	10:45	1										
31												
Average:												
Daily Maximum:												
Daily Minimum:												
Sampling Type:			Grab	Grab	Grab	Grab	Grab					
Monthly Limit:												
Daily Limit:												
Sample Frequency:			3 X Year	3 X Year	3 X Year	3 X Year	3 X Year					

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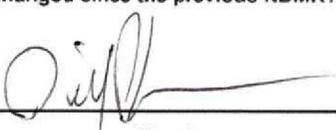
Permit No.: WQ0004696		Facility Name: Carolina Village WWTP					County: Currituck		Month: April		Year: 2024	
PPI: 004		Flow Measuring Point: <input type="checkbox"/> Inflow <input type="checkbox"/> Effluent <input checked="" type="checkbox"/> No flow generated					Parameter Monitoring Point: <input type="checkbox"/> Inflow <input type="checkbox"/> Effluent <input type="checkbox"/> Groundwater Lowering <input checked="" type="checkbox"/> Surface Water					
Parameter Code →		00310	00300	00600	00400	00665						
Day	ORC Arrival Time	BOD5	Dissolved Oxygen	Total Nitrogen	pH	Total Phosphorus						
	24-hr	mg/L	mg/L	mg/L	su	mg/L						
1												
2	12:00	1.5										
3	14:00	1										
4	16:30	2										
5	14:52	1										
6	14:48	1										
7	6:09	1										
8	15:00	0.5										
9	8:55	1										
10	13:10	0.5										
11												
12	15:00	1										
13	10:00	1										
14	9:29	1										
15	16:30	1										
16	14:40	1										
17	14:29	1										
18												
19	14:00	1										
20	8:30	1										
21	11:42	1										
22	7:32	1										
23	17:30	1										
24												
25												
26	13:10	1										
27	11:45	1										
28	12:15	1										
29												
30	10:45	1										
31												
Average:											1.02	
Daily Maximum:											2.00	
Daily Minimum:											0.50	
Sampling Type:		Grab	Grab	Grab	Grab	Grab						
Monthly Limit:												
Daily Limit:												
Sample Frequency:		3 X Year	3 X Year	3 X Year	3 X Year	3 X Year						

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<p>Sampling Person(s)</p> <p>Name: Michelle Pharr</p> <p>Name:</p>	<p>Certified Laboratories</p> <p>Name: Environmental Chemist</p> <p>Name:</p>
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Does all monitoring data and sampling frequencies meet the requirements in Attachment A of your permit? Compliant Non-Compliant

If the facility is non-compliant, please explain in the space below the reason(s) the facility was not in compliance. Provide in your explanation the date(s) of the non-compliance and describe the corrective action(s) taken. Attach additional sheets if necessary.

Operator in Responsible Charge (ORC) Certification	Permittee Certification
<p>ORC: David Pharr</p> <p>Certification No.: 26526</p> <p>Grade: WW4 Phone Number: 252-725-3471</p> <p>Has the ORC changed since the previous NDMR? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Permittee: Carolina Village MHP</p> <p>Signing Official: Daniel Sears</p> <p>Signing Official's Title: Compliance Manager</p> <p>Phone Number: 984-365-9155 Permit Expiration: 5/4/2030</p>
 <hr/> <p>Signature</p>	 <hr/> <p>Signature</p>
<p>5/16/24</p> <hr/> <p>Date</p>	<p>05/16/2024</p> <hr/> <p>Date</p>
<p>By this signature, I certify that this report is accurate and complete to the best of my knowledge.</p>	<p>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 all qualified personnel properly gathered and evaluated 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 fines and imprisonment for knowing violations.</p>

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Division of Water Resources
Information Processing Unit
1617 Mail Service Center
Raleigh, North Carolina 27699-1617

NON-DISCHARGE APPLICATION REPORT (NDAR-2)

