

Work Order #	Sample #	Sample Date	Matrix	Sample Description	Method	Parameter	MDL	Result	Units	Received Date	Analysis Date
276622	790030	16-06-20	Treated Water	LEV 1 (Standing)	ICPMS Water	Lead	0.1	1.81	ug/L	16-06-20	16-06-24
276622	790031	16-06-20	Treated Water	LEV 1 (Flushed)	ICPMS Water	Lead	0.1	1.4	ug/L	16-06-20	16-06-24
276622	790032	16-06-20	Treated Water	LEV 2 (Standing)	ICPMS Water	Lead	0.1	7.66	ug/L	16-06-20	16-06-27
276622	790032	16-06-20	Treated Water	LEV 2 (Standing)	ICPMS Water	Lead (Dup)	0.1	7.68	ug/L	16-06-20	16-06-27
276622	790033	16-06-20	Treated Water	LEV 2 (Flushed)	ICPMS Water	Lead	0.1	1.43	ug/L	16-06-20	16-06-27

DRINKING WATER CHAIN OF CUSTODY FORM

Please use our General Chain of Custody Form for non-drinking water sample submissions

REPORT TO:	INVOICE TO: (if different from Report)	PROJECT INFORMATION:
Client: <u>RDSB - Levack P.S.</u>	Client: _____	TM Quote #: _____
Address: <u>100 High Street</u>	Address: _____	Client P.O. #: _____
<u>Levack, ON P0M 2C0</u>		Client Project #: _____
Contact: <u>Mark Bocy</u>	Contact: _____	
Email: <u>bocym@rainbowschools.ca; lavallm@rainbowschools.ca</u>	Email: _____	
Phone: <u>705-674-3174</u> Fax: _____	Phone: _____ Fax: _____	

REPORTING/INVOICING FORMAT <input type="checkbox"/> Fax <input checked="" type="checkbox"/> Email <input type="checkbox"/> Mail	TURN AROUND TIME (TAT)* <input type="checkbox"/> 1 Business Day <input type="checkbox"/> 2 Business Days <input type="checkbox"/> 3 Business Days <input checked="" type="checkbox"/> Standard	ANALYSIS REQUESTED	Residual Chlorine Free Total	LABORATORY USE ONLY WORK ORDER NUMBER: <div style="font-size: 2em; color: red; text-align: center;">276622</div>
QC DATA REPORTED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	SPECIFIC DATE: <u>Tues: 28</u> <small>* Prior arrangements must be made for rush/weekend/holiday work</small>	Resample (Yes or No?) ICPMS 1 (pb)		CONTAINERS RECEIVED <div style="font-size: 2em; color: red; text-align: center;">↓ ↓ ↓ ↓</div>
SAMPLE DISPOSAL <input type="checkbox"/> Hold <input checked="" type="checkbox"/> Dispose <input type="checkbox"/> Return	SAMPLING DATE (mm-dd-yy) TIME Type** R T D P	Water Trax # (if appl)		TEMP Btl. Type Lab ID
	<u>06-20-16 6:30</u> X LEV 1 (Standing) X <u>06-20-16 7:05</u> X LEV 1 (Flushed) X <u>06-20-16 6:40</u> X LEV 2 (STAND) F <u>06-20-16 7:15</u> X LEV 2 (FLU) F			13 LP 790030 ↓ ↓ ↓ ↓ 790031 ↓ ↓ ↓ ↓ 790032 ↓ ↓ ↓ ↓ 790033

CONFIRMATION REPORT

**Type: R=Raw, T=Entry/Treated, D=Distribution, P=Plumbing (O.REG. 170 / O.REG. 318 / 319 / O.REG. 243)

Waterworks # SENT 1045787 O. REG. 170 O. REG. 318/319
 O. REG. 243 ODWS

LSN Form Submitted to MOE/PHU? Not Applicable Yes No
 Are these water samples for human consumption? Yes No
 Are the results reportable as per O. REG. 170/318/319? Yes No

Adverse and Exceedance Notification Information:
 Name: Mark Bocy Cell: 705-690-0323
 Phone: 705-671-3174 x 7231 Fax: 705-761-2442

COMMENTS/FIELD NOTES: LEV-1 staff room
LEV-2 cafeteria

ESTIMATED STANDING TIME: < 24 HRS

Relinquished to Testmark By (Signature) M. Lavallee Date: 06-20-16 Time: 14:15
 Shipped By Hand Shipping Reference W/11A
 Received at Testmark By M. Andrea Date: June 20/16 Time: 2:15 pm

*** Please contact Customer Service for assistance with customized CofC's for Schedule 15.1 testing.
 Please use separate CofC's for each Waterworks. Samples must be received below 10°C with evidence that an attempt was made to ensure adequate cooling.



TESTMARK Laboratories Ltd.

Committed to Quality and Service

Confirmation of Sample Receipt

Your samples have been received at Testmark's Sample Reception and have now been issued a unique Work Order number as well as unique Sample I.D. numbers.

Here are some details of your submission:

Client Name: RDSB - Levack Public School
Contact: Mark Bocy
Project Number:
Work Order #: 276622
Date Received: 6/20/2016
Method of Shipment: Hand
Waybill Reference #: N/A
Estimated Date of Completion*: 6/28/2016
Water Works #: 500045787

Sample Details

Sample Number	Sample Date	Sample Description	Analysis	Regulation (if applicable)
790030	6/20/2016	LEV 1 (Standing)	ICPMS Water	O.Reg. 243/07
790030	6/20/2016	LEV 1 (Standing)	MetalsWater/Prep	O.Reg. 243/07
790031	6/20/2016	LEV 1 (Flushed)	ICPMS Water	O.Reg. 243/07
790031	6/20/2016	LEV 1 (Flushed)	MetalsWater/Prep	O.Reg. 243/07
790032	6/20/2016	LEV 2 (Standing)	ICPMS Water	O.Reg. 243/07
790032	6/20/2016	LEV 2 (Standing)	MetalsWater/Prep	O.Reg. 243/07
790033	6/20/2016	LEV 2 (Flushed)	ICPMS Water	O.Reg. 243/07
790033	6/20/2016	LEV 2 (Flushed)	MetalsWater/Prep	O.Reg. 243/07

Entry of your submission is based on information contained on your Chain of Custody. If you have any questions regarding this submission, kindly contact Testmark's Customer Service department by email using customer.service@testmark.ca

* Please note this is an estimated date. Over 95% of our reports are completed within 5 business days. Please note however that non-routine and subcontracted analyses may significantly exceed normal turnaround times.

In these cases, a partial report may be issued.