

Annual Composting Facility Report

July 1st, <u>2023</u> (Year) – June 30th, <u>2024</u> (Year) Due July 31st

| County: BLACK HAWK | Permit #: <u>07-COM-02-22</u> | Send completed form to: |
|---|--|--|
| Responsible Official: DOYLE SMITH | | Becky.Jolly@dnr.iowa.gov, or: Land Quality Bureau |
| Facility Name: CITY OF CEDAR FALLS | | c/o Theresa Stiner |
| Address: 2200 TECHNOLOGY PARKWAY | , | 502 E 9 th St |
| City, State, Zip: CEDAR FALLS, IA 506 | 13 | Des Moines IA 50319-0034 |
| Please make address corrections as nece | ssary | |
| REGISTERED FACILITIES ONLY: check the I | oox that describes your facility | |
| Xard waste only (vegetative matte | er such as grass clippings, leaves, ga | rden waste, brush, and trees) |
| Food residuals singly or in combin | ation with yard waste and/or agricu | ultural waste (includes but is not limited to |
| | | uced during farm processing. Dead animals are |
| | · · · · · · · · · · · · · · · · · · · | two tons or less per week. (If food waste and |
| | | complete the Permitted Facilities section.) |
| | | owner of at least some of the sites where se sites where animals are generated or other |
| materials are also composted comple | | e sites where animals are generated of other |
| PERMITTED FACILITIES ONLY: check types | of materials accepted and provide | tonnage |
| Yard Waste | tonnage: | |
| Wood (other than yard waste) | tonnage: | |
| Agricultural waste | tonnage: | |
| Animal mortalities | tonnage: | |
| Sewage Sludge | tonnage: | |
| Industrial sludge | tonnage: | |
| Food residuals | tonnage: | |
| Paper | tonnage: | |
| Other (specify): | tonnage: | |
| | | |
| Total tonnage of material composted | to | nnage: 7,175 |
| Total capacity of the facility (maximum | | |
| | | |
| | | unt of finished compost REMOVED from the e provide tonnage information for this reporting |
| period. | miswer yes to any question, please | e provide tormage information for this reporting |
| Amount of finished composted REMC | OVED from the Facility: 6.900 | Tons/year |
| Is the finished Compost: (check all the | | |
| | | ven away 4,800 tons/year |
| 4 Used by your organization 2,10 | | |
| Is your product registered with the lo | | nd Stewardship? |
| 13 your product registered with the 10 | wa bepartment of Agriculture & La | un accomatinatinati |

| COMPOST FACILITY OPERATION INFORMATION | N. In this section provide information as to how the comp | posting facility operates. |
|---|---|--|
| What method/s of composting is emplo | yed at the facility | |
| ☐ Turned piles/windrows | Aerated static piles/windrows | post |
| ☐ In-vessel | Other (please describe) | |
| Facility is enclosed | | |
| Has the facility operator taken and pass | ed an approved composting course? | |
| Yes, has taken and passed a compos | | |
| No, has not taken a composting ope | | |
| Please attach a copy of the test results t recorded. All composting facilities are re | uct analyzed? | ence 105) are clearly ost piles, and weekly |
| | | |
| | CERTIFICATION the owner, operator, or authorized representative of the with the information reported above, and that I believe accurate and complete. | |
| that I have examined and am familiar to | the owner, operator, or authorized representative of the with the information reported above, and that I believe | the information is true, |
| | the owner, operator, or authorized representative of the with the information reported above, and that I believe accurate and complete. | |
| that I have examined and am familiar of the state of the | the owner, operator, or authorized representative of the with the information reported above, and that I believe accurate and complete. Date: | the information is true, |
| Signature: Name & agency of Person Certifying: | the owner, operator, or authorized representative of the with the information reported above, and that I believe accurate and complete. Date: Doyle Smith City of Cedar Falls | the information is true, 15 July 2024 |
| Signature: Name & agency of Person Certifying: Email: | the owner, operator, or authorized representative of the with the information reported above, and that I believe accurate and complete. Date: Doyle Smith City of Cedar Falls | the information is true, 15 July 2024 |
| Signature: Name & agency of Person Certifying: Email: | the owner, operator, or authorized representative of the with the information reported above, and that I believe accurate and complete. Date: Doyle Smith City of Cedar Falls | the information is true, 15 July 2024 |
| Signature: Name & agency of Person Certifying: Email: | the owner, operator, or authorized representative of the with the information reported above, and that I believe accurate and complete. Date: Doyle Smith City of Cedar Falls | the information is true, 15 July 2024 |
| Signature: Name & agency of Person Certifying: Email: | the owner, operator, or authorized representative of the with the information reported above, and that I believe accurate and complete. Date: Doyle Smith City of Cedar Falls | the information is true, 15 July 2024 |