Permit No.: WQ0004696					Facility Name: Carolina Village WWTP								County: Currituck				Month: April		Year: 2024		
Did infiltration occur at this facility? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO					Site Name: 1				Site Name: 2				Site Name:				Site Name:				
					Area (acres): 0.29				Area (acres): 0.29				Area (acres):				Area (acres):				
					Rate (GPD/ft ²): 2.35				Rate (GPD/ft ²): 2.35				Rate (GPD/ft ²):				Rate (GPD/ft ²):				
					Site Infiltrated? <input checked="" type="checkbox"/> YES <input type="checkbox"/> NO				Site Infiltrated? <input type="checkbox"/> YES <input checked="" type="checkbox"/> NO				Site Infiltrated? <input type="checkbox"/> YES <input type="checkbox"/> NO				Site Infiltrated? <input type="checkbox"/> YES <input type="checkbox"/> NO				
Day	Weather			Freeboard		Volume Applied gal	Time Infiltrated min	Daily Loading GPD/ft ²	Freeboard (Basins Only) ft	Volume Applied gal	Time Infiltrated min	Daily Loading GPD/ft ²	Freeboard (Basins Only) ft	Volume Applied gal	Time Infiltrated min	Daily Loading GPD/ft ²	Freeboard (Basins Only) ft	Volume Applied gal	Time Infiltrated min	Daily Loading GPD/ft ²	Freeboard (Basins Only) ft
	Weather Code	Temperature °F	Precipitation in	Storage (if applicable) ft	5-Day Upset (if applicable) ft																
1	C	79				28,547		2.26													
2	CL	68		3		38,430		3.04													
3	CL	75		3		11,009		0.87													
4	CL	59		3		10,357		0.82													
5	CL	61		3		6,001		0.48													
6	CL	61		3		5,174		0.41													
7	CL	62		3		6,128		0.49													
8	CL	57		3		3,987		0.32													
9	C	60		3		3,362		0.27													
10	CL	60		3		5,161		0.41													
11	C	75				4,091		0.32													
12	CL	72		3		4,098		0.32													
13	CL	78		3		5,018		0.40													
14	CL	85		3		4,019		0.32													
15	CL	67				6,325		0.50													
16	C	83		3		7,900		0.63													
17	CL	74		3		3,991		0.32													
18	R	60	0.28			2,895		0.23													
19	CL	67		3		3,040		0.24													
20	CL	60		3		3,858		0.31													
21	CL	56		3		4,561		0.36													
22	C	67		3		3,848		0.30													
23	C	61		3		247		0.02													
24	CL	57				9,108		0.72													
25	CL	66				10,007		0.79													
26	CL	83		3		9,822		0.78													
27	C	86				8,209		0.65													
28	CL	68		3		3,101		0.25													
29	CL	73				5,987		0.47													
30	CL	71		3		2,198		0.17													
31																					
Monthly Loading (GPD/ft²):						0.58				#DIV/0!				#DIV/0!				#DIV/0!			
Year to Date Loading (GPD/ft²):																					

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Did the application rates exceed the limits in Attachment B of your permit?

Compliant Non-Compliant

If not a basin, were the sites kept free of vegetation and raked?

Compliant Non-Compliant

If not a basin, were there any instances of effluent ponding in or runoff from the sites?

Compliant Non-Compliant

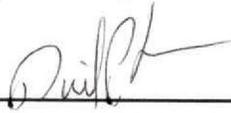
If a basin, were there any instances of breakout from the berms?

Compliant Non-Compliant

Was the onsite automatically activated standby power source tested and operational?

Compliant Non-Compliant

If the facility is non-compliant, please explain in the space below the reason(s) the facility was not in compliance. Provide in your explanation the date(s) of the non-compliance and describe the corrective action(s) taken. Attach additional sheets if necessary.

Operator in Responsible Charge (ORC) Certification	Permittee Certification
<p>ORC: David Pharr</p> <p>Certification No.: 26526</p> <p>Grade: WW4 Phone Number: 252-725-3471</p> <p>Has the ORC changed since the previous NDAR-2? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</p>	<p>Permittee: Carolina Village MHP</p> <p>Signing Official: Daniel Sears</p> <p>Signing Official's Title: Compliance Manager</p> <p>Phone Number: 984-365-9155 Permit Exp.: 5/4/30</p>
 _____ Signature	 _____ Signature
_____ Date	_____ Date
By this signature, I certify that this report is accurate and complete to the best of my knowledge.	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 all qualified personnel properly gathered and evaluated 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 fines and imprisonment for knowing violations.

