



# BRILLIANT

## ENVIRONMENTAL SERVICES, LLC

Full Service Environmental Consulting and Contracting

April 16, 2024

Mr. Arpan Shah  
Kids R Kids Learning Academy  
55 Fidelity Plaza  
[arpan@kidskidsnorthbrunswick.com](mailto:arpan@kidskidsnorthbrunswick.com) (Transmitted Via Email)

Re: Drinking Water Sampling Results– Lead and Copper  
55 Fidelity Plaza  
North Brunswick Township, Middlesex County, New Jersey  
Brilliant Project Number: 4776B.21

Dear Mr. Shah:

Brilliant Environmental Services, LLC (*Brilliant*) was on Site on April 12, 2024 to collect drinking water samples from your facility or analysis of Lead and Copper. The purpose of the sampling was to fulfill the New Jersey Department of Children and Families Office of Licensing (NJDCF) requirements as per N.J.A.C 3A:52-5.3(i) of the NJ Manual of Requirements for Child Care Centers.

*According to the manual, "If the facility is supplied by a public community water system, the applicant or facility operator shall provide documentation of water testing conducted by a laboratory certified by the Department of Environmental Protection for water testing for lead and copper from all faucets and other sources used for drinking water or food preparation and at least 50 percent of all indoor water faucets utilized by the center.*

Fifteen (15) drinking water samples were collected and submitted to Precision Analytical Services, Inc. (PAS) of Toms River (NJDEP Certification # 15005) for analysis of Lead and Copper. Neither lead nor copper were detected above the DWQS. The laboratory data package is enclosed.

Please contact me with any questions or comments.

Sincerely,  
**BRILLIANT ENVIRONMENTAL SERVICES, LLC**

Brian Babcock  
Director of LSRP/Industrial Services

## DRINKING WATER TESTING CHECKLIST

*Note: This form is for child care centers that are supplied water by a community water system.*

•PROGRAMS IN OPERATING PUBLIC SCHOOLS ARE NOT REQUIRED TO COMPLETE THIS FORM•

### CHILD CARE CENTER INFORMATION

Name of Child Care Center:		License ID:	
Site Address of Center:	Building # and Street:	Municipality:	County:
Sponsor/Sponsor Representative:		Phone Number:	Email:

### CERTIFICATION OF COMPLIANCE WITH LEAD & COPPER SAMPLING AT THE ABOVE CHILD CARE CENTER

Sampling Date(s):	
1. <input type="checkbox"/> YES <input type="checkbox"/> NO	Does the center have a signed contract with a New Jersey Certified Drinking Water Laboratory for lead & copper analysis?
2. <input type="checkbox"/> YES <input type="checkbox"/> NO	Is there an onsite water outlet assessment in accordance with technical guidance?
3. <input type="checkbox"/> YES <input type="checkbox"/> NO	Is there a floor plan in accordance with technical guidance?
4. <input type="checkbox"/> YES <input type="checkbox"/> NO Sample Date:	Were all the drinking water outlets in the center where a child or staff has or may have access (including food preparation and outside drinking water outlets) sampled?
5. <input type="checkbox"/> YES <input type="checkbox"/> NO Sample Date:	Were at least 50% of all indoor water faucets utilized by the center sampled?
6. <input type="checkbox"/> YES <input type="checkbox"/> NO	Does the child care center have the chain of custody and analytical reports for all drinking water outlets sampled? Please attach copies.
7. <input type="checkbox"/> YES <input type="checkbox"/> NO	Was all the drinking water outlets sampled in the sequence determined by the floor plan beginning with the outlet closest to the point of entry?
8. <input type="checkbox"/> YES <input type="checkbox"/> NO	Were all samples taken after the water sat undisturbed in pipes for at least 8 hours but no more than 48 hours?
9. <input type="checkbox"/> YES <input type="checkbox"/> NO	Were samples collected in pre-cleaned high density polyethylene (HDPE) 250 ml wide mouth single use rigid sample containers?
10. <input type="checkbox"/> YES <input type="checkbox"/> NO	Were all existing aerators, screens, and filters left in place prior to and during the sampling event?
11. <input type="checkbox"/> YES <input type="checkbox"/> NO	Were only cold water samples collected?
12. <input type="checkbox"/> YES <input type="checkbox"/> NO	Did no pre-stagnant flushing take place unless the outlet deviated from normal use and documented on flushing log?
13. <input type="checkbox"/> YES <input type="checkbox"/> NO	Was all point of use treatment on outlets, such as filters, documented?
14. <input type="checkbox"/> YES <input type="checkbox"/> NO	Did any result exceed the action level for lead (15 µg/L) or copper (1300 µg/L)?
15. <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	If a result exceeded the action level for lead (15 µg/L) or copper (1300 µg/L) was use of all drinking water outlets immediately discontinued?
16. <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	If a result exceeded the action level for lead (15 µg/L) or copper (1300 µg/L) was bottled water provided for drinking and food preparation?
17. <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	If a result exceeded the action level for lead (15 µg/L) or copper (1300 µg/L) were signs posted to indicate that the outlets are not to be used for drinking or food preparation?

