



1602 Clare Avenue
West Palm Beach, FL 33401
t: 561.833.4200 | info@evergladeslabs.com

Lucas Schaffer
Northern Palm Beach County Improvement District
359 Hiatt Drive
Palm Beach Gardens FL 33418

The accompanying report provides the analytical results for the samples listed below. This report is created directly from our database system. The format is designed to comply with the reporting requirements of Chapter 62-160 Florida Administrative Code. The reported data is divided into several sections. Information about each sample is separated by bold lines. In this grouping, sample information appears first which includes the sample number, date and time of collection and receipt in the laboratory, sample collector, sample identifiers and the receipt condition. Each analyte is listed below the appropriate header, starting with METHOD. The Method number, analyte name, results, date (and time) of extraction and analysis, analyst initials, MDL, PQL, batch number, CAS number, duplicate analysis if available, bottle number and field preservation information are listed. Quality assurance information is below the analysis information. Where no data is available, zero is used as a placeholder. Headers describing the information being reported only appear if data is available. Matrix spike and matrix spike duplicate information appears on the left, LCS (Laboratory Control Sample) information appears on the right. The lower space of this section is provided for comments. This line ends with the laboratory ID number for that particular analyte. Reports from other laboratories that provided some of the testing for this report are transmitted as part of this report, but results are not necessarily entered into our data system. Invoices and reports list the total number of pages and the page numbers of official Everglades Laboratories, Inc. documents only. Reports may be printed in duplex mode. Field data may be printed as a separate report document

SAMPLE:	DATE/TIME COLLECTED	CONDITION	MATRIX
191512 Lake S/S Juno Isles Blvd.	04/14/21 1325	2.7°C Wet Ice	SW

LAB ID E86048

19-May-21
191512 187707 1036 17433
FORM DATE 1-17-17





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West Palm Beach, FL 33401
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Northern Palm Beach County Improvement District
359 Hiatt Drive
Palm Beach Gardens FL 33418

[illegible]

Lake S/S Juno Isles Blvd.

MATRIX SW

[illegible]

HN: Heavy non-coliform bacteria (>200 CFU). Constitutes failure.

BEN MARTIN III.BS, Director 561 833 4200

Quality Manager Kyle Martin



Page 2 of 17



**SAMPLE INSTRUCTIONS
AND CHAIN OF
CUSTODY FORM**

Invoice: 17433
Sample No: **191512**

575

4/12/2021

1602 Clare Avenue
West Palm Beach, FL 33401
t: 561.833.4200 | info@evergladeslabs.com



1036
187707
Northern Palm Beach County Improvement District
359 Hiatt Drive
Palm Beach Gardens FL 33418
P: 561 624 7830 F: 561 624 7839

SCHEDULED:

FREQUENCY: MONTHLY

PROJECT: SURFACE WATER SAMPLE
Lake; S/S Juno Isles Blvd., North Palm Beach, FL 33408

PWSID:

Lake S/S Juno Isles Blvd.

COMPOSITE SET UP DATE TIME

*Field measurements made with HH01 FOR pH, TEMP, DO AND COND - 170112567032; pH ALSO WITH OA02

BDESC	AN METHOD	ANALYTE
5 Plastic 250ml + HNO3	5419 EPA 200.7	Sodium
16 Plastic 250ml	5457 EPA 300.0	Chloride

DO	TEMP	SLOPE	READS	TABLE	TIME	pH 7.00
COND	SET	VALUE	READS	TIME		pH 4.01
COND	SET	VALUE	READS	TIME		pH ICV
COND	SET	VALUE	READS	TIME		pH CCV
DO	mg/L	T °C	SC µS/cm	pH	T or F	WL Ft
					Cl2 mg/L	DEPTH Ft

SET	READS	TIME
SET	READS	TIME
SET	READS	TIME
SET	READS	TIME

SAMPLE COLLECTED BY: [Signature] DATE: 4-13-21 TIME: 13:25

Bottle Temp °C 21.7 Wet Ice ☒

SAMPLE RELINQUISHED BY: [Signature] DATE: 4-14-21 TIME: 15:45

SAMPLE RECEIVED BY: [Signature] DATE: 4-14-21 TIME: 15:45

SAMPLE RELINQUISHED BY: DATE: TIME:

SAMPLE RECEIVED BY: DATE: TIME:

Acid preserved sample verification: record pH

H2SO4: ☐ HNO3: ☒ NaOH: ☐ HCL: ☐



Sample Condition Report (SCR)



