

Summary of Your Facility's Follow-up Results Package

Dear Alicia Mojica,




04/16/2026

We are writing with follow-up drinking water results at your facility. Please review the enclosed documents for important details.


Esperanza Academy (Middle)
4261 N 5th St
Philadelphia, PA 19140

Highlights:

Your facility's follow-up results and next steps:

-  2 outlets have additional recommendations to further reduce lead levels.
-  Your 2 highest outlets meet state criteria for grant funding for your facility to replace with new water outlets and install filters certified to reduce lead. Learn more at <https://www.pa.gov/grants/search/grant-details/dep/18>.
-  Continue to follow your Routine Water Practices Plan.
Review the enclosed Results Letter for specific recommendations at each outlet.

Reminder about potential sources of lead in water at your facility:

-  Lead comes from lead plumbing in buildings. Lead *does not* come from source water, treatment plants, or water mains.
 - Your facility was built in 1910, before Pennsylvania banned lead pipes and restricted lead in solder and brass.
 - We visited your facility on 04/12/2025 and looked at your *visible* plumbing to *spot check* for lead components:
 - Service line: We have incomplete records of your service line. The portion inside your facility is Unknown.
 - Building pipes: We found ductile iron pipe. Pennsylvania banned lead pipes in 1991.
 - Solder: We did not find lead solder in our spot check. Plumbing work since 1991 must use “lead-free” solder.
 - Brass: All water outlets and valves have brass components. Plumbing work since 2014 must use “lead-free” brass.

Enclosed Documents:

1. **Results Letter:** Results and whether you should take action at an outlet to keep lead out of drinking water.
2. **Analytical Report:** Laboratory report to submit to the City Health Department and with any grant funding applications.
3. **Routine Water Practices Plan:** Specific low-to-no-cost recommendations for your facility, including a log to keep records.
4. **Guidance Packet:**
 - (a) **Guidance and Action Plan:** Overview of possible actions. Please talk to us about any plumbing changes.
 - (b) **Quick Guide to Eliminating Sources of Lead:** Guide to help your decision making.
 - (c) **Parent and Caregiver FAQ:** Aid to guide your communications with staff, parents, and other caregivers.
 - (d) **Do Not Use Fixture Sign:** If you choose to shut off an outlet, then you can post this sign when you do so.

Thank you for working with us.

Sincerely,

School and Childcare Lead Testing Program

Philadelphia Water Department | Bureau of Laboratory Services
1500 E. Hunting Park Avenue, Philadelphia, PA 19124-4941
215-685-1407 | SchoolLeadTesting@phila.gov
<https://water.phila.gov/lead/school-childcare>

Full results and recommendations enclosed 

Recommended Routine Water Practices for Your Facility

Specific guidance for your facility's water outlets is enclosed. Follow this plan to keep lead out of drinking water for low to no cost. Any action that reduces lead exposure is impactful.

Esperanza Academy (Middle)
4261 N 5th St
Philadelphia, PA 19140

Overview of Routine Water Practices



Always use cold water for cooking and drinking, including preparing baby formula. Hot water out of the tap dissolves more metal. Heat separately on a stove or in a kettle as needed. Remember that boiling does not remove lead.



Run your water ("flushing") at the beginning of each week to get rid of water sitting in pipes and outlets. The more time water sits in contact with building plumbing, the more lead it may contain. Follow the flushing order and times listed on the next page.



Clean aerators ("faucet screens") every 6 months to remove trapped particles. Otherwise, aerators may release lead into water over time like a tea bag. Disassemble and soak screens in vinegar, then scrub the screens with a toothbrush.



Maintain filters certified to reduce lead according to manufacturer's instructions. Look for filters that meet NSF/ANSI Standard 53 and Standard 42 and claim lead reduction.



Post signs indicating how to use water from water outlets in your facility. Where should people get water for drinking or cooking? Where should people only wash hands or clean?



Test your water with PWD every 5 years.
Your last round of testing was on January 30, 2026.

Routine Water Practices Plan by Water Outlet on next page ►

Routine Water Practices Plan by Water Outlet

Flush these water outlets in the order and for the time specified. Maintain aerators, filters, and signs where applicable. Use the attached Routine Water Practices Log to document your work. An example log is included to guide you.