ANALYTICAL REPORT

PREPARED FOR

Generated 7/17/2024 5:03:28 PM

Attn: Patty Tometich Cedar Falls Water Reclamation 501 E. 4th Cedar Falls, Iowa 50613

JOB DESCRIPTION

annual compost grab testing

JOB NUMBER

310-285357-1

Eurofins Cedar Falls 3019 Venture Way Cedar Falls IA 50613

Eurofins Cedar Falls

Job Notes

This report may not be reproduced except in full, and with written approval from the laboratory. The results relate only to the samples tested. For questions please contact the Project Manager at the e-mail address or telephone number listed on this page.

The test results in this report relate only to the samples as received by the laboratory and will meet all requirements of the methodology, with any exceptions noted. This report shall not be reproduced except in full, without the express written approval of the laboratory. All questions should be directed to the Eurofins Environment Testing North Central, LLC Project Manager.

Authorization

Generated 7/17/2024 5:03:28 PM

Authorized for release by

Conner Calhoun, Project Management Assistant I

Conner.Calhoun@et.eurofinsus.com

(319)277-2401

Case Narrative

Client: Cedar Falls Water Reclamation Project: annual compost grab testing

Job ID: 310-285357-1 Eurofins Cedar Falls

Job Narrative 310-285357-1

Analytical test results meet all requirements of the associated regulatory program listed on the Accreditation/Certification Summary Page unless otherwise noted under the individual analysis. Data qualifiers are applied to indicate exceptions. Noncompliant quality control (QC) is further explained in narrative comments.

- Matrix QC may not be reported if insufficient sample or site-specific QC samples were not submitted. In these situations, to demonstrate precision and accuracy at a batch level, a LCS/LCSD may be performed, unless otherwise specified in the method.
- Surrogate and/or isotope dilution analyte recoveries (if applicable) which are outside of the QC window are confirmed unless attributed to a dilution or otherwise noted in the narrative.

Regulated compliance samples (e.g. SDWA, NPDES) must comply with the associated agency requirements/permits.

Receipt

The sample was received on 7/10/2024 8:45 AM. Unless otherwise noted below, the sample arrived in good condition, and, where required, properly preserved and on ice. The temperature of the cooler at receipt time was 1.1°C.

Metals

No additional analytical or quality issues were noted, other than those described above or in the Definitions/ Glossary page.

General Chemistry

No additional analytical or quality issues were noted, other than those described above or in the Definitions/ Glossary page.

Biology

No additional analytical or quality issues were noted, other than those described above or in the Definitions/ Glossary page.

