

**TESTMARK Laboratories Ltd.***Committed to Quality and Service*

## CERTIFICATE OF ANALYSIS

Client: Mark Bocy  
Company: RDSB - Lansdowne Public School  
Address: 69 Young St  
Sudbury, ON, P3E 3G5  
Phone/Fax: (705) 674-3171 / (705) 761-2442  
Email: bocym@rainbowschools.ca

Work Order Number: 346951  
PO #:   
Regulation: O.Reg. 243/07  
Project #:   
DWS #: 500045878  
Sampled By: Mark Bocy

Date Order Received: 6/15/2018  
Arrival Temperature: 19 °C

Analysis Started: 6/19/2018  
Analysis Completed: 6/20/2018

## 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
T 101 L DC (Standing)	1352092	Water	Plumbing		6/15/2018	6:30 AM
T 101 L DC (Flushed)	1352093	Water	Plumbing		6/15/2018	7:05 AM
T 105 Hub S	1352094	Water	Plumbing		6/15/2018	6:40 AM
T 105 Hub F	1352095	Water	Plumbing		6/15/2018	7:15 AM
F 001 U S	1352096	Water	Plumbing		6/15/2018	6:50 AM
F 001 U F	1352097	Water	Plumbing		6/15/2018	7:25 AM
F 003 BS S	1352098	Water	Plumbing		6/15/2018	7:00 AM
F 003 BS F	1352099	Water	Plumbing		6/15/2018	7:35 AM

## METHODS AND INSTRUMENTATION

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

Method	Lab	Description	Reference
ICPMS Reg. Water (R13.1)	Garson	Determination of Metals in Water by ICP/MS	Modified from SW846-6020A



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## CERTIFICATE OF ANALYSIS

RDSB - Lansdowne Public School

Work Order Number: 346951

This report has been approved by:

Khaled Omari, Ph.D.  
Laboratory Director



## CERTIFICATE OF ANALYSIS

RDSB - Lansdowne Public School

Work Order Number: 346951

### WORK ORDER RESULTS

Sample Description	T 101 L DC (Standing)		T 101 L DC (Flushed)		T 105 Hub S		T 105 Hub F			
Lab ID	1352092		1352093		1352094		1352095			
Metals	Result	MDL	Result	MDL	Result	MDL	Result	MDL	Units	Criteria: O.Reg. 243/07
Lead	0.54	0.1	<0.1	0.1	1.12	0.1	0.36	0.1	ug/L	10

Sample Description	F 001 U S		F 001 U F		F 003 BS S		F 003 BS F			
Lab ID	1352096		1352097		1352098		1352099			
Metals	Result	MDL	Result	MDL	Result	MDL	Result	MDL	Units	Criteria: O.Reg. 243/07
Lead	0.11	0.1	<0.1	0.1	<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.

**TESTMARK Laboratories Ltd.***Committed to Quality and Service***CERTIFICATE OF ANALYSIS**

RDSB - Lansdowne Public School

Work Order Number: 346951

**QUALITY CONTROL DATA**

THIS SECTION REPORTS QC RESULTS ASSOCIATED WITH THE TEST BATCH; THESE ARE NOT YOUR SAMPLE RESULTS.  
QAQC details include only values where sufficient sample data allowed measurement.

**Metals****Reference Sample: CRM-12 (EP-L-3) (12)**

Parameter	MDL	Units	LCL	Result	UCL	QAQCID
Lead	N/A	ug/L	3.65	3.7	4.35	20180620.R13.1H

**Sample Spike: LFMS-10 (N 100 µg/L) (10)**

Parameter	MDL	Units	LCL	Result	UCL	QAQCID
Lead	N/A	% Rec	70	114	130	20180620.R13.1H

**Method Blank: LRB-6 (Blank- µg/L) (6)**

Parameter	MDL	Units	LCL	Result	UCL	QAQCID
Lead	1	ug/L	0	<1	1	20180620.R13.1H

**Positive Control: LFB-7 (N 100 µg/L) (7)**

Parameter	MDL	Units	LCL	Result	UCL	QAQCID
Lead	N/A	%	80	85.7	120	20180620.R13.1H

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

Sample Description	Lab ID	Method	QAQCID	Prep QAQCID
F 001 U F	1352097	ICPMS Reg. Water (R13.1)	20180620.R13.1H	20180619.A52V
F 001 U S	1352096	ICPMS Reg. Water (R13.1)	20180620.R13.1H	20180619.A52V
F 003 BS F	1352099	ICPMS Reg. Water (R13.1)	20180620.R13.1H	20180619.A52V
F 003 BS S	1352098	ICPMS Reg. Water (R13.1)	20180620.R13.1H	20180619.A52V
T 101 L DC (Flushed)	1352093	ICPMS Reg. Water (R13.1)	20180620.R13.1H	20180619.A52V
T 101 L DC (Standing)	1352092	ICPMS Reg. Water (R13.1)	20180620.R13.1H	20180619.A52V
T 105 Hub F	1352095	ICPMS Reg. Water (R13.1)	20180620.R13.1H	20180619.A52V
T 105 Hub S	1352094	ICPMS Reg. Water (R13.1)	20180620.R13.1H	20180619.A52V