Client: Northern Palm Beach County Improvement District

Invoice No

17437

Samples Delivered B

RG

Samples Received By

BM3

Date Form Complete

4/4

Check all applicable fields:

PWSID

Sample appearance OK
Chain of Custody Document
Containers Intact
Sample Labels Match COC
Sample Preservative Verification

YES /	NO
YES /	NO
YES /	NO
YES /	NO
YES /	NO

Containers conform to samples

YES /	NO
-------	----

Chlorine residual Present

YES	NO /
-----	------

Sample underfilled

YES	NO /
-----	------

Ice or Ice Packs Present

YES /	NO
-------	----

Packing Material

None /

Bubble Wrap

Paper

Sample within Hold Time

YES /	NO
-------	----

VOC Vials without bubbles

MA

YES	NO
-----	----

Analyses Subbed? Lab

Pace

YES /	NO
-------	----

Fluke IR Thermometer FL01 Used to Measure Representative Bottle.FL TID4 2.7° C Wet Ice

/

Wet Ice

Blue Ice

No ice

Project No 187707

Sample No.	Date/Time Collected	Date/Time Received	Sampled By	Sample Matrix	No. of Container
191512	4/14/2021 1325	4/14/2021 1545	RG	SW	2

Lake S/S

Juno Isles

Blvd.

CID:

RG	Pace											
----	------	--	--	--	--	--	--	--	--	--	--	--

Bottle Desc:

5	16											
---	----	--	--	--	--	--	--	--	--	--	--	--

HAD3 UNP



Analysis Assignment Report (AAR)



1036

Northern Palm Beach County Improvement Distr

359 Hiatt Drive

Palm Beach Gardens

FL

33418

Sample Number **191512**

Date Collected 4/14/2021

Date Received 4/14/2021

Sample ID Lake S/S Juno Isles Blvd.

Time Collected 1325

Time Received 1545

ANALYTE

Chloride

Sodium

METHOD

EPA 300.0

EPA 200.7

LABID

E83079

E83079

LAB_NAME

Pace Analytical Services LLC

Pace Analytical Services LLC

April 23, 2021

Ph.D Ben Martin
Everglades Laboratories, Inc.
1602 Clare Avenue
West Palm Beach, FL 33401

RE: Project: 17433
Pace Project No.: 35626085

Dear Ph.D Martin:

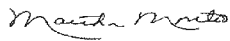
Enclosed are the analytical results for sample(s) received by the laboratory on April 14, 2021. The results relate only to the samples included in this report. Results reported herein conform to the applicable TNI/NELAC Standards and the laboratory's Quality Manual, where applicable, unless otherwise noted in the body of the report.

The test results provided in this final report were generated by each of the following laboratories within the Pace Network:

- Pace Analytical Services - Ormond Beach

If you have any questions concerning this report, please feel free to contact me.

Sincerely,



Martha Montero
martha.montero@pacelabs.com
(386)672-5668
Project Manager

Enclosures



REPORT OF LABORATORY ANALYSIS

This report shall not be reproduced, except in full,
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CERTIFICATIONS

Project: 17433
Pace Project No.: 35626085

Pace Analytical Services Ormond Beach

8 East Tower Circle, Ormond Beach, FL 32174
Alaska DEC- CS/UST/LUST
Alabama Certification #: 41320
Arizona Certification# AZ0819
Colorado Certification: FL NELAC Reciprocity
Connecticut Certification #: PH-0216
Delaware Certification: FL NELAC Reciprocity
Florida Certification #: E83079
Georgia Certification #: 955
Guam Certification: FL NELAC Reciprocity
Hawaii Certification: FL NELAC Reciprocity
Illinois Certification #: 200068
Indiana Certification: FL NELAC Reciprocity
Kansas Certification #: E-10383
Kentucky Certification #: 90050
Louisiana Certification #: FL NELAC Reciprocity
Louisiana Environmental Certificate #: 05007
Maryland Certification: #346
Michigan Certification #: 9911
Mississippi Certification: FL NELAC Reciprocity
Missouri Certification #: 236