Building	Floor	Location	Water Outlet	Flushing Order	Flushing Time	Aerator	Filter
Main	1	Utility Closet next to Room 133	Utility Sink Faucet (Cold)	1	10 minutes	No	No
Main	1	Hallway near Gym	Bottle Filler	2	30 seconds	No	Yes
Main	1	Hallway near Gym	Left Water Fountain	3	30 seconds	No	Yes
Main	1	Hallway near Gym	Right Water Fountain	4	30 seconds	No	Yes
Main	1	Nurse's Office	Sink Faucet (Cold)	5	30 seconds	Yes	No
Main	1	Hallway outside of Room 115	Bottle Filler	6	30 seconds	No	Yes
Main	1	Hallway outside of Room 115	Left Water Fountain	7	30 seconds	No	Yes
Main	1	Hallway outside of Room 115	Right Water Fountain	8	30 seconds	No	Yes
Main	1	Hallway outside of Room 170	Bottle Filler	9	30 seconds	No	Yes
Main	1	Hallway outside of Room 170	Left Water Fountain	10	30 seconds	No	Yes
Main	1	Hallway outside of Room 170	Right Water Fountain	11	30 seconds	No	Yes
Main	1	Staff Lounge	Sink Faucet (Cold)	12	30 seconds	Yes	No
Main	1	Staff Lounge	Sprayer	13	30 seconds	Yes	No
Main	1	Cafeteria	Bottle Filler	14	30 seconds	No	Yes
Main	1	Cafeteria	Left Water Fountain	15	30 seconds	No	Yes
Main	1	Cafeteria	Right Water Fountain	16	30 seconds	No	No
Main	1	Kitchen	Handwashing Sink Faucet (Cold)	17	30 seconds	Yes	No
Main	1	Kitchen	Food Washing Sink Faucet (Cold)	18	30 seconds	No	No
Main	1	Kitchen	Staff Handwashing Sink Faucet (Cold)	19	30 seconds	Yes	No
Main	1	Kitchen	3-Basin Sink Faucet (Cold)	20	30 seconds	No	No

Plan by Water Outlet continues on next page ►

Routine Water Practices Plan by Water Outlet (Continued)

Flush these water outlets in the order and for the time specified. Maintain aerators, filters, and signs where applicable. Use the attached Routine Water Practices Log to document your work. An example log is included to guide you.

Building	Floor	Location	Water Outlet	Flushing Order	Flushing Time	Aerator	Filter
Main	1	Kitchen	2-Basin Sink Faucet (Cold)	21	30 seconds	No	No
Main	1	Kitchen	Hand-washing Sink Faucet (Cold)	22	30 seconds	Yes	No
Main	1	Kitchen	Hand-washing Sink Faucet (Cold)	23	30 seconds	Yes	No
Main	1	Staff Bathroom near Room 180	Sink Faucet (Cold)	24	30 seconds	No	No
Main	2	Utility Closet across Room 203	Sink Faucet (Cold)	25	10 minutes	No	No
Main	2	Hallway by Room 219	Bottle Filler	26	30 seconds	No	Yes
Main	2	Hallway by Room 219	Left Water Fountain in Left Unit	27	30 seconds	No	Yes
Main	2	Hallway by Room 219	Right Water Fountain in Left Unit	28	30 seconds	No	Yes
Main	2	Hallway by Room 219	Left Water Fountain in Middle Unit	29	30 seconds	No	No
Main	2	Hallway by Room 219	Right Water Fountain in Middle Unit	30	30 seconds	No	No
Main	2	Hallway by Room 219	Left Water Fountain in Right Unit	31	30 seconds	No	No
Main	2	Hallway by Room 219	Right Water Fountain in Right Unit	32	30 seconds	No	No
Main	2	Room 219	Left Most Sink Faucet (Cold)	33	30 seconds	No	No
Main	2	Room 219	Second from Left Sink Faucet (Cold)	34	30 seconds	No	No
Main	2	Room 219	Third from Left Sink Faucet (Cold)	35	30 seconds	No	No
Main	2	Room 219	Fourth from Left Sink Faucet (Cold)	36	30 seconds	No	No
Main	2	Room 219	Right of Eyewash Station Sink Faucet (Cold)	37	30 seconds	No	No
Main	2	Room 219	Second from Right Sink Faucet (Cold)	38	30 seconds	No	No
Main	2	Room 217	Left Most Sink Faucet (Cold)	39	30 seconds	No	No
Main	2	Room 217	Second from Left Sink Faucet (Cold)	40	30 seconds	No	No