# DRINKING WATER CHAIN OF CUSTODY FORM

Page 1 of 1

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

<b>REPORT TO:</b> Client: <u>RDSB - Landsdowne P.S.</u> Address: <u>185 Landsdowne St. N.</u> <u>Sudbury, ON P3C 4M1</u> Contact: <u>Mark Bocy</u> Email: <u>bocym@rainbowschools.ca; lavallm@rainbowschools.ca</u> Phone: <u>705-674-3171</u> Fax: _____				<b>INVOICE TO: (if different from Report)</b> Client: _____ Address: _____ Contact: _____ Email: _____ Phone: _____ Fax: _____				<b>PROJECT INFORMATION:</b> TM Quote #: _____ Client P.O. #: _____ Client Project #: _____																																																																																																																																																												
<b>REPORTING/INVOICING FORMAT</b> <input type="checkbox"/> Fax <input checked="" type="checkbox"/> Email <input type="checkbox"/> Mail <b>QC DATA REPORTED</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <b>SAMPLE DISPOSAL</b> <input type="checkbox"/> Hold <input checked="" type="checkbox"/> Dispose <input type="checkbox"/> Return				<b>TURN AROUND TIME (TAT)*</b> <input type="checkbox"/> 1 Business Day <input type="checkbox"/> 2 Business Days <input type="checkbox"/> 3 Business Days <input checked="" type="checkbox"/> Standard <b>SPECIFIC DATE:</b> <u>Mon 25</u> * Prior arrangements must be made for rush/weekend/holiday work				<b>LABORATORY USE ONLY</b> WORK ORDER NUMBER: <u>346951</u>																																																																																																																																																												
<b>SAMPLING</b>				<b>ANALYSIS REQUESTED</b>				<b>CONTAINERS RECEIVED</b>																																																																																																																																																												
<table border="1"><thead><tr><th rowspan="2">DATE (mm-dd-yy)</th><th rowspan="2">TIME</th><th colspan="4">Type**</th><th rowspan="2">SAMPLE DESCRIPTION</th><th rowspan="2">Water Trax # (if appl)</th><th rowspan="2">Resample (Yes or No?)</th><th rowspan="2">ICPMS 1 (Pb)</th><th colspan="2">Residual Chlorine</th><th rowspan="2">TEMP</th><th rowspan="2">Btl. Type</th><th rowspan="2">Lab ID</th></tr><tr><th>R</th><th>T</th><th>D</th><th>P</th><th>Free</th><th>Total</th></tr></thead><tbody><tr><td>6-15-18</td><td>6:30</td><td></td><td></td><td></td><td>X</td><td>T 101 L DC (Standing)</td><td></td><td>X</td><td></td><td></td><td></td><td>19</td><td>LP</td><td>1352092</td></tr><tr><td>6-15-18</td><td>7:05</td><td></td><td></td><td></td><td>X</td><td>T 101 L DC (Flushed)</td><td></td><td>X</td><td></td><td></td><td></td><td></td><td></td><td>1352093</td></tr><tr><td>6-15-18</td><td>6:40</td><td></td><td></td><td></td><td>X</td><td>T 105 Hub S</td><td></td><td>X</td><td></td><td></td><td></td><td></td><td></td><td>1352094</td></tr><tr><td>6-15-18</td><td>7:15</td><td></td><td></td><td></td><td>X</td><td>T 105 Hub F</td><td></td><td>X</td><td></td><td></td><td></td><td></td><td></td><td>1352095</td></tr><tr><td>6-15-18</td><td>6:50</td><td></td><td></td><td></td><td>X</td><td>F 001 U S</td><td></td><td>X</td><td></td><td></td><td></td><td></td><td></td><td>1352096</td></tr><tr><td>6-15-18</td><td>7:25</td><td></td><td></td><td></td><td>X</td><td>F 001 U F</td><td></td><td>X</td><td></td><td></td><td></td><td></td><td></td><td>1352097</td></tr><tr><td>6-15-18</td><td>7</td><td></td><td></td><td></td><td>X</td><td>F 002 BS S</td><td></td><td>X</td><td></td><td></td><td></td><td></td><td></td><td>1352098</td></tr><tr><td>6-15-18</td><td>7:35</td><td></td><td></td><td></td><td>X</td><td>F 003 BS F</td><td></td><td>X</td><td></td><td></td><td></td><td></td><td></td><td>1352099</td></tr></tbody></table>				DATE (mm-dd-yy)	TIME	Type**				SAMPLE DESCRIPTION	Water Trax # (if appl)	Resample (Yes or No?)	ICPMS 1 (Pb)	Residual Chlorine		TEMP	Btl. Type	Lab ID	R	T	D	P	Free	Total	6-15-18	6:30				X	T 101 L DC (Standing)		X				19	LP	1352092	6-15-18	7:05				X	T 101 L DC (Flushed)		X						1352093	6-15-18	6:40				X	T 105 Hub S		X						1352094	6-15-18	7:15				X	T 105 Hub F		X						1352095	6-15-18	6:50				X	F 001 U S		X						1352096	6-15-18	7:25				X	F 001 U F		X						1352097	6-15-18	7				X	F 002 BS S		X						1352098	6-15-18	7:35				X	F 003 BS F		X						1352099	<table border="1"><thead><tr><th colspan="2">REGULATION</th></tr></thead><tbody><tr><td>Waterworks # <u>500045878</u></td><td><input type="checkbox"/> O. REG. 170 <input type="checkbox"/> O. REG. 318/319</td></tr><tr><td></td><td><input checked="" type="checkbox"/> O. REG. 243 <input type="checkbox"/> ODWS</td></tr><tr><td colspan="2">LSN Form Submitted to MOE/PHU? <input type="checkbox"/> Not Applicable <input type="checkbox"/> Yes <input type="checkbox"/> No</td></tr><tr><td colspan="2">Are these water samples for human consumption? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No</td></tr><tr><td colspan="2">Are the results reportable as per O. REG. 170/318/319? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No</td></tr></tbody></table>				REGULATION		Waterworks # <u>500045878</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 type="checkbox"/> Yes <input checked="" type="checkbox"/> No		<b>COMMENTS/FIELD NOTES:</b>  <b>ESTIMATED STANDING TIME:</b> Sampled By (Print and Sign) <u>Mark Bocy</u> Date <u>2018-6-15</u> Time <u>9:15</u> Received By (Print and Sign) _____ Date _____ Time _____			
DATE (mm-dd-yy)	TIME	Type**				SAMPLE DESCRIPTION	Water Trax # (if appl)	Resample (Yes or No?)	ICPMS 1 (Pb)					Residual Chlorine					TEMP	Btl. Type	Lab ID																																																																																																																																															
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<b>Shipped By</b> <u>Hand</u> Date <u>2018-6-15</u> Time <u>9:16</u>				<b>Received at Testmark By</b> <u>Hand</u> Date <u>06/15/18</u> Time <u>9:18</u>																																																																																																																																																																