18. <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	Did all drinking water outlets with a result that exceeded the action level for lead (15 µg/L) or copper (1300 µg/L) have a follow-up flush sample conducted?
19. <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	If a result exceeded the action level for lead (15 µg/L) or copper (1300 µg/L) was the local health office notified of results?
20. <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	If any of the results exceeded the action level for lead (15 µg/L) or copper (1300 µg/L), was notification, including results and remediation measures, provided to the parent(s) of all children attending the center, the staff, and NJDCF?
21. <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	Were any drinking water outlets or potable plumbing replaced or repaired as a remedy for an action level exceedance?
22. <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A Sample Date:	If any drinking water outlet or potable plumbing was replaced or repaired, were additional samples collected after installation?
23. <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	Was any chemical treatment unit or process installed to remedy an action level exceedance (e.g., corrosion control treatment)?
24. <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A Sample Date:	If a chemical treatment unit or process was installed to remedy an action level exceedance (e.g., corrosion control treatment), were additional samples collected after the installation?
25. <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	Was a mechanical process implemented to remedy an action level exceedance (e.g., flushing program)?
26. <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	If a mechanical process was implemented to remedy an action level exceedance (e.g., flushing program), were additional samples collected after the implementation?
27. <input type="checkbox"/> YES <input type="checkbox"/> NO <input type="checkbox"/> N/A	If no remedial action was taken, such as those indicated in 21 through 26 above, has the center implemented a written plan of action for use of bottled water for drinking and food preparation?

**CERTIFICATION:** By signing below, the Sponsor or Sponsor Representative certifies that all answers on this checklist are true and accurate:

Sponsor/Sponsor Representative: (PRINT)	
Signature:	
Signature Date:	

### DRINKING WATER TESTING RESOURCES

Schools - Lead Sampling Information

<http://www.nj.gov/dep/watersupply/schools.htm>

Lead Sampling in Schools Technical Guidance FAQs

<http://www.nj.gov/dep/watersupply/pdf/leadfaq.pdf>

3Ts for Reducing Lead in Drinking Water: Testing

<https://www.epa.gov/dwreginfo/3ts-reducing-lead-drinking-water-testing>

Quick Reference Guide Sampling For Lead in Drinking Water in Schools:

<http://www.nj.gov/dep/watersupply/pdf/quickref.pdf>

List of NJ Certified Laboratories:

<https://www13.state.nj.us/DataMiner/Search/SearchByCategory?isExternal=y&getCategory=y&catName=Certified+Laboratories>

Drinking Water Outlet Inventory Form:

[http://www.nj.gov/dep/watersupply/doc/SP\\_Attachment%20C.docx](http://www.nj.gov/dep/watersupply/doc/SP_Attachment%20C.docx)

Sampling Water Use Certification:

[http://www.nj.gov/dep/watersupply/doc/SP\\_Attachment%20F.docx](http://www.nj.gov/dep/watersupply/doc/SP_Attachment%20F.docx)