Routine Water Practices Plan by Water Outlet (Continued)

Flush these water outlets in the order and for the time specified. Maintain aerators, filters, and signs where applicable. Use the attached Routine Water Practices Log to document your work. An example log is included to guide you.

Building	Floor	Location	Water Outlet	Flushing Order	Flushing Time	Aerator	Filter
Main	2	Room 217	Third from Left Sink Faucet (Cold)	41	30 seconds	No	No
Main	2	Room 217	Fourth from Left Sink Faucet (Cold)	42	30 seconds	No	No
Main	2	Room 217	Fifth from Left Sink Faucet (Cold)	43	30 seconds	No	No
Main	2	Room 217	Sixth from Left Sink Faucet (Cold)	44	30 seconds	No	No
Main	2	Room 217	Seventh from Left Sink Faucet (Cold)	45	30 seconds	No	No
Main	2	Room 217	Right Most Handwashing Sink Faucet (Cold)	46	5 minutes	No	No
Main	2	Room 215	Left Most Handwashing Sink Faucet (Cold)	47	30 seconds	No	No
Main	2	Room 215	Second from Left Sink Faucet (Cold)	48	30 seconds	No	No
Main	2	Room 215	Third from Left Sink Faucet (Cold)	49	30 seconds	No	No
Main	2	Room 215	Fourth from Left Sink Faucet (Cold)	50	30 seconds	No	No
Main	2	Room 215	Fifth from Left Sink Faucet (Cold)	51	30 seconds	No	No
Main	2	Room 215	Sixth from Left Sink Faucet (Cold)	52	30 seconds	No	No
Main	2	Room 215	Right Sink Faucet (Cold)	53	30 seconds	No	No
Main	2	Art Room (Room 248)	Left Sink Faucet (Cold)	54	30 seconds	Yes	No
Main	2	Art Room (Room 248)	Middle Sink Faucet (Cold)	55	30 seconds	Yes	No
Main	2	Art Room (Room 248)	Right Sink Faucet (Cold)	56	30 seconds	Yes	No

Routine Water Practices Log (Document your work. Use this sheet for all water outlets, or a sheet for each)

Year: 2025

All Water Outlets or Building: _____ Floor: _____ Location: _____ Water Outlet: _____

Flushing Log (check off days when flushing is completed)

January	February	March	April	May	June	July	August	September	October	November	December
1. <input type="checkbox"/>	1. <input type="checkbox"/>	1. <input type="checkbox"/>	1. <input type="checkbox"/>	1. <input type="checkbox"/>	1. <input type="checkbox"/>	1. <input type="checkbox"/>	1. <input type="checkbox"/>	1. <input checked="" type="checkbox"/>	1. <input type="checkbox"/>	1. <input type="checkbox"/>	1. <input checked="" type="checkbox"/>
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Aerator, Filter, and Sign Maintenance (document when aerators, filters, and signs are cleaned, replaced, maintained, etc.)

January	February	March	April	May	June	July	August	September	October	November	December
Checked Signs 1/6/2025	Replaced Filters 2/3/2025	Cleaned Aerators 3/3/2025				Posted Signs 7/7/2025	Replaced Filters 8/4/2025	Cleaned Aerators 9/1/2025			



Analytical Report for School and Childcare Lead Testing Program
Philadelphia Water Department, Bureau of Laboratory Services

Facility: Esperanza Academy (Middle)
4261 N 5th St
Philadelphia, PA 19140

Contact: Alicia Mojica
267-294-9642
amojica@neacademy.net

Project Number: ES-000010.


Report Number: BLSLC20260416ES000010.

