



TESTMARK Laboratories Ltd.

Committed to Quality and Service

CERTIFICATE OF ANALYSIS

Client: Mark Bocy
Company: RDSB - Webbwood Public School
Address: 69 Young St.
Sudbury, ON, P3E 3G5
Phone/Fax: (705) 690-0323 / (705) 671-2442
Email: bocym@rainbowschools.ca;
lavallm@rainbowschools.ca

Work Order Number: 276270
PO #:
Regulation: O.Reg. 243/07
Project #:
DWS #: 500111619
Sampled By:

Date Order Received: 6/15/2016
Arrival Temperature: 10 °C

Analysis Started: 6/20/2016
Analysis Completed: 6/21/2016

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
Staff Room (Standing)	727246	Treated Water	Plumbing		6/15/2016	6:30 AM
Staff Room (Flushed)	727247	Treated Water	Plumbing		6/15/2016	7:05 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

REPORT COMMENTS

ESTIMATED STANDING TIME: 12.5 hours

This report has been approved by:

Khaled Omari, Ph.D.
Laboratory Director



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RDSB - Webbwood Public School

Work Order Number: 276270

WORK ORDER RESULTS

Sample Description	Staff Room (Standing)		Staff Room (Flushed)			
Lab ID	727246		727247			
Metals	Result	MDL	Result	MDL	Units	Criteria: O.Reg. 243/07
Lead	5.15	0.1	2.81	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.



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RDSB - Webbwood Public School

Work Order Number: 276270

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	2.7	20	20160620.R13-5o1	
Method Blank							
Parameter	MDL	Units	LCL	Result	UCL	QAQCID	
Lead	1	ug/L	0	<1	1	20160620.R13-5o1	
Positive Control							
Parameter	MDL	Units	LCL	Result	UCL	QAQCID	
Lead	N/A	%	80	99.8	120	20160620.R13-5o1	
Reference Sample							
Parameter	MDL	Units	LCL	Result	UCL	QAQCID	
Lead	N/A	% Rec	80	101	120	20160620.R13-5o1	
Sample Spike							
Parameter	MDL	Units	LCL	Result	UCL	QAQCID	
Lead	N/A	% Rec	70	96.6	130	20160620.R13-5o1	

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

Sample Description	Lab ID	Method	QAQCID	Prep QAQCID
Staff Room (Flushed)	727247	ICPMS Water	20160620.R13-5o1	20160620.R52K
Staff Room (Standing)	727246	ICPMS Water	20160620.R13-5o1	20160620.R52K

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 - Webbwood P.S.</u>				Client: <u>RDSB</u>				TM Quote #:			
Address: <u>6 Minto Street</u>				Address: <u>69 Yong St</u>				Client P.O. #:			
Webbwood, ON P0P 2G0				<u>Stirling Unit</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		TURN AROUND TIME (TAT)*		ANALYSIS REQUESTED						LABORATORY USE ONLY	
<input type="checkbox"/> Fax <input checked="" type="checkbox"/> Email <input type="checkbox"/> Mail		<input type="checkbox"/> 1 Business Day <input type="checkbox"/> 2 Business Days								Residual Chlorine	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		<input type="checkbox"/> 3 Business Days <input checked="" type="checkbox"/> Standard									
QC DATA REPORTED		SPECIFIC DATE: <u>Thurs 23</u>								CONTAINERS RECEIVED	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No		* Prior arrangements must be made for rush/weekend/holiday work.									
SAMPLE DISPOSAL		SAMPLING								276270	
<input type="checkbox"/> Hold <input checked="" type="checkbox"/> Dispose <input type="checkbox"/> Return		DATE (mm-dd-yy) TIME Type**									
		R T D P								TEMP Btl. Type Lab ID	
		SAMPLE DESCRIPTION Water Trax # (if appl)									
		<u>6/15/16 6:30am</u>								<u>10 LP 727246</u>	
		<u>6/15/16 7:05am</u>									
		<u>Staff Room (Standing)</u>								<u>↓ ↓ 727247</u>	
		<u>Staff Room (Flushed)</u>									
**Type: R=Raw, T=Entry/Treated, D=Distribution, P=Plumbing (O.REG. 170 / O.REG. 318 / 319 / O.REG. 243)				REGULATION		Waterworks # <u>500111619</u> ✓ <input type="checkbox"/> O. REG. 170 <input type="checkbox"/> O. REG. 318/319					
Adverse and Exceedance Notification Information:						<input checked="" type="checkbox"/> O. REG. 243 <input type="checkbox"/> ODWS					
Name: <u>Mark Bocy</u> Cell: <u>705-690-0323</u>				LSN Form Submitted to MOE/PHU? <input type="checkbox"/> Not Applicable <input type="checkbox"/> Yes <input type="checkbox"/> No							
Phone: <u>705-671-3174 x 7231</u> Fax: <u>705-761-2442</u>				Are these water samples for human consumption? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No							
COMMENTS/FIELD NOTES:				Are the results reportable as per O. REG. 170/318/319? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No							
				O. REG. 170/318/319 Only:				Phone: <u>705-522-9200</u>			
ESTIMATED STANDING TIME:				Public Health Unit: <u>SDHU</u>		Fax: <u>705-677-9607</u>					
				Relinquished to Testmark By (Signature)				Date		Time	
Sampled By (Print and Sign)		Date		Time		Shipped By		Shipping Reference			
<u>James French</u>		<u>June 15/16</u>		<u>12:05pm</u>		<u>hand</u>		<u>N/A</u>			
Received By (Print and Sign)		Date		Time		Received at Testmark By		Date			
<u>Steve McCallum</u>		<u>June 15/16</u>		<u>12:30pm</u>		<u>cm</u>		<u>6-15-16</u>			

CONFIRMATION REPORT SENT



TESTMARK Laboratories Ltd.

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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 - Webbwood Public School
Contact: Mark Bocy
Project Number:
Work Order #: 276270
Date Received: 6/15/2016
Method of Shipment: Hand
Waybill Reference #: N/A
Estimated Date of Completion*: 6/23/2016
Water Works #: 500111619

Sample Details

Sample Number	Sample Date	Sample Description	Analysis	Regulation (if applicable)
727246	6/15/2016	Staff Room (Standing)	ICPMS Water	O.Reg. 243/07
727246	6/15/2016	Staff Room (Standing)	MetalsWater/Prep	O.Reg. 243/07
727247	6/15/2016	Staff Room (Flushed)	ICPMS Water	O.Reg. 243/07
727247	6/15/2016	Staff Room (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.