Eurofins Cedar Falls

Job ID: 310-285357-1

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Sample Summary

Client: Cedar Falls Water Reclamation Project/Site: annual compost grab testing Job ID: 310-285357-1

| Lab Sample ID | Client Sample ID | Matrix | Collected | Received |
|---------------|----------------------------------|--------|----------------|----------------|
| 310-285357-1 | City of Cedar Falls Compost Site | Solid | 07/10/24 08:22 | 07/10/24 08:45 |

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Client Sample Results

Client: Cedar Falls Water Reclamation Project/Site: annual compost grab testing

Client Sample ID: City of Cedar Falls Compost Site Date Collected: 07/10/24 08:22

Lab Sample ID: 310-285357-1

Date Received: 07/10/24 08:45

Matrix: Solid

Job ID: 310-285357-1

| Analyte | Result | Qualifier | RL | MDL | Unit | D | Analyzed | Dil Fac | Analyst |
|---|-------------------|-------------------------|------------------|--------|-----------|------------|--------------------------|---------|---------|
| Arsenic | 5.16 | | 1.85 | 0.779 | mg/Kg | — <u> </u> | 07/17/24 14:11 | 5 | NFT2 |
| Cadmium | < 0.352 | | 0.927 | 0.352 | mg/Kg | ₩ | 07/17/24 14:11 | 5 | NFT2 |
| Copper | 28.7 | | 2.78 | 1.13 | mg/Kg | ₩ | 07/17/24 14:11 | 5 | NFT2 |
| Lead | 23.2 | | 4.64 | 1.45 | mg/Kg | ₩ | 07/17/24 14:11 | 5 | NFT2 |
| Nickel | 8.02 | | 2.78 | 1.26 | mg/Kg | ₽ | 07/17/24 14:11 | 5 | NFT2 |
| Selenium | <1.39 | | 2.78 | 1.39 | mg/Kg | ☼ | 07/17/24 14:11 | 5 | NFT2 |
| Zinc | 77.0 | | 9.27 | 4.45 | mg/Kg | ₩ | 07/17/24 14:11 | 5 | NFT2 |
| Mercury | 0.0377 | | 0.0375 | 0.0154 | mg/Kg | ₩ | 07/17/24 14:53 | 1 | A6US |
| General Chemistry | | | | | | | | | |
| Analyte | Result | Qualifier | RL | RL | Unit | D | Analyzed | Dil Fac | Analyst |
| | | | 0.1 | 0.1 | % | | 07/11/24 14:26 | 1 | T5AC |
| Percent Moisture (Moisture) | 51.4 | | | | | | | | TEAC |
| Percent Moisture (Moisture) Percent Solids (Moisture) | 51.4 48.6 | | 0.1 | 0.1 | % | | 07/11/24 14:26 | 1 | T5AC |
| Percent Solids (Moisture) | 48.6 | ne Filter) | 0.1 | 0.1 | % | | 07/11/24 14:26 | 1 | TSAC |
| | 48.6 I (Membra | ne Filter) Qualifier | 0.1 RL | | % Unit | D | 07/11/24 14:26 Analyzed | | Analyst |

7/17/2024

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Accreditation/Certification and Definitions Summary

Client: Cedar Falls Water Reclamation Project/Site: annual compost grab testing Job ID: 310-285357-1

Laboratory: Eurofins Cedar Falls

Unless otherwise noted, all analytes for this laboratory were covered under each accreditation/certification below.

| Authority | P | Program | Identification Number | Expiration Date |
|------------------------|-------------------------------|----------------------------------|---|---------------------------|
| owa | S | State | 007 | 12-01-25 |
| The following analytes | are included in this report h | out the laboratory is not certif | ied by the governing authority. This list ma | y include analytes for wh |
| the agency does not o | • | out the laboratory is not serial | led by the governing additionty. This list that | y molade analytes for wi |
| • , | • | Matrix | Analyte | y include analytes for wi |
| the agency does not o | ffer certification. | • | , , , | |