Filter Inventory Form:

[http://www.nj.gov/dep/watersupply/doc/SP\\_Attachment%20D.docx](http://www.nj.gov/dep/watersupply/doc/SP_Attachment%20D.docx)

Results Letter Template:

<http://www.nj.gov/dep/watersupply/doc/resultsletter.doc>

State of New Jersey  
Department of Children and Families  
Office of Licensing

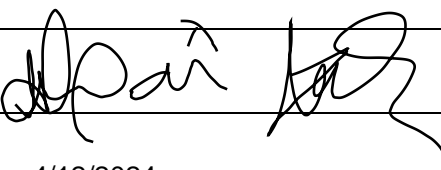
## DRINKING WATER TESTING STATEMENT OF ASSURANCE

• PROGRAMS IN OPERATING PUBLIC SCHOOLS ARE NOT REQUIRED TO COMPLETE THIS FORM •

Name of Child Care Center:		License ID:
Site Address ( <i>Building # and Street</i> ):		
Municipality:	County:	
Sponsor/Sponsor Representative:		Phone #:
Sponsor/Sponsor Representative Email:		
Additional Contact Person:		Phone #:
Title:	Email:	

1. The center, as described above, has reviewed the MANUAL OF REQUIREMENTS FOR CHILD CARE CENTERS requiring testing for lead and copper in drinking water and provides assurance that the development and implementation of a testing program was completed in accordance with N.J.A.C. 3A:52-5.3(i)5i as evidenced by our completion of the attached Drinking Water Testing Checklist.
2. The center, as described above, provided all notifications of test results consistent with the requirements of this subchapter.
3. The center, as described above, will continue to fully implement the requirements of this subchapter, including the continuance of any actions taken in response to a lead or copper action level exceedance (e.g., continue to provide bottled water and/or maintain any remedial measure or treatment unit).

**CERTIFICATION:** By signing below, the Sponsor or Sponsor Representative certifies that all statements above are true and accurate:

