



**EMSL Analytical, Inc.**

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EMSL Order: 182503839

Customer ID: PARS51

Customer PO: 11966-01

Project ID:

**Attention:** Julian Fernandez  
Montrose Environmental Solutions  
500 Horizon Drive  
Suite 540  
Robbinsville, NJ 08691

**Phone:** (609) 890-7277

**Fax:** (609) 890-9116

**Received Date:** 08/14/2025 02:20 PM

**Analysis Date:** 08/15/2025

**Collected Date:** 08/14/2025

**Project:** Wissahicon Park Cap Repair

**Test Report: Fiber Count by Phase Contrast Microscopy (PCM), NIOSH 7400 Method - A Rules,  
Revision 3, Issue 3, 6/14/2019**

Sample	Location	Sample Date	Volume (L)	Fibers	Fields	LOD (fib/cc)	Fibers/mm <sup>2</sup>	Fibers/cc	Notes
Cap-01 182503839-0001	Field Blank	08/14/2025		<5.5	100		<7.01		Field Blank
<hr/>									
Cap-02 182503839-0002	Lab Blank	08/14/2025		<5.5	100		<7.01		Field Blank
<hr/>									
Cap-03 182503839-0003	Park	08/14/2025	600	<5.5	100	0.0045	<7.01	<0.0045	
<hr/>									
Cap-04 182503839-0004	Ambler Ave East	08/14/2025	600	<5.5	100	0.0045	<7.01	<0.0045	
<hr/>									
Cap-05 182503839-0005	Ambler Ave Middle	08/14/2025	600	<5.5	100	0.0045	<7.01	<0.0045	
<hr/>									
Cap-06 182503839-0006	Ambler Ave West	08/14/2025	600	<5.5	100	0.0045	<7.01	<0.0045	

The results reported have been blank corrected as applicable.

**The Fibers/cc (fiber per cubic centimeter) reading should be less than 0.01 which is the US EPA re-occupancy standard**

Analyst(s):

Kevin Ream PCM 6

Kevin Ream, Laboratory Manager  
or other Approved Signatory

EMSL maintains liability limited to cost of analysis. Interpretation and use of test results are the responsibility of the client. This report relates only to the samples reported above, and may not be reproduced, except in full, without written approval by EMSL. EMSL bears no responsibility for sample collection activities or analytical method limitations. The report reflects the samples as received. Results are generated from the field sampling data (sampling volumes and areas, locations, etc.) provided by the client on the Chain of Custody. Samples are within quality control criteria and met method specifications unless otherwise noted. Limit of detection is 7 fibers/mm<sup>2</sup>. Fiber counts outside the recommended fiber density range of the method (100-1300 fibers/mm<sup>2</sup>) have greater than optimal variability and are probably biased. Field blank results, when available, are used to blank correct results. NIOSH 7400 requires field blanks be submitted at a rate of 10%, with a minimum of 2 per set. Measurement of uncertainty available upon request. The results in this report meet all requirements of the NELAC standards unless otherwise noted. Intra-laboratory Sr values: 5-20 fibers = 0.3, 21-50 fibers = 0.25, 51-100 fibers = 0.21. Inter-laboratory Sr values (Average of EMSL round robin data) = 0.32. Samples analyzed by EMSL Analytical, Inc. Plymouth Meeting, PA Philadelphia ALL-292, VA 3333000315, AIHA LAP, LLC-IHLAP Accredited #178659