| Glossary | |
|----------------|---|
| Abbreviation | These commonly used abbreviations may or may not be present in this report. |
| n | Listed under the "D" column to designate that the result is reported on a dry weight basis |
| %R | Percent Recovery |
| 1C | Result is from the primary column on a dual-column method. |
| 2C | Result is from the confirmation column on a dual-column method. |
| CFL | Contains Free Liquid |
| CFU | Colony Forming Unit |
| CNF | Contains No Free Liquid |
| DER | Duplicate Error Ratio (normalized absolute difference) |
| Dil Fac | Dilution Factor |
| DL | Detection Limit (DoD/DOE) |
| DL, RA, RE, IN | Indicates a Dilution, Re-analysis, Re-extraction, or additional Initial metals/anion analysis of the sample |
| DLC | Decision Level Concentration (Radiochemistry) |
| EDL | Estimated Detection Limit (Dioxin) |
| LOD | Limit of Detection (DoD/DOE) |
| LOQ | Limit of Quantitation (DoD/DOE) |
| MCL | EPA recommended "Maximum Contaminant Level" |
| MDA | Minimum Detectable Activity (Radiochemistry) |
| MDC | Minimum Detectable Concentration (Radiochemistry) |
| MDL | Method Detection Limit |
| ML | Minimum Level (Dioxin) |
| MPN | Most Probable Number |
| MQL | Method Quantitation Limit |
| MRL | Method Reporting Limit |
| NC | Not Calculated |
| ND | Not Detected at the reporting limit (or MDL or EDL if shown) |
| NEG | Negative / Absent |
| POS | Positive / Present |
| PQL | Practical Quantitation Limit |
| PRES | Presumptive |
| QC | Quality Control |
| RER | Relative Error Ratio (Radiochemistry) |
| RL | Reporting Limit or Requested Limit (Radiochemistry) |
| RPD | Relative Percent Difference, a measure of the relative difference between two points |
| SDL | Sample Detection Limit |
| SDL | Sample Detection Limit |
| SDL | Sample Detection Limit |
| TEF | Toxicity Equivalent Factor (Dioxin) |
| TEQ | Toxicity Equivalent Quotient (Dioxin) |
| TNTC | Too Numerous To Count |

Eurofins Cedar Falls

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Method Summary

Client: Cedar Falls Water Reclamation Project/Site: annual compost grab testing Job ID: 310-285357-1

| Method | Method Description | Protocol | Laboratory |
|----------|------------------------------------|----------|------------|
| 6020B | Metals (ICP/MS) | SW846 | EET CF |
| 7471B | Mercury (CVAA) | SW846 | EET CF |
| Moisture | Percent Moisture | EPA | EET CF |
| SM 9222D | Coliforms, Fecal (Membrane Filter) | SM | EET CF |
| 3050B | Preparation, Metals | SW846 | EET CF |
| 7471B | Preparation, Mercury | SW846 | EET CF |

Protocol References:

EPA = US Environmental Protection Agency

SM = "Standard Methods For The Examination Of Water And Wastewater"

SW846 = "Test Methods For Evaluating Solid Waste, Physical/Chemical Methods", Third Edition, November 1986 And Its Updates.

Laboratory References:

EET CF = Eurofins Cedar Falls, 3019 Venture Way, Cedar Falls, IA 50613, TEL (319)277-2401