Sponsor/Sponsor Representative: (PRINT)	
Signature:	
Signature Date:	4/12/2024



### CERTIFICATE OF ANALYSIS

**Customer :** Brilliant Environmental  
163 Rt. 37 W. Suite 201  
Toms River Twp, NJ 08755

**Project ID :** Kids R Kids (PO 4776B.21), 55 Fiedlity Plaza, North Brunswick, NJ  
**PAS Project ID :** P24-02562

**Matrix :** Drinking Water  
**Report Date :** 4/15/2024

PAS Sample ID	Client ID	Analysis	Results	Units	DF	PQL	MDL	MCL	Method	Date Sampled	Date Analyzed
P24-02562-01	RM122-HWC	Copper	213	ug/L	1	50.0	22.6	1300 *	SM 3111 B	4/12/24 06:35	4/15/24 10:25
P24-02562-01	RM122-HWC	Lead	ND	ug/L	1	2.00	0.900	15.0 *	SM 3113 B	4/12/24 06:35	4/12/24 15:01
P24-02562-02	RM121-HWC	Copper	341	ug/L	1	50.0	22.6	1300 *	SM 3111 B	4/12/24 06:37	4/15/24 10:26
P24-02562-02	RM121-HWC	Lead	ND	ug/L	1	2.00	0.900	15.0 *	SM 3113 B	4/12/24 06:37	4/12/24 15:04
P24-02562-03	RM120-HWC	Copper	313	ug/L	1	50.0	22.6	1300 *	SM 3111 B	4/12/24 06:39	4/15/24 10:27
P24-02562-03	RM120-HWC	Lead	ND	ug/L	1	2.00	0.900	15.0 *	SM 3113 B	4/12/24 06:39	4/12/24 15:08
P24-02562-04	RM118-HWC	Copper	377	ug/L	1	50.0	22.6	1300 *	SM 3111 B	4/12/24 06:40	4/15/24 10:28
P24-02562-04	RM118-HWC	Lead	ND	ug/L	1	2.00	0.900	15.0 *	SM 3113 B	4/12/24 06:40	4/12/24 15:12
P24-02562-05	RM116-HWC	Copper	405	ug/L	1	50.0	22.6	1300 *	SM 3111 B	4/12/24 06:43	4/15/24 10:29
P24-02562-05	RM116-HWC	Lead	6.20	ug/L	1	2.00	0.900	15.0 *	SM 3113 B	4/12/24 06:43	4/12/24 15:24
P24-02562-06	RM116-CBR	Copper	790	ug/L	1	50.0	22.6	1300 *	SM 3111 B	4/12/24 06:42	4/15/24 10:32
P24-02562-06	RM116-CBR	Lead	2.24	ug/L	1	2.00	0.900	15.0 *	SM 3113 B	4/12/24 06:42	4/12/24 15:28
P24-02562-07	RM112-HW	Copper	322	ug/L	1	50.0	22.6	1300 *	SM 3111 B	4/12/24 06:49	4/15/24 10:34
P24-02562-07	RM112-HW	Lead	ND	ug/L	1	2.00	0.900	15.0 *	SM 3113 B	4/12/24 06:49	4/12/24 15:32
P24-02562-08	RM117 - Kitchenette	Copper	432	ug/L	1	50.0	22.6	1300 *	SM 3111 B	4/12/24 06:41	4/15/24 10:35
P24-02562-08	RM117 - Kitchenette	Lead	ND	ug/L	1	2.00	0.900	15.0 *	SM 3113 B	4/12/24 06:41	4/12/24 15:36
P24-02562-09	Nurse @ Front	Copper	1170	ug/L	1	50.0	22.6	1300 *	SM 3111 B	4/12/24 06:56	4/15/24 10:36
P24-02562-09	Nurse @ Front	Lead	2.73	ug/L	1	2.00	0.900	15.0 *	SM 3113 B	4/12/24 06:56	4/12/24 15:40
P24-02562-10	Kitchen - S1	Copper	332	ug/L	1	50.0	22.6	1300 *	SM 3111 B	4/12/24 06:51	4/15/24 10:38
P24-02562-10	Kitchen - S1	Lead	ND	ug/L	1	2.00	0.900	15.0 *	SM 3113 B	4/12/24 06:51	4/12/24 15:44
P24-02562-11	Kitchen - S2	Copper	231	ug/L	1	50.0	22.6	1300 *	SM 3111 B	4/12/24 06:52	4/15/24 10:39
P24-02562-11	Kitchen - S2	Lead	ND	ug/L	1	2.00	0.900	15.0 *	SM 3113 B	4/12/24 06:52	4/12/24 15:48
P24-02562-12	Kitchen - S3	Copper	148	ug/L	1	50.0	22.6	1300 *	SM 3111 B	4/12/24 06:53	4/15/24 10:40
P24-02562-12	Kitchen - S3	Lead	1.24 J	ug/L	1	2.00	0.900	15.0 *	SM 3113 B	4/12/24 06:53	4/12/24 15:52
P24-02562-13	RM114-HW	Copper	322	ug/L	1	50.0	22.6	1300 *	SM 3111 B	4/12/24 06:46	4/15/24 10:43
P24-02562-13	RM114-HW	Lead	ND	ug/L	1	2.00	0.900	15.0 *	SM 3113 B	4/12/24 06:46	4/12/24 16:14
P24-02562-14	RM113-HW	Copper	368	ug/L	1	50.0	22.6	1300 *	SM 3111 B	4/12/24 06:47	4/15/24 10:44
P24-02562-14	RM113-HW	Lead	ND	ug/L	1	2.00	0.900	15.0 *	SM 3113 B	4/12/24 06:47	4/12/24 16:18
P24-02562-15	RM115-HW	Copper	515	ug/L	1	50.0	22.6	1300 *	SM 3111 B	4/12/24 06:44	4/15/24 10:45
P24-02562-15	RM115-HW	Lead	ND	ug/L	1	2.00	0.900	15.0 *	SM 3113 B	4/12/24 06:44	4/12/24 16:22

Except for the parameters tested, PAS makes no representation as to the fitness or quality of the water sample taken.

