



TESTMARK Laboratories Ltd.

Committed to Quality and Service

CERTIFICATE OF ANALYSIS

Client: Mike Lavallee
Company: RDSB - Walden Public School
Address: 69 Young St.
Sudbury, ON, P3E 3G5
Phone/Fax: (705) 929-4787 / (705) 761-2442
Email: lavallm@rainbowschools.ca

Work Order Number: 276485
PO #:
Regulation: O.Reg. 243/07
Project #:
DWS #: 500039118
Sampled By:

Date Order Received: 6/17/2016
Arrival Temperature: 14 °C

Analysis Started: 6/23/2016
Analysis Completed: 6/24/2016

WORK ORDER SUMMARY

ANALYSES WERE PERFORMED ON THE FOLLOWING SAMPLES. THE RESULTS RELATE ONLY TO THE ITEMS TESTED.

Sample Description	Lab ID	Matrix	Type	Comments	Date Collected	Time Collected
Rm 136 (Standing)	727766	Treated Water	Plumbing		6/16/2016	7:00 AM
Rm 136 (Flushed)	727767	Treated Water	Plumbing		6/16/2016	7:35 AM

METHODS AND INSTRUMENTATION

THE FOLLOWING METHODS WERE USED FOR YOUR SAMPLE(S):

Method	Lab	Description	Reference
ICPMS Water	Garson	Determination of Metals in Water by ICP/MS	Based on SW846-6020A

This report has been approved by:

Khaled Omari, Ph.D.
Laboratory Director



CERTIFICATE OF ANALYSIS

RDSB - Walden Public School

Work Order Number: 276485

WORK ORDER RESULTS

Sample Description	Rm 136 (Standing)		Rm 136 (Flushed)			
Lab ID	727766		727767			
Metals	Result	MDL	Result	MDL	Units	Criteria: O.Reg. 243/07
Lead	<0.1	0.1	<0.1	0.1	ug/L	10

LEGEND

Dates: Dates are formatted as mm/dd/year throughout this report.

MDL: Method detection limit or minimum reporting limit.

Quality Control: All associated Quality Control data is available on request.

LCL: Lower Control Limit.

UCL: Upper Control Limit.

QAQCID: This is a unique reference to the quality control data set used to generate the reported value. Contact our lab for this information, as it is traceable through our LIMS.



CERTIFICATE OF ANALYSIS

RDSB - Walden Public School

Work Order Number: 276485

QUALITY CONTROL DATA

THIS SECTION REPORTS QC RESULTS ASSOCIATED WITH THE TEST BATCH; THESE ARE NOT YOUR SAMPLE RESULTS

Metals							
%RPD							
Parameter	MDL	Units	LCL	Result	UCL	QAQCID	
Lead	N/A	%	0	N/A	20	20160623.R13-5o	
Method Blank							
Parameter	MDL	Units	LCL	Result	UCL	QAQCID	
Lead	1	ug/L	0	<1	1	20160623.R13-5o	
Positive Control							
Parameter	MDL	Units	LCL	Result	UCL	QAQCID	
Lead	N/A	%	80	96.3	120	20160623.R13-5o	
Reference Sample							
Parameter	MDL	Units	LCL	Result	UCL	QAQCID	
Lead	N/A	% Rec	80	98	120	20160623.R13-5o	
Sample Spike							
Parameter	MDL	Units	LCL	Result	UCL	QAQCID	
Lead	N/A	% Rec	70	94.4	130	20160623.R13-5o	

THIS INDEX SHOWS HOW YOUR SAMPLES ARE ASSOCIATED TO THE CONTROLS INCLUDED IN THE IDENTIFIED BATCHES.

Sample Description	Lab ID	Method	QAQCID	Prep QAQCID
Rm 136 (Flushed)	727767	ICPMS Water	20160623.R13-5o	20160623.R52P
Rm 136 (Standing)	727766	ICPMS Water	20160623.R13-5o	20160623.R52P