Eurofins Cedar Falls

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Environment Testing America

eurofins

Cooler/Sample Receipt and Temperature Log Form

| Client Information | |
|--|--|
| Client: City of Ce dar Falls - | Water Recla mation |
| City/State: Celar Falls STATE | Project: |
| Receipt Information | |
| Date/Time PATE 10/24 845 | Received By: |
| Delivery Type: ☐ UPS ☐ FedEx | ☐ FedEx Ground ☐ US Mail ☐ Spee-Dee |
| ☐ Lab Courier ☐ Lab Field Services | Other: |
| Condition of Cooler/Containers | |
| Sample(s) received in Cooler? | If yes: Cooler ID: C/ias |
| Multiple Coolers? Yes No | If yes: Cooler # of |
| Cooler Custody Seals Present? Yes No | If yes: Cooler custody seals intact? Yes |
| Sample Custody Seals Present? Yes No | If yes: Sample custody seals intact? Yes |
| Trip Blank Present? | If yes: Which VOA samples are in cooler? ↓ |
| | |
| | |
| Temperature Record | x , & 61 |
| | |
| Coolant: Wet ice Blue ice Dry ice | e Dother: Packs NONE |
| Thermometer ID: 4 | Correction Factor (°C): |
| | Correction Factor (°C): |
| Thermometer ID: 4 | Correction Factor (°C): |
| Thermometer ID: • Temp Blank Temperature – If no temp blank, or temp blank temperature Uncorrected Temp (°C): • Sample Container Temperature | Correction Factor (°C): mperature above criteria, proceed to Sample Container Temperature Corrected Temp (°C): |
| Thermometer ID: • Temp Blank Temperature – If no temp blank, or temp blank temperature – If no temp blank, or temp blank temperature – If no temp blank, or temp blank temperature – If no temp blank, or temp blank temperature – If no temp blank, or temp blank temperature – If no temp blank, or temp blank temperature – If no temp blank, or temp blank temperature – If no temp blank, or temp blank temperature – If no temp blank, or temp blank temperature – If no temp blank, or temp blank temperature – If no temp blank, or temp blank temperature – If no temp blank, or temp blank temperature – If no temp blank, or temp blank temperature – If no temp blank temperature – If no temp blank, or temp blank temperature – If no temper | Correction Factor (°C): mperature above criteria, proceed to Sample Container Temperature Corrected Temp (°C): |
| Thermometer ID: • Temp Blank Temperature – If no temp blank, or temp blank tell Uncorrected Temp (°C): • Sample Container Temperature Container(s) used: Uncorrected Temp | Correction Factor (°C): mperature above criteria, proceed to Sample Container Temperature Corrected Temp (°C): |
| Thermometer ID: • Temp Blank Temperature – If no temp blank, or temp blank tell Uncorrected Temp (°C): • Sample Container Temperature Container(s) used: Container(s) | Correction Factor (°C): mperature above criteria, proceed to Sample Container Temperature Corrected Temp (°C): |
| Thermometer ID: • Temp Blank Temperature – If no temp blank, or temp blank temperature Uncorrected Temp (°C): • Sample Container Temperature Container(s) used: Uncorrected Temp (°C): Corrected Temp (°C): | Correction Factor (°C): mperature above criteria, proceed to Sample Container Temperature Corrected Temp (°C): CONTAINER 2 |
| Thermometer ID: • Temp Blank Temperature – If no temp blank, or temp blank temperature Uncorrected Temp (°C): • Sample Container Temperature Container(s) used: Uncorrected Temp (°C): Corrected Temp (°C): Exceptions Noted | Correction Factor (°C): mperature above criteria, proceed to Sample Container Temperature Corrected Temp (°C): CONTAINER 2 |
| Thermometer ID: Temp Blank Temperature – If no temp blank, or temp blank temperature Uncorrected Temp (°C): Sample Container Temperature Container(s) used: Uncorrected Temp (°C): Corrected Temp (°C): Exceptions Noted 1) If temperature exceeds criteria, was sample(s) received. | Correction Factor (°C): mperature above criteria, proceed to Sample Container Temperature Corrected Temp (°C): CONTAINER 2 ived same day of sampling? |
| Thermometer ID: • Temp Blank Temperature – If no temp blank, or temp blank temperature Uncorrected Temp (°C): • Sample Container Temperature Container(s) used: Uncorrected Temp (°C): Corrected Temp (°C): Exceptions Noted | Correction Factor (°C): mperature above criteria, proceed to Sample Container Temperature Corrected Temp (°C): CONTAINER 2 ived same day of sampling? |
| Thermometer ID: Temp Blank Temperature – If no temp blank, or temp blank temperature Uncorrected Temp (°C): Sample Container Temperature Container(s) used: Uncorrected Temp (°C): Corrected Temp (°C): Exceptions Noted 1) If temperature exceeds criteria, was sample(s) received a) If yes: Is there evidence that the chilling process | Correction Factor (°C): mperature above criteria, proceed to Sample Container Temperature Corrected Temp (°C): CONTAINER 2 ived same day of sampling? Yes No as began? Yes No the integrity of sample containers is compromised? |
| Thermometer ID: Temp Blank Temperature – If no temp blank, or temp blank temperature Uncorrected Temp (°C): Sample Container Temperature Container(s) used: Uncorrected Temp (°C): Corrected Temp (°C): Exceptions Noted 1) If temperature exceeds criteria, was sample(s) received a) If yes: Is there evidence that the chilling process 2) If temperature is <0°C, are there obvious signs that (e.g., bulging septa, broken/cracked bottles, frozen Note If yes, contact PM before proceeding. If no, process | Correction Factor (°C): Imperature above criteria, proceed to Sample Container Temperature Corrected Temp (°C): CONTAINER 2 |
| Thermometer ID: Temp Blank Temperature – If no temp blank, or temp blank temperature Uncorrected Temp (°C): Sample Container Temperature Container(s) used: Uncorrected Temp (°C): Corrected Temp (°C): Exceptions Noted 1) If temperature exceeds criteria, was sample(s) received a) If yes: Is there evidence that the chilling process 2) If temperature is <0°C, are there obvious signs that (e.g., bulging septa, broken/cracked bottles, frozen | Correction Factor (°C): Imperature above criteria, proceed to Sample Container Temperature Corrected Temp (°C): CONTAINER 2 |
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. eurofins