Montana Certification #: Cert 0074
Nebraska Certification: NE-OS-28-14
New Hampshire Certification #: 2958
New Jersey Certification #: FL022
New York Certification #: 11608
North Carolina Environmental Certificate #: 667
North Carolina Certification #: 12710
North Dakota Certification #: R-216
Ohio DEP 87780
Oklahoma Certification #: D9947
Pennsylvania Certification #: 68-00547
Puerto Rico Certification #: FL01264
South Carolina Certification: #96042001
Tennessee Certification #: TN02974
Texas Certification: FL NELAC Reciprocity
US Virgin Islands Certification: FL NELAC Reciprocity
Virginia Environmental Certification #: 460165
West Virginia Certification #: 9962C
Wisconsin Certification #: 399079670
Wyoming (EPA Region 8): FL NELAC Reciprocity

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SAMPLE SUMMARY

Project: 17433
Pace Project No.: 35626085

Lab ID	Sample ID	Matrix	Date Collected	Date Received
35626085001	191512	Water	04/14/21 13:25	04/14/21 17:01

REPORT OF LABORATORY ANALYSIS

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SAMPLE ANALYTE COUNT

Project: 17433
Pace Project No.: 35626085

Lab ID	Sample ID	Method	Analysts	Analytes Reported	Laboratory
35626085001	191512	EPA 200.7	CS3	1	PASI-O
		EPA 300.0	EDC	1	PASI-O

PASI-O = Pace Analytical Services - Ormond Beach

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ANALYTICAL RESULTS

Project: 17433
Pace Project No.: 35626085

Sample: 191512		Lab ID: 35626085001		Collected: 04/14/21 13:25		Received: 04/14/21 17:01		Matrix: Water	
Parameters	Results	Units	PQL	MDL	DF	Prepared	Analyzed	CAS No.	Qual
200.7 MET ICP									
Analytical Method: EPA 200.7 Preparation Method: EPA 200.7									
Pace Analytical Services - Ormond Beach									
Sodium	187	mg/L	2.0	0.59	1	04/22/21 10:33	04/23/21 11:22	7440-23-5	
300.0 IC Anions 28 Days									
Analytical Method: EPA 300.0									
Pace Analytical Services - Ormond Beach									
Chloride	320	mg/L	50.0	25.0	10		04/22/21 19:23	16887-00-6	

REPORT OF LABORATORY ANALYSIS

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QUALITY CONTROL DATA

Project: 17433
Pace Project No.: 35626085

QC Batch: 723158	Analysis Method: EPA 200.7
QC Batch Method: EPA 200.7	Analysis Description: 200.7 MET
Associated Lab Samples: 35626085001	Laboratory: Pace Analytical Services - Ormond Beach

METHOD BLANK: 3941920 Matrix: Water
Associated Lab Samples: 35626085001

Parameter	Units	Blank Result	Reporting Limit	MDL	Analyzed	Qualifiers
Sodium	mg/L	0.59 U	2.0	0.59	04/23/21 11:14	

LABORATORY CONTROL SAMPLE: 3941921

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Sodium	mg/L	12.5	12.9	103	85-115	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 3941922 3941923

Parameter	Units	35626085001 Result	MS Spike Conc.	MSD Spike Conc.	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Qual
Sodium	mg/L	187	12.5	12.5	201	203	114	125	70-130	1	20 L	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 3941924 3941925

Parameter	Units	35627359001 Result	MS Spike Conc.	MSD Spike Conc.	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	RPD	Max RPD	Qual
Sodium	mg/L	59100 ug/L	12.5	12.5	72.0	73.3	103	113	70-130	2	20	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

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QUALITY CONTROL DATA

Project: 17433
Pace Project No.: 35626085

QC Batch: 723379	Analysis Method: EPA 300.0
QC Batch Method: EPA 300.0	Analysis Description: 300.0 IC Anions
Associated Lab Samples: 35626085001	Laboratory: Pace Analytical Services - Ormond Beach

METHOD BLANK: 3943530 Matrix: Water
Associated Lab Samples: 35626085001

Parameter	Units	Blank Result	Reporting Limit	MDL	Analyzed	Qualifiers
Chloride	mg/L	2.5 U	5.0	2.5	04/22/21 16:29	

LABORATORY CONTROL SAMPLE: 3943531

Parameter	Units	Spike Conc.	LCS Result	LCS % Rec	% Rec Limits	Qualifiers
Chloride	mg/L	50	48.6	97	90-110	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 3943532 3943533

Parameter	Units	35626395001 Result	MS Spike Conc.	MSD Spike Conc.	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	Max RPD	Qual
Chloride	mg/L	6.4	50	50	54.7	54.8	97	97	90-110	0 20	

MATRIX SPIKE & MATRIX SPIKE DUPLICATE: 3943534 3943535

Parameter	Units	35626734001 Result	MS Spike Conc.	MSD Spike Conc.	MS Result	MSD Result	MS % Rec	MSD % Rec	% Rec Limits	Max RPD	Qual
Chloride	mg/L	8.0	50	50	55.7	57.1	95	98	90-110	2 20	

Results presented on this page are in the units indicated by the "Units" column except where an alternate unit is presented to the right of the result.