DRINKING WATER CHAIN OF CUSTODY FORM

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

REPORT TO: Client: <u>Public School</u> <u>RDSB - Walden P.S.</u> Address: _____ Contact: <u>Mike Lavallee</u> Email: <u>lavallm@rainbowschools.ca</u> Phone: <u>705-674-3174</u> Fax: _____	INVOICE TO: (if different from Report) Client: _____ Address: _____ Contact: _____ Email: _____ Phone: _____ Fax: _____	PROJECT INFORMATION: TM Quote #: _____ Client P.O. #: _____ Client Project #: _____
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REPORTING/INVOICING FORMAT <input type="checkbox"/> Fax <input checked="" type="checkbox"/> Email <input type="checkbox"/> Mail QC DATA REPORTED <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No SAMPLE DISPOSAL <input type="checkbox"/> Hold <input checked="" type="checkbox"/> Dispose <input type="checkbox"/> Return	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 SPECIFIC DATE: <u>Fri 24</u> <small>* Prior arrangements must be made for rush/weekend/holiday work</small>	<table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th rowspan="2" style="writing-mode: vertical-rl; transform: rotate(180deg);">Resample (Yes or No?)</th> <th rowspan="2" style="writing-mode: vertical-rl; transform: rotate(180deg);">ICPMS 1 (Pb)</th> <th colspan="10">ANALYSIS REQUESTED</th> <th colspan="2" style="writing-mode: vertical-rl; transform: rotate(180deg);">Residual Chlorine</th> </tr> <tr> <th>Free</th> <th>Total</th> <th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th><th></th> </tr> <tr> <td style="text-align: center;">X</td> <td style="text-align: center;">X</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> <tr> <td style="text-align: center;">X</td> <td style="text-align: center;">X</td> <td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td><td></td> </tr> </table>	Resample (Yes or No?)	ICPMS 1 (Pb)	ANALYSIS REQUESTED										Residual Chlorine		Free	Total											X	X														X	X														LABORATORY USE ONLY WORK ORDER NUMBER: <div style="font-size: 2em; color: red; text-align: center;">276485</div> <table border="1" style="width:100%; border-collapse: collapse;"> <tr> <th>CONTAINERS RECEIVED</th> <th>TEMP</th> <th>Btl. Type</th> <th>Lab ID</th> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">14</td> <td style="text-align: center;">ILP</td> <td style="text-align: center;">727766</td> </tr> <tr> <td style="text-align: center;">1</td> <td style="text-align: center;">14</td> <td style="text-align: center;">ILP</td> <td style="text-align: center;">727767</td> </tr> </table>	CONTAINERS RECEIVED	TEMP	Btl. Type	Lab ID	1	14	ILP	727766	1	14	ILP	727767
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COMMENTS/FIELD NOTES: ESTIMATED STANDING TIME: Sampled By (Print and Sign) <u>Gerry Hughson</u> Date <u>2016-06-16</u> Time <u>7:30</u> Received By (Print and Sign) <u>Mark Bocy</u> Date <u>2016-06-16</u> Time _____	REGULATION Waterworks # <u>500039118</u> <input type="checkbox"/> O. REG. 170 <input type="checkbox"/> O. REG. 318/319 <input checked="" type="checkbox"/> O. REG. 243 <input type="checkbox"/> ODWS LSN Form Submitted to MOE/PHU? <input type="checkbox"/> Not Applicable <input type="checkbox"/> Yes <input type="checkbox"/> No Are these water samples for human consumption? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No Are the results reportable as per O. REG. 170/318/319? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No O. REG. 170/318/319 Only: Phone: <u>705-522-9200</u> Public Health Unit: <u>SDHU</u> Fax: <u>705-677-9607</u> Relinquished to Testmark By (Signature) <u>[Signature]</u> Date _____ Time _____
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Shipped By <u>Hand</u> Shipping Reference <u>22389</u>	Received at Testmark By <u>[Signature]</u> Date <u>6/16/16</u> Time <u>1105</u>
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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 Walden Public School
Contact: Mike Lavallee
Project Number:
Work Order #: 276485
Date Received: 6/17/2016
Method of Shipment: Hand
Waybill Reference #: 22389
Estimated Date of Completion*: 6/24/2016
Water Works #: 500039118

Sample Details

Sample Number	Sample Date	Sample Description	Analysis	Regulation (if applicable)
727766	6/16/2016	Rm 136 (Standing)	ICPMS Water	O.Reg. 243/07
727766	6/16/2016	Rm 136 (Standing)	MetalsWater/Prep	O.Reg. 243/07
727767	6/16/2016	Rm 136 (Flushed)	ICPMS Water	O.Reg. 243/07
727767	6/16/2016	Rm 136 (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.