7 Margaret Street, Garson, ON, P3L 1E1 • 705-693-1121 (P) • 705-693-1124 (F) • customer.service@testmark.ca  
100 Wilson Ave., Suite 102, Timmins, ON, P4N 2S9 • 705-531-1121 (P) • 705-531-1125 (F) • timmins@testmark.ca  
6820 Kitimat Road Unit #1, Mississauga, ON, L5N 5M3 • 905-821-1112 (P) • 905-821-1113 (F) • csr-mississauga@testmark.ca

\*\*\* Please contact Customer Service for assistance with customer service or Schedule 15.1 testing.

Please use separate CofC's for each Waterworks. Samples must be received below 10°C to ensure that an attempt was made to ensure adequate cooling.

CONFIRMATION REPORT  
SENT

**TESTMARK Laboratories Ltd.***Committed to Quality and Service*

## CERTIFICATE OF ANALYSIS

Client: Mark Bocy  
Company: RDSB - Lansdowne Public School  
Address: 69 Young St  
Sudbury, ON, P3E 3G5  
Phone/Fax: (705) 674-3171 / (705) 761-2442  
Email: bocym@rainbowschools.ca

Work Order Number: 346949  
PO #:  
Regulation: O.Reg. 243/07  
Project #:  
DWS #: 500045878  
Sampled By: Mark Bocy

Date Order Received: 6/15/2018  
Arrival Temperature: 20 °C

Analysis Started: 6/19/2018  
Analysis Completed: 6/20/2018

## 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
T 109 (Standing)	1352080	Water	Plumbing		6/15/2018	7:10 AM
T 109 (Flushed)	1352081	Water	Plumbing		6/15/2018	7:45 AM
F 203 BS S	1352082	Water	Plumbing		6/15/2018	7:20 AM
F 203 BS F	1352083	Water	Plumbing		6/15/2018	7:55 AM

## METHODS AND INSTRUMENTATION

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

Method	Lab	Description	Reference
ICPMS Reg. Water (R13.1)	Garson	Determination of Metals in Water by ICP/MS	Modified from SW846-6020A

This report has been approved by:

Khaled Omari, Ph.D.  
Laboratory Director



## CERTIFICATE OF ANALYSIS

RDSB - Lansdowne Public School

Work Order Number: 346949

### WORK ORDER RESULTS

Sample Description	T 109 (Standing)		T 109 (Flushed)		F 203 BS S		F 203 BS F		Units	Criteria: O.Reg. 243/07
Lab ID	1352080		1352081		1352082		1352083			
Metals	Result	MDL	Result	MDL	Result	MDL	Result	MDL		
Lead	0.15	0.1	0.12	0.1	<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.