Report Prepared: 04/16/2026 07:56:46

PADEP Lab ID: 51-00016

Lab Name: Philadelphia Water Department Bureau of Laboratory Services

Lab Address: 1500 East Hunting Park Avenue
Philadelphia, PA 19124-4941

Authorized by:  (signature)
Adam Bitler (name)
Administrative Scientist (title)

Facility Sample ID	Laboratory Sample ID	Date Collected	Date Received
12-1	DW260304-056	2026-03-04 06:40:00	2026-03-04 08:16:00
12-2	DW260304-057	2026-03-04 06:40:00	2026-03-04 08:16:00
12-3	DW260304-058	2026-03-04 06:46:00	2026-03-04 08:16:00
13-1	DW260304-059	2026-03-04 06:48:00	2026-03-04 08:16:00
13-2	DW260304-060	2026-03-04 06:49:00	2026-03-04 08:16:00

Water Outlet Information				Sample Information			
Building:	Main	Facility Sample ID:	12-1				
Floor:	2	Sample Type:	First Draw (Follow-up)				
Location:	Room 217	Date Collected:	2026-03-04 06:40:00				
Water Outlet:	Right Most Handwashing Sink Faucet (Cold)	Date Received:	2026-03-04 08:16:00				
Lab Location ID:	ES-000010-220	Lab Sample ID:	DW260304-056				
Parameter	Method	Result	RL	Units	Dilution Factor	Date Prepared	Date Analyzed
Copper	EPA 200.8 rev 5.4	0.2764	0.0050	mg/L	1		2026-04-07
Lead	EPA 200.8 rev 5.4	0.0067	0.0010	mg/L	1		2026-04-07

Water Outlet Information				Sample Information			
Building:	Main	Facility Sample ID:	12-2				
Floor:	2	Sample Type:	30-second Flush (Follow-up)				
Location:	Room 217	Date Collected:	2026-03-04 06:40:00				
Water Outlet:	Right Most Handwashing Sink Faucet (Cold)	Date Received:	2026-03-04 08:16:00				
Lab Location ID:	ES-000010-220	Lab Sample ID:	DW260304-057				
Parameter	Method	Result	RL	Units	Dilution Factor	Date Prepared	Date Analyzed
Copper	EPA 200.8 rev 5.4	0.1208	0.0050	mg/L	1		2026-04-07
Lead	EPA 200.8 rev 5.4	<0.0010	0.0010	mg/L	1		2026-04-07

Water Outlet Information				Sample Information			
Building:	Main	Facility Sample ID:	12-3				
Floor:	2	Sample Type:	5-minute Flush (Follow-up)				
Location:	Room 217	Date Collected:	2026-03-04 06:46:00				
Water Outlet:	Right Most Handwashing Sink Faucet (Cold)	Date Received:	2026-03-04 08:16:00				
Lab Location ID:	ES-000010-220	Lab Sample ID:	DW260304-058				
Parameter	Method	Result	RL	Units	Dilution Factor	Date Prepared	Date Analyzed
Copper	EPA 200.8 rev 5.4	0.0727	0.0050	mg/L	1		2026-04-07
Lead	EPA 200.8 rev 5.4	<0.0010	0.0010	mg/L	1		2026-04-07

Water Outlet Information				Sample Information			
Building:	Main	Facility Sample ID:	13-1				
Floor:	2	Sample Type:	First Draw (Follow-up)				
Location:	Room 215	Date Collected:	2026-03-04 06:48:00				
Water Outlet:	Left Most Handwashing Sink Faucet (Cold)	Date Received:	2026-03-04 08:16:00				
Lab Location ID:	ES-000010-221	Lab Sample ID:	DW260304-059				
Parameter	Method	Result	RL	Units	Dilution Factor	Date Prepared	Date Analyzed
Copper	EPA 200.8 rev 5.4	0.3187	0.0050	mg/L	1		2026-04-07
Lead	EPA 200.8 rev 5.4	0.0031	0.0010	mg/L	1		2026-04-07