Initial report from: 08/15/2025 10:24 AM

EMSL ANALYTICAL, INC.  
LABORATORY PRODUCTS TRAINING

# Asbestos Chain of Custody

## EMSL Order Number (Lab Use Only):

182503839

EMSL ANALYTICAL, INC.  
200 ROUTE 130 N  
CINNAMINSON, NJ 08077  
PHONE: (800) 220-3675  
FAX: (856) 786-5973

Company : Montrose Environmental		EMSL-Bill to: <input checked="" type="checkbox"/> Same <input type="checkbox"/> Different If Bill to is Different note instructions in Comments** Third Party Billing requires written authorization from third party	
Street: 500 Horizon Drive, Suite 540		Zip/Postal Code: 08691	
City: Robbinsville	State/Province: NJ	Country: USA	
Report To (Name): Julian Fernandez-Obregon		Fax #: 609-890-9116	
Telephone #: 609-890-7277		Email Address: jfernandez@montrose-env.com	
Project Name/Number: Wissahickon Park Cap Repair			
Please Provide Results: <input type="checkbox"/> Fax <input checked="" type="checkbox"/> Email		Purchase Order: 1966-01	
U.S. State Samples Taken: PA			

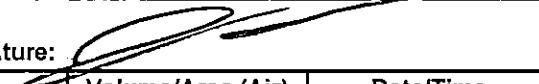
## Turnaround Time (TAT) Options\* – Please Check

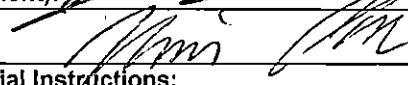
3 Hour  6 Hour  24 Hour  48 Hour  72 Hour  96 Hour  1 Week  2 Week

\*For TEM Air 3 hr through 6 hr, please call ahead to schedule. \*There is a premium charge for 3 Hour TEM AHERA or EPA Level II TAT. You will be asked to sign an authorization form for this service. Analysis completed in accordance with EMSL's Terms and Conditions located in the Analytical Price Guide.

PCM-Air <input checked="" type="checkbox"/> NIOSH 7400 <input type="checkbox"/> w/ OSHA 8hr. TWA	TEM – Air <input type="checkbox"/> 4-4.5hr TAT (AHERA only) <input type="checkbox"/> AHERA 40 CFR, Part 763 <input type="checkbox"/> NIOSH 7402	TEM- Dust <input type="checkbox"/> Microvac - ASTM D 5755 <input type="checkbox"/> Wipe - ASTM D6480 <input type="checkbox"/> Carpet Sonication (EPA 600/J-93/167)
	<b>PLM - Bulk (reporting limit)</b> <input type="checkbox"/> PLM EPA 600/R-93/116 (<1%) <input type="checkbox"/> PLM EPA NOB (<1%)	<b>TEM - Bulk</b> <input type="checkbox"/> TEM EPA NOB <input type="checkbox"/> NYS NOB 198.4 (non-friable-NY) <input type="checkbox"/> Chatfield SOP <input type="checkbox"/> TEM Mass Analysis-EPA 600 sec. 2.5
Point Count <input type="checkbox"/> 400 (<0.25%) <input type="checkbox"/> 1000 (<0.1%) Point Count w/Gravimetric <input type="checkbox"/> 400 (<0.25%) <input type="checkbox"/> 1000 (<0.1%) <input type="checkbox"/> NYS 198.1 (friable in NY) <input type="checkbox"/> NYS 198.6 NOB (non-friable-NY) <input type="checkbox"/> NIOSH 9002 (<1%)	<b>TEM – Water: EPA 100.2</b> Fibers >10µm <input type="checkbox"/> Waste <input type="checkbox"/> Drinking All Fiber Sizes <input type="checkbox"/> Waste <input type="checkbox"/> Drinking	<b>Other:</b> <input type="checkbox"/>

 Check for Positive Stop – Clearly Identify Homogenous Group

Samplers Name: Joshua Allen	Samplers Signature: 		
Sample #	Sample Description	Volume/Area (Air) HA # (Bulk)	Date/Time Sampled
See Attached			

Client Sample # (s):	Total.# of Samples: 6
Relinquished (Client): 	Date: 8/14/25
Received (Lab): 	Time:
Comments/Special Instructions:	Date: 8/14/25
Comments/Special Instructions:	Time: 220pm



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**Asbestos Chain of Custody  
EML Order Number (Lab Use Only):**

1 2 3 4 5 6 7 8 9 10

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*Additional Pages of the Chain of Custody are only necessary if needed for additional sample information*

**\*Comments/Special Instructions:**

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