PQL = Practical Quantitation Limit  
MDL = Minimum Detection Limit  
MCL = Maximum Contaminant Level  
DF = Dilution Factor  
ND = Analyzed for but not detected  
J = Estimated result  
\* Federal Action Level

All samples are analyzed in accordance with New Jersey Department of Environmental Protection Protocol

Mark D. Feitelson, Lab. Director



Specialists in Drinking Water Testing Technologies • Residential • Industrial • Municipal

PRECISION ANALYTICAL SERVICES, INC.

2161 WHITESVILLE ROAD TOMS RIVER, NJ 08755 PHONE 732-814-1515 FAX 732-814-1516

# CHAIN OF CUSTODY

Customer: Brilliant Environmental Services, LLC  
 Address: 163 Route 37 West, Suite 201  
 Toms River, NJ 08755  
 Phone: 732-818-3380

School Name: Kids R Kids (PO 4776B.21)  
 School Address: 55 Fiedlity Plaza, North Brunswick, NJ  
 Sampled By:  
 Print Name:  
 RESULTS TO: [smith@brilliantenvironmental.com](mailto:smith@brilliantenvironmental.com)

Sample ID Location	Date: 4/12/24 Time Sampled	Matrix Code	Grab or Comp	Flush Sample	Filter Present	# Containers	Glass or Plastic	Analysis	LAB ID
Rm122 - Hwc	0635	DW	Grab			1	250 ml Plastic	Pb/Cu	P24-02562-01
Rm121 - Hwc	0637	DW	Grab			1	250 ml Plastic	Pb/Cu	-02
Rm120 - Hwc	0639	DW	Grab			1	250 ml Plastic	Pb/Cu	-03
Rm118 - Hwc	0640	DW	Grab			1	250 ml Plastic	Pb/Cu	-04
Rm116 - Hwc	0643	DW	Grab			1	250 ml Plastic	Pb/Cu	-05
Rm116 - CBR	0642	DW	Grab			1	250 ml Plastic	Pb/Cu	-06
Rm112 - HW	0649	DW	Grab			1	250 ml Plastic	Pb/Cu	-07
Rm117 - Kitchenette	0641	DW	Grab			1	250 ml Plastic	Pb/Cu	-08
Nurse @ Front	0650	DW	Grab			1	250 ml Plastic	Pb/Cu	-09
Kitchen - S1	0651	DW	Grab			1	250 ml Plastic	Pb/Cu	-10
Kitchen - S2	0652	DW	Grab			1	250 ml Plastic	Pb/Cu	-11
Kitchen - S3	0653	DW	Grab			1	250 ml Plastic	Pb/Cu	-12
Rm114 - HW	0646	DW	Grab			1	250 ml Plastic	Pb/Cu	-13
Rm113 - HW	0647	DW	Grab			1	250 ml Plastic	Pb/Cu	-14
Rm115 - Hwc	0644	DW	Grab			1	250 ml Plastic	Pb/Cu	P24-02562-15

**SAMPLES RECEIVED PRESERVED W/ HNO3**

Page  of  Deliverables: PDF Std.  PDF Reduc  PDF Full  EDD  Date/Time Preserved with HNO3

**MATRIX CODES:** GW = Ground Water, WW = Waste Water, SW = Surface Water, DW = Drinking Water, S = Soil, L = Liquid, SD = Sludge, B = Blank, K = Solid (specify):

**PRESERVATIVE CODES:** 0 = Ice 1 = HCl 2 = H2SO4 3 = NaOH 4 = HNO3 5 = Other

	Print Name:	Signature:	Empty	Date + Time
Relinquished:	<i>Therese Zach Smith</i>	<i>Therese Zach Smith</i>		4/12/24 0850
Received:	<i>Joceliah...</i>	<i>Joceliah...</i>		
Relinquished:				
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