Water Outlet Information				Sample Information			
Building:	Main	Facility Sample ID:	13-2				
Floor:	2	Sample Type:	30-second Flush (Follow-up)				
Location:	Room 215	Date Collected:	2026-03-04 06:49:00				
Water Outlet:	Left Most Handwashing Sink Faucet (Cold)	Date Received:	2026-03-04 08:16:00				
Lab Location ID:	ES-000010-221	Lab Sample ID:	DW260304-060				
Parameter	Method	Result	RL	Units	Dilution Factor	Date Prepared	Date Analyzed
Copper	EPA 200.8 rev 5.4	0.0737	0.0050	mg/L	1		2026-04-07
Lead	EPA 200.8 rev 5.4	<0.0010	0.0010	mg/L	1		2026-04-07

Glossary

mg/L: milligrams per liter; 0.0010 mg/L is equivalent to 1.0 part per billion (ppb).

RL: Reporting Limit.

Quality Control

The Metals Laboratory maintains all Quality Control records for laboratory handling, preservation, preparation, and analysis of samples. The Quality Control process adheres to requirements specified in Pennsylvania Code Title 25 Chapter 252 Environmental Laboratory Accreditation.

Data Qualifiers

There are no data qualifiers for the results reported here.

Sample Receipt Conditions

All samples met the sample receipt requirements for the relevant analyses.

Lead & Copper Sampling
Schools and Childcares

Chain of Custody Form

Please Print Clearly



Facility Name: Esperanza Academy (Middle)
Address: 4261 N 5th St
Contact Name: Alicia Mojica

Email: amojica@neacademy.net

Project #: ES-000010
Zip Code: 19140
Phone: 267-294-9642

COMPLETE THIS PAGE WHEN YOU COLLECT WATER SAMPLES. USE INSTRUCTIONS.

(A) Establish 8 to 18 Hours of No Water Use (Stagnation Time)



Before sampling, do not use water anywhere in your facility for 8 to 18 hours, including toilets. You must also isolate any leaks, ice makers, or other appliances that automatically use water with a shut-off valve.

When was water last used BEFORE sampling? Date: 3/3/26 Time: 10:00 AM/PM

(B) Collect Samples and Record Date, Time, & Sampler Name



Collect samples in the order specified.



Fill sample bottles up to or above the line marked around the bottle neck.

Sample	Building	Floor	Location	Water Outlet	Sample Date	Sample Time	Loc ID	PWD Notes
12-1	Main	2	Room 217	Right Most Handwashing Sink Faucet (Cold)	3/4/26	6:40 AM/PM	ES-000010-220	First Draw
12-2	Main	2	Room 217	Right Most Handwashing Sink Faucet (Cold)	3/4/26	6:40 AM/PM	ES-000010-220	30-sec Flush
12-3	Main	2	Room 217	Right Most Handwashing Sink Faucet (Cold)	3/4/26	6:46 AM/PM	ES-000010-220	5-min Flush
13-1	Main	2	Room 215	Left Most Handwashing Sink Faucet (Cold)	3/4/26	6:48 AM/PM	ES-000010-221	First Draw
13-2	Main	2	Room 215	Left Most Handwashing Sink Faucet (Cold)	3/4/26	6:49 AM/PM	ES-000010-221	30-sec Flush

Who collected the samples? Sampler Name: Alexandra Rosario

(C) Verify Collection Details

- Did you collect all samples from the water outlets specified above? Yes No
- Did you collect all samples in the order specified above? Yes No
- Have you made any plumbing changes since PWD last visited your facility? Yes No
If yes, describe what changed and when: _____
- Are there any leaks in your facility's plumbing (faucets, toilets, etc.)? Yes No
If yes, were all leaks isolated with a shut-off valve before the time water was last used? Yes No
- Are there any ice makers or other devices that automatically use water in your facility? Yes No
If yes, was the device bypassed or disconnected before the time water was last used? Yes No
Describe the device: ice maker
- Are there any water softeners or other water treatment systems in your facility? Yes No
If yes, was the device bypassed or disconnected before the time water was last used? Yes No
Describe the device: _____

Call us at 215-685-1407 when you collect. Please return all bottles in the box you received them in. Date Last Updated: 09/05/2025