REPORT OF LABORATORY ANALYSIS

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QUALIFIERS

Project: 17433
Pace Project No.: 35626085

DEFINITIONS

DF - Dilution Factor, if reported, represents the factor applied to the reported data due to dilution of the sample aliquot.

ND - Not Detected at or above adjusted reporting limit.

TNTC - Too Numerous To Count

MDL - Adjusted Method Detection Limit.

PQL - Practical Quantitation Limit.

RL - Reporting Limit - The lowest concentration value that meets project requirements for quantitative data with known precision and bias for a specific analyte in a specific matrix.

S - Surrogate

1,2-Diphenylhydrazine decomposes to and cannot be separated from Azobenzene using Method 8270. The result for each analyte is a combined concentration.

Consistent with EPA guidelines, unrounded data are displayed and have been used to calculate % recovery and RPD values.

LCS(D) - Laboratory Control Sample (Duplicate)

MS(D) - Matrix Spike (Duplicate)

DUP - Sample Duplicate

RPD - Relative Percent Difference

NC - Not Calculable.

SG - Silica Gel - Clean-Up

U - Indicates the compound was analyzed for, but not detected.

N-Nitrosodiphenylamine decomposes and cannot be separated from Diphenylamine using Method 8270. The result reported for each analyte is a combined concentration.

Pace Analytical is TNI accredited. Contact your Pace PM for the current list of accredited analytes.

TNI - The NELAC Institute.

ANALYTE QUALIFIERS

- I The reported value is between the laboratory method detection limit and the laboratory practical quantitation limit.
- U Compound was analyzed for but not detected.
- L Off-scale high. Actual value is known to be greater than value given.

REPORT OF LABORATORY ANALYSIS

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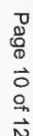
QUALITY CONTROL DATA CROSS REFERENCE TABLE


Project: 17433
Pace Project No.: 35626085

Lab ID	Sample ID	QC Batch Method	QC Batch	Analytical Method	Analytical Batch
35626085001	191512	EPA 200.7	723158	EPA 200.7	723328
35626085001	191512	EPA 300.0	723379		

REPORT OF LABORATORY ANALYSIS

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	Document Name: Sample Condition Upon Receipt Form	Document Revised: May 30, 2018
	Document No: F-FL-C-007 rev. 13	Issuing Authority: Pace Florida Quality Office

WO# : 35626085

Project #
Project Manager
Client:

PM: MIM Due Date: 04/23/21
CLIENT: EVELAB

Date and Initials of person:

Examining contents:

Label: HAN

Deliver: HAN

pH: CJA

Thermometer Used: T337

Date: 4/15/21

Time: 0001

Initials: CJA

State of Origin:

☐ For WV projects, all containers verified to $\leq 6^\circ\text{C}$

Cooler #1 Temp. °C 4.3 (Visual) 4.1 (Correction Factor) 4.4 (Actual)

Cooler #2 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual)

Cooler #3 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual)

Cooler #4 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual)

Cooler #5 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual)

Cooler #6 Temp. °C _____ (Visual) _____ (Correction Factor) _____ (Actual)

☐ Samples on ice, cooling process has begun

☐ Samples on ice, cooling process has begun

☐ Samples on ice, cooling process has begun

☐ Samples on ice, cooling process has begun

☐ Samples on ice, cooling process has begun

☐ Samples on ice, cooling process has begun

Courier: ☐ Fed Ex ☐ UPS ☐ USPS ☐ Client ☒ Commercial ☐ Pace ☐ Other _____

Shipping Method: ☐ First Overnight ☐ Priority Overnight ☐ Standard Overnight ☐ Ground ☐ International Priority

☐ Other _____

Billing: ☐ Recipient ☐ Sender ☐ Third Party ☐ Credit Card ☐ Unknown

Tracking # _____

Custody Seal on Cooler/Box Present: ☒ Yes ☐ No Seals intact: ☒ Yes ☐ No Ice: Wet Blue Dry None

Packing Material: ☐ Bubble Wrap ☒ Bubble Bags ☐ None ☐ Other _____

Samples shorted to lab (If Yes, complete) Shorted Date: _____ Shorted Time: _____ Qty: _____

