							DRINKING WATER FACILITY CLA						CLA	ASSIFICATION					(CEPOOT NUMBER (Latuse)					
		ENVIRO	D U CONMENTAL	LABORAT	ORIES ed. Quality ass	N'a			Municipal Large Residentia Seasonal Other:	al		Small Non-F Year-I	Resider Round	ntial	☐ R	eg. 170/03 eg. 318/08 eg. 243/07 rivate Wel	3 & 319/0	1	3	16.	- -	8	.7	40
	Kingston	Ottawa		Richmond		☐ Wi	ndsor			,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,,	D	ig mu												
Organiz		ATCA	S Likeya 🖎	Waterworks	concean:		Invoicing Addres		:				-11-41	A۱	IALYS	ES REQL		-13	eq.	Othe				UND TIME
Contact	of Resolute Bay	7166		Hamlet of F	lusolute Bay		ATCO Structures PO Box 88	& Logistics			Micro	oioide	gicai	ъ			hentical	1		Uthe		Description of the last of the	REQUE ary of Si	urcharges ***
Rick Gaulton					Resolute Bay NU X0A 0V0				ᇤ	- 1		3a, C	Ag		li lidj					-		00% - same day**		
Tel: Fax: 867-252-3925									S04,			Zu,							E	Gold Silve		00% - 24 Hour 0% - 48 Hours		
the management of the second o			- Waterworks I	No.:	to the section	Project Name/No.:			nts, DOC	ਠੰ			Fe, Mn,	Se,	200	bidi			Section 2		Bronze 25% - 72 Hours Standard 5-7 days			
	Richard.gaulto	n@atcosl.co	<u>om</u>	Quote No.:			P.O. No.:	er		Surfactants	N02/N03	TDS	Phenol	As, Cu, F	CrVI, Pb,	Cyanide						1	cific Dat	
(GUDI =		der the influence of	surface water	PR = Plumbing	