**TESTMARK Laboratories Ltd.***Committed to Quality and Service***CERTIFICATE OF ANALYSIS**

RDSB - Lansdowne Public School

Work Order Number: 346949

**QUALITY CONTROL DATA**

THIS SECTION REPORTS QC RESULTS ASSOCIATED WITH THE TEST BATCH; THESE ARE NOT YOUR SAMPLE RESULTS.  
QAQC details include only values where sufficient sample data allowed measurement.

**Metals****Method Blank: LRB-6 (Blank- µg/L) (6)**

Parameter	MDL	Units	LCL	Result	UCL	QAQCID
Lead	1	ug/L	0	<1	1	20180620.R13.1G

**Sample Spike: LFMS-10 (N 100 µg/L) (10)**

Parameter	MDL	Units	LCL	Result	UCL	QAQCID
Lead	N/A	% Rec	70	88.2	130	20180620.R13.1G

**Reference Sample: CRM-12 (EP-L-3) (12)**

Parameter	MDL	Units	LCL	Result	UCL	QAQCID
Lead	N/A	ug/L	3.65	3.8	4.35	20180620.R13.1G

**Positive Control: LFB-7 (N 100 µg/L) (7)**

Parameter	MDL	Units	LCL	Result	UCL	QAQCID
Lead	N/A	%	80	88.6	120	20180620.R13.1G

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

Sample Description	Lab ID	Method	QAQCID	Prep QAQCID
F 203 BS F	1352083	ICPMS Reg. Water (R13.1)	20180620.R13.1G	20180619.A52U
F 203 BS S	1352082	ICPMS Reg. Water (R13.1)	20180620.R13.1G	20180619.A52U
T 109 (Flushed)	1352081	ICPMS Reg. Water (R13.1)	20180620.R13.1G	20180619.A52U
T 109 (Standing)	1352080	ICPMS Reg. Water (R13.1)	20180620.R13.1G	20180619.A52U



## DRINKING WATER CHAIN OF CUSTODY FORM

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

<b>REPORT TO:</b> RDSB - Lansdowne Public School				<b>INVOICE TO: (if different from Report)</b>												<b>PROJECT INFORMATION:</b>																	
Client: RDSB - Lansdowne P.S.				Client:												TM Quote #:																	
Address: 185 Lansdowne St. N.				Address:												Client P.O. #:																	
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Contact: Mark Bocy				Contact:												Client Project #:																	
Email: bocym@rainbowschools.ca; lavallm@rainbowschools.ca				Email:																													
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<b>REPORTING/INVOICING FORMAT</b>				<b>TURN AROUND TIME (TAT)*</b>												<b>LABORATORY USE ONLY</b>																	
<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												WORK ORDER NUMBER:  346949																	
<b>QC DATA REPORTED</b>				<input type="checkbox"/> 3 Business Days <input checked="" type="checkbox"/> Standard																													
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No																																	
<b>SAMPLE DISPOSAL</b>				<b>SPECIFIC DATE:</b> Mon 25												CONTAINERS RECEIVED																	
<input type="checkbox"/> Hold <input checked="" type="checkbox"/> Dispose <input type="checkbox"/> Return				* Prior arrangements must be made for rush/weekend/holiday work																													
<b>SAMPLING</b>																																	
DATE (mm-dd-yy)		TIME		Type**				SAMPLE DESCRIPTION				Water Trax # (if appl)				Resample (Yes or No?)		ICPMS 1 (Pb)		ANALYSIS REQUESTED		Residual Chlorine		TEMP		Btl. Type		Lab ID					
R		T		D		P																Free		Total									
6-15-18		7:10				X		T 109 (Standing)										X								1		20		1UP		135208	
6-15-18		7:45				X		T 109 (Flushed)										X								↓		↓		↓		135208	
6-15-18		7:20				X		F B5 203 BS S										X								↓		↓		↓		135208	
6-15-18		7:55				X		F 203 BS A										X								↓		↓		↓		135208	
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6820 Kitimat Road Unit #1, Mississauga, ON, L5N 5M3 • 905-821-2095 (P) • 905-821-2095 (F) • csr-mississauga@testmark.ca

\*\*\* Please contact Customer Service for assistance with the CofC's for Schedule 15.1 testing.  
Please use separate CofC's for each Waterworks. Samples must be received below 15°C with evidence that an attempt was made to ensure adequate cooling.

15.1 testing.