| Send Report To: Tyter Griffin, Patty Tometroh, Quinn Aalfs Address: 501 East Fourth Street Chy/State/Zip Code: Cedar Falls Nater Reclamation Address: 501 East Fourth Street Address: 501 East Fourth Street Address: 501 East Fourth Street Chy/State/Zip Code: Cedar Falls Nater Reclamation Sampled (pull) Date Composite C | × × × × × × × × × × × × × × × × × × × | | NOTE please do multiple dilutions for | Coliform MPN, <1,000 expected | NOTE: All turn around times are calculated from the time of receipt at Eurofins TestAmerica Sample is solids (compost) | NOTICE: Pre-Arrangements must be made AT LEAST 48 Hours in ADVANCE to receive results RI of <1 000 MPN required as ner | with RUSH turn around time commitments; additional charges may be assessed. | 10wa 507 Ciaptoi 155:5 | Relinquished by: Date Time Received by: Date Time Relinquished by: Date Time Annual Date Time Time | Shipped Via: N/A - walk-ın Comments: | ica by: Date, , Time Temperature Upon Receipt (Obs'd °C): Labora |
|--|---------------------------------------|--|---------------------------------------|-------------------------------|--|---|---|------------------------|--|--|--|
|--|---------------------------------------|--|---------------------------------------|-------------------------------|--|---|---|------------------------|--|--|--|



DEPARTMENT OF PUBLIC WORKS

City of Cedar Falls 2200 Technology Parkway Cedar Falls, Iowa 50613 www.cedarfalls.com

> Administration Division ◆ Planning & Community Services Division Phone: 319-273-8606 Fax: 319-273-8610

Water Reclamation Division Phone: 319-273-8633 Fax: 319-273-8610

To: Dovle Smith

From: Patty Tometich, Wastewater Treatment Lab Tech

cc: Tyler Griffin, Quinn Aalfs

Date: July 18, 2024

RE: Lab Test Report - 2024 Compost Sample Test Results

The annual compost sample was submitted to the lab on 7/10/2024 at 0822. Samples were also submitted to Eurofins TestAmerica laboratory fecal coliforms, metals and solids analysis.