Comments:

Chain of Custody Present	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Chain of Custody Filled Out	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<u>no project here</u>
Relinquished Signature & Sampler Name COC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	<u>no samples</u>
Samples Arrived within Hold Time	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Rush TAT requested on COC	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Sufficient Volume	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Correct Containers Used	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Sample Labels match COC (sample IDs & date/time of collection)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
All containers needing acid/base preservation have been checked.	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
All Containers needing preservation are found to be in compliance with EPA recommendation:	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Exceptions: VOA, Coliform, TOC, O&G, Carbamates		
Headspace in VOA Vials? (>6mm):	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	
Trip Blank Present:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input checked="" type="checkbox"/> N/A	

Preservation Information:

Preservative: _____

Lot #/Trace #: _____

Date: _____ Time: _____

Initials: _____

Client Notification/ Resolution:


Person Contacted: _____

Date/Time: _____

Comments/ Resolution (use back for additional comments):

Project Manager Review: _____

Date: _____

	Document Name:	Document Revised:
	Sample Condition Upon Receipt Form	May 30, 2018
	Document No.: F-FL-C-007 rev. 13	Issuing Authority: Pace Florida Quality Office

WO#: 35626085

(SCUR)

Project # PM: MIM **Due Date:** 04/23/21
Project Manager: CLIENT: EVELAB
Client:

Date and Initials of person:
Examining contents: EM
Label: _____
Deliver: _____
pH: _____

Thermometer Used: T243 Date: 4/14/21 Time: 1717 Initials: EM

State of Origin:

☐ For WV projects, all containers verified to $\leq 6^{\circ}\text{C}$

Cooler #1 Temp. $^{\circ}\text{C}$ 2.7 (Visual) 0.0 (Correction Factor) 2.7 (Actual)
 Cooler #2 Temp. $^{\circ}\text{C}$ _____ (Visual) _____ (Correction Factor) _____ (Actual)
 Cooler #3 Temp. $^{\circ}\text{C}$ _____ (Visual) _____ (Correction Factor) _____ (Actual)
 Cooler #4 Temp. $^{\circ}\text{C}$ _____ (Visual) _____ (Correction Factor) _____ (Actual)
 Cooler #5 Temp. $^{\circ}\text{C}$ _____ (Visual) _____ (Correction Factor) _____ (Actual)
 Cooler #6 Temp. $^{\circ}\text{C}$ _____ (Visual) _____ (Correction Factor) _____ (Actual)

☐ Samples on ice, cooling process has begun
☐ Samples on ice, cooling process has begun
☐ Samples on ice, cooling process has begun
☐ Samples on ice, cooling process has begun
☐ Samples on ice, cooling process has begun
☐ Samples on ice, cooling process has begun

Courier: ☐ Fed Ex ☐ UPS ☐ USPS ☒ Client ☐ Commercial ☐ Pace ☐ Other _____
 Shipping Method: ☐ First Overnight ☐ Priority Overnight ☐ Standard Overnight ☐ Ground ☐ International Priority
☐ Other _____
 Billing: ☐ Recipient ☐ Sender ☐ Third Party ☐ Credit Card ☐ Unknown

Tracking # _____

Custody Seal on Cooler/Box Present: ☐ Yes ☒ No Seals intact: ☐ Yes ☐ No Ice: ☒ Wet ☐ Blue ☐ Dry ☐ None
 Packing Material: ☐ Bubble Wrap ☐ Bubble Bags ☒ None ☐ Other _____
 Samples shorted to lab (If Yes, complete) Shorted Date: _____ Shorted Time: _____ Qty: _____

Comments:

Chain of Custody Present	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Chain of Custody Filled Out	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Relinquished Signature & Sampler Name COC	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Samples Arrived within Hold Time	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Rush TAT requested on COC	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No <input type="checkbox"/> N/A	
Sufficient Volume	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Correct Containers Used	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Containers Intact	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Sample Labels match COC (sample IDs & date/time of collection)	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
All containers needing acid/base preservation have been checked.	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
All Containers needing preservation are found to be in compliance with EPA recommendation:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Exceptions: VOA, Coliform, TOC, O&G, Carbamates		
Headspace in VOA Vials? (>6mm):	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Trip Blank Present:	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	

Client Notification/ Resolution:
 Person Contacted: _____ Date/Time: _____

Comments/ Resolution (use back for additional comments): _____

Project Manager Review: _____ Date: _____