**Mail Original and Two Copies to:
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 Information Processing Unit
 1617 Mail Service Center
 Raleigh, North Carolina 27699-1617**

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Environmental Chemists, Inc.

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 710 Bowsertown Road, Manteo, NC 27954 • 252.473.5702 Lab/Fax
 255-A Wilmington Highway, Jacksonville, NC 28540 • 910.347.5843 Lab/Fax

ANALYTICAL & CONSULTING CHEMISTS

info@environmentalchemists.com

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JUN 10 2024

Envirolink, Inc.
 PO Box 670
 Bailey NC 27807
 Attention:

Date of Report: May 13, 2024
Manteo Report #: 24M-909
Report #: 2024-09953
Customer ID: 16040014
Project ID: Carolina Village MHP

Lab ID	Sample ID:	Collect Date/Time	Matrix	Sampled by
24-24191	Site: PPI 001 Effluent	4/30/2024 9:30 AM	Water	M. Pharr
Test	Method	Results	Date Analyzed	
Nitrite Nitrogen	EPA 353.2, Rev. 2.0, 1993	< 0.02 mg/L	05/02/2024	
Residue Suspended (TSS)	SM 2540 D-2015	<2.5 mg/L	05/02/2024	
Ammonia Nitrogen	SM 4500 NH3 C-2011	0.55 mg/L	05/02/2024	
Total Phosphorus	SM 4500 P (F-H)-2011	0.07 mg/L	05/06/2024	
BOD	SM 5210 B-2016	<2 mg/L	05/01/2024	
Nitrate Nitrogen (Calc)				
Nitrate Nitrogen	Subtraction Method	2.23 mg/L	05/10/2024	
Total Nitrogen (Calc)				
Nitrate+Nitrite-Nitrogen	EPA 353.2, Rev. 2.0, 1993	2.23 mg/L	05/08/2024	
Total Kjeldahl Nitrogen (TKN)	SM 4500 Norg B-2011	1.1 mg/L	05/02/2024	
Total Nitrogen	Total Nitrogen	3.3 mg/L	05/10/2024	
Lab ID	Sample ID: M-1357	Collect Date/Time	Matrix	Sampled by
24-24192	Site: PPI 001 Effluent Grab -M	4/30/2024 9:30 AM	Water	M. Pharr
Test	Method	Results	Date Analyzed	
Fecal Coliform	Idexx Collert-18	<1 MPN/100ml	04/30/2024	
Lab ID	Sample ID:	Collect Date/Time	Matrix	Sampled by
24-24193	Site: PPI 002	4/30/2024 9:30 AM	Water	M. Pharr
Test	Method	Results	Date Analyzed	
Nitrite Nitrogen	EPA 353.2, Rev. 2.0, 1993	< 0.02 mg/L	05/01/2024	
Total Dissolved Solids (TDS)	SM 2540 C-2015	166 mg/L	05/01/2024	
Ammonia Nitrogen	SM 4500 NH3 C-2011	<0.1 mg/L	05/02/2024	
Total Phosphorus	SM 4500 P (F-H)-2011	0.13 mg/L	05/06/2024	
Chloride	SM4500 Cl E-2011	43 mg/L	05/07/2024	
Nitrate Nitrogen (Calc)				
Nitrate Nitrogen	Subtraction Method	0.02 mg/L	05/10/2024	
Total Nitrogen (Calc)				
Nitrate+Nitrite-Nitrogen	EPA 353.2, Rev. 2.0, 1993	0.02 mg/L	05/08/2024	
Total Kjeldahl Nitrogen (TKN)	SM 4500 Norg B-2011	0.6 mg/L	05/02/2024	
Total Nitrogen	Total Nitrogen	0.6 mg/L	05/10/2024	



Environmental Chemists, Inc.

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710 Bowsertown Road, Manteo, NC 27954 • 252.473.5702 Lab/Fax
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JUN 10 2024

Envirolink, Inc.
PO Box 670
Bailey NC 27807
Attention:

Date of Report: May 13, 2024
Manteo Report #: 24M-909
Report #: 2024-09953
Customer ID: 16040014
Project ID: Carolina Village MHP

Lab ID	Sample ID: M-1358	Collect Date/Time	Matrix	Sampled by
24-24194	Site: PPI 002 -Grab M	4/30/2024 9:30 AM	Water	M. Pharr
Test	Method	Results	Date Analyzed	
Fecal Coliform	Idexx Colilert-18	<1 MPN/100ml	04/30/2024	

Comment:

Reviewed by: 

Sample Receipt Checklist

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JUN 10 2024

Client: Carolina Village Date: 5/11/24 Report Number: 2024 9953

Receipt of sample:		ECEM Pickup <input type="checkbox"/>	Client Delivery <input type="checkbox"/>	UPS <input checked="" type="checkbox"/>	FedEx <input type="checkbox"/>	Other <input type="checkbox"/>
<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	1. Were custody seals present on the cooler?			
<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	2. If custody seals were present, were they intact/unbroken?			
Original temperature upon receipt <u>4.1</u> °C			Corrected temperature upon receipt _____ °C			
How temperature taken:		<input type="checkbox"/> Temperature Blank	<input checked="" type="checkbox"/> Against Bottles			
IR Gun ID: Thomas Traceable S/N: 230222540			IR Gun Correction Factor °C: 0.0			
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	3. If temperature of cooler exceeded 6°C, was Project Mgr./QA notified?				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	4. Were proper custody procedures (relinquished/received) followed?				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	5. Were sample ID's listed on the COC?				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	6. Were samples ID's listed on sample containers?				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	7. Were collection date and time listed on the COC?				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	8. Were tests to be performed listed on the COC?				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	9. Did samples arrive in proper containers for each test?				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	10. Did samples arrive in good condition for each test?				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	11. Was adequate sample volume available?'				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	12. Were samples received within proper holding time for requested tests?				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	13. Were acid preserved samples received at a pH of <2? *				
<input type="checkbox"/> YES	<input type="checkbox"/> NO	14. Were cyanide samples received at a pH >12?				
<input type="checkbox"/> YES	<input type="checkbox"/> NO	15. Were sulfide samples received at a pH >9?				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	16. Were NH3/TKN/Phenol received at a chlorine residual of <0.5 m/L? **				
<input type="checkbox"/> YES	<input type="checkbox"/> NO	17. Were Sulfide/Cyanide received at a chlorine residual of <0.5 m/L?				
<input type="checkbox"/> YES	<input type="checkbox"/> NO	18. Were orthophosphate samples filtered in the field within 15 minutes?				

* TOC/Volatiles are pH checked at time of analysis and recorded on the benchsheet.
** Bacteria samples are checked for Chlorine at time of analysis and recorded on the benchsheet.

Sample Preservation: (Must be completed for any sample(s) incorrectly preserved or with headspace)
Sample(s) _____ were received incorrectly preserved and were adjusted accordingly
by adding (circle one): H₂SO₄ HNO₃ HCl NaOH
Time of preservation: _____ If more than one preservative is needed, notate in comments below

Note: Notify customer service immediately for incorrectly preserved samples. Obtain a new sample or
notify the state lab if directed to analyzed by the customer. Who was notified, date and time: _____

Volatiles Sample(s) _____ were received with headspace

COMMENTS:



Environmental Chemists, Inc.

6602 Windmill Way, Wilmington, NC 28405 • 910.392.0223 Lab • 910.392.4424 Fax
 710 Bowsertown Road, Manteo, NC 27954 • 252.473.5702 Lab/Fax
 255-A Wilmington Highway, Jacksonville, NC 28540 • 910.347.5843 Lab/Fax

ANALYTICAL & CONSULTING CHEMISTS

info@environmentalchemists.com

Envirochem, Inc.
 PO Box 670
 Bailey NC 27807
 Attention:

Date of Report: May 14, 2024
Manteo Report #: 24M-880
Report #: 2024-09700
Customer ID: 16040014
Project ID: Carolina Village MHP

Lab ID	Sample ID:	Collect Date/Time	Matrix	Sampled by
24-23576	Site: PPI 001 Effluent	4/25/2024 11:30 AM	Water	M. Pharr
Test	Method	Results	Date Analyzed	
Nitrite Nitrogen	EPA 353.2, Rev. 2.0, 1993	0.06 mg/L	04/26/2024	
Residue Suspended (TSS)	SM 2540 D-2015	3.9 mg/L	04/29/2024	
Ammonia Nitrogen	SM 4500 NH3 C-2011	2.77 mg/L	04/26/2024	
Total Phosphorus	SM 4500 P (F-H)-2011	0.30 mg/L	05/02/2024	
BOD	SM 5210 B-2018	10 mg/L	04/26/2024	
Nitrate Nitrogen (Calc)				
Nitrate Nitrogen	Subtraction Method	0.04 mg/L	04/29/2024	
Total Nitrogen (Calc)				
Nitrate+Nitrite-Nitrogen	EPA 353.2, Rev. 2.0, 1993	0.10 mg/L	04/29/2024	
Total Kjeldahl Nitrogen (TKN)	SM 4500 Norg B-2011	4.4 mg/L	04/26/2024	
Total Nitrogen	Total Nitrogen	4.5 mg/L	04/29/2024	

Lab ID	Sample ID: M-1312	Collect Date/Time	Matrix	Sampled by
24-23577	Site: PPI 001 Effluent Grab -M	4/25/2024 11:30 AM	Water	M. Pharr
Test	Method	Results	Date Analyzed	
Fecal Coliform	Idexx Colilert-18	<1 MPN/100ml	04/25/2024	

Lab ID	Sample ID:	Collect Date/Time	Matrix	Sampled by
24-23578	Site: PPI 002	4/25/2024 11:30 AM	Water	M. Pharr
Test	Method	Results	Date Analyzed	
Nitrite Nitrogen	EPA 353.2, Rev. 2.0, 1993	0.06 mg/L	04/26/2024	
Ammonia Nitrogen	SM 4500 NH3 C-2011	1.66 mg/L	04/26/2024	
Total Phosphorus	SM 4500 P (F-H)-2011	0.59 mg/L	05/02/2024	
Nitrate Nitrogen (Calc)				
Nitrate Nitrogen	Subtraction Method	0.70 mg/L	04/29/2024	
Total Nitrogen (Calc)				
Nitrate+Nitrite-Nitrogen	EPA 353.2, Rev. 2.0, 1993	0.76 mg/L	04/29/2024	
Total Kjeldahl Nitrogen (TKN)	SM 4500 Norg B-2011	5.5 mg/L	04/26/2024	
Total Nitrogen	Total Nitrogen	6.3 mg/L	04/29/2024	



Environmental Chemists, Inc.

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255-A Wilmington Highway, Jacksonville, NC 28540 • 910.347.5843 Lab/Fax

ANALYTICAL & CONSULTING CHEMISTS

info@environmentalchemists.com

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Envirolink, Inc.
PO Box 670
Bailey NC 27807
Attention:

Date of Report: May 14, 2024
Manteo Report #: 24M-880
Report #: 2024-09700
Customer ID: 16040014
Project ID: Carolina Village MHP

Lab ID	Sample ID: M-1315	Collect Date/Time	Matrix	Sampled by
24-23579	Site: PPI 002 -Grab M	4/25/2024 11:30 AM	Water	M. Pharr
Test	Method	Results	Date Analyzed	
Fecal Coliform	Idexx Colilert-18	<1 MPN/100ml	04/25/2024	

Comment:

Reviewed by: 

JUN 10 2024

Sample Receipt Checklist

OFFICIAL COPY JUN 10 2024

Client: Carolina Village Date: 4/26/24 Report Number: 2024-9700

Receipt of sample:		EChem Pickup <input checked="" type="checkbox"/>	Client Delivery <input type="checkbox"/>	UPS <input type="checkbox"/>	FedEx <input type="checkbox"/>	Other <input type="checkbox"/>
<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	1. Were custody seals present on the cooler?			
<input type="checkbox"/> YES	<input type="checkbox"/> NO	<input checked="" type="checkbox"/> N/A	2. If custody seals were present, were they intact/unbroken?			
Original temperature upon receipt		<u>2.2</u> °C	Corrected temperature upon receipt		_____ °C	
How temperature taken:		<input type="checkbox"/> Temperature Blank	<input checked="" type="checkbox"/> Against Bottles			
IR Gun ID: Thomas Traceable S/N: 230222540			IR Gun Correction Factor °C: 0.0			
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	3. If temperature of cooler exceeded 6°C, was Project Mgr./QA notified?				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	4. Were proper custody procedures (relinquished/received) followed?				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	5. Were sample ID's listed on the COC?				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	6. Were samples ID's listed on sample containers?				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	7. Were collection date and time listed on the COC?				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	8. Were tests to be performed listed on the COC?				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	9. Did samples arrive in proper containers for each test?				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	10. Did samples arrive in good condition for each test?				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	11. Was adequate sample volume available?'				
<input checked="" type="checkbox"/> YES	<input type="checkbox"/> NO	12. Were samples received within proper holding time for requested tests?				
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* TOC/Volatiles are pH checked at time of analysis and recorded on the benchsheet.
** Bacteria samples are checked for Chlorine at time of analysis and recorded on the benchsheet.

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 Sample(s) _____ were received incorrectly preserved and were adjusted accordingly by adding (circle one): H₂SO₄ HNO₃ HCl NaOH
 Time of preservation: _____ If more than one preservative is needed, notate in comments below

Note: Notify customer service immediately for incorrectly preserved samples. Obtain a new sample or notify the state lab if directed to analyzed by the customer. Who was notified, date and time: _____

Volatiles Sample(s) _____ were received with headspace

COMMENTS:

Sampled By: *[Signature]*

SAMPLE TYPE: I = Influent, E = Effluent, W = Well, ST = Stream, SO =

Sample Identification	Collection			Sample Type	Composite or Grab	Container (P or G)	Chlorine mg/L	pH of bottle	LAB ID NUMBER	PRESERVATION								OTHER
	Date	Time	Temp							NONE	HCL	H2SO4	HNO3	NaOH	THIO	FILTERED		
PPI 001 (effluent-2/month)	4/25	11:30			C	P			23576	X		X	←2					BOD, TSS
PPI 001 (effluent-2/month)					C	P			M1312						X			Fecal C
PPI 001 (Mar/July/November)					C	P			23578	X								TDS, CHL
PPI 002 (GW Lower-2/month)					C	P			M1315	X		X	←2		X			Fecal, N
PPI 002 (GW-Mar/Jul/Nov)					C	P				X								TDS, CHL
PPI 003-SW#1 (Mar/Jul/Nov)					C	P				X		X						BOD, TSS
PPI 004-SW#2 (Mar/Jul/Nov)					C	P				X		X						BOD, TSS
					C	P												
					G	G												

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Jun 10 2024

Transfer	Relinquished By:	Date/Time	Received By:
1 BOD, TSS, NH3, TP, TN	<i>[Signature]</i>	4/25/24 4:30	<i>[Signature]</i>
2 NO2, NO3	<i>[Signature]</i>		

Temperature when Received °C: _____ Accepted: Rejected: _____ Resample Request: _____
 Delivered By: *[Signature]* 2.2 DKnotts Received By: *[Signature]* Date: 4/25/24
 Comments: _____ *[Signature]* TURNAROUND 4/26/24