As per State of Iowa Administrative Code 5670, Environmental Protection Commission, Chapter 105 Organic Materials Composting Facilities, 105.3 (10), publication date 01/21/2015, the compost sample shall meet the criteria listed below.

- Inert materials, "....the concentration of human-made inert materials such as glass, metal and plastic is less than 1.5 percent by dry weight. Compost shall not be applied to land, sold or given away unless the size of any human-made inert materials is less than 13 mm (0.512 inches)."
- "Fecal coliforms shall be less than 1000 most probable number (MPN) per gram of total solids (dry weigh basis)...."
- "The concentrations of human-made inert materials comply with 105.3 (10) and the concentrations of all metals are less than the following:

| metals are less than the followin |
|-----------------------------------|
| concentration mg/kg dry weight |
| 41 |
| 39 |
| 1500 |
| 300 |
| 17 |
| 420 |
| 36 |
| 2800" |
| |

7-10-24 Final Compost Sample Test Results

• Inert materials: No glass, metal or plastic materials were found in the sample. There were multiple small twig pieces, pictured below with a ruler for scale reference.



Thus, the compost sample met quantity and size limits for human-made inert material ["...less than 1.5 percent by dry weight"; "...size less than 13 mm (0.512 inches)"]

- Fecal coliforms were tested at Eurofins TestAmerica laboratory. The result for fecal coliforms was <210 CFU most probable number (MPN) per gram dry weight basis. This result passes the code requirement that, "fecal coliforms shall be less than 1000 most probable number (MPN) per gram of total solids (dry weigh basis)...."
- Metals concentrations results from Eurofins TestAmerica laboratory are summarized below. All results were below the maximum limit as listed in the code.

| | MAXIMUM concentration | ACTUAL concentration |
|---------------|-----------------------|----------------------|
| name of metal | mg/kg dry weight | mg/kg dry weight |
| Arsenic (As) | 41 | 5.16 |
| Cadmium (Cd) | 39 | < 0.352 |
| Copper (Cu) | 1500 | 28.7 |
| Lead (Pb) | 300 | 23.2 |
| Mercury (Hg) | 17 | 0.0377 |
| Nickel (Ni) | 420 | 8.02 |
| Selenium (Se) | 36 | <1.39 |
| Zinc (Zn) | 2800 | 77.0 |

• The solids results, tested in the City of Cedar Falls lab, are in the table below.

| | | AVERAGE | | AVERAGE | | AVERAGE |
|-------------------|--------|---------|--------|---------|----------|----------|
| | % | % | % | % | % | % |
| | Total | Total | Fixed | Fixed | Volatile | Volatile |
| Sample ID | Solids | Solids | Solids | Solids | Solids | Solids |
| compost | 49.90 | | 63.81 | | 36.19 | |
| compost duplicate | 49.32 | 49.61* | 63.36 | 65.59 | 36.64 | 36.41 |

^{*} Note: Total solids result from Eurofins TestAmerica laboratory report was 48.6% On the next page is a table with the past solids test data. Please do advise me of any questions you may have about this report.

Compost Samples - Historical Solids Test Result Summary

| | AVERAGE % Total Solids | | | |
|------|------------------------------|--|------------------------------|---------------------------------|
| Year | City WRF Lab Result | Eurofins Test America Lab Result | AVERAGE % Fixed Solids | AVERAGE % Volatile Solids |
| 2017 | 57.47 | | 78.36 | 21.64 |
| 2018 | 56.41 | 54.8 | 77.29 | 22.71 |
| 2019 | 56.95 | 58.0 | 71.96 | 28.04 |
| 2020 | 55.76 | 65.8 | 58.71 | 41.30 |
| 2021 | 53.36 | 55.4 | 51.38 | 48.62 |
| 2022 | 61.16 | 61.3 | 62.56 | 37.44 |
| 2023 | 46.42 | 45.9 | 57.65 | 42.36 |
| 2024 | 49.61 | 48.6 | 63.59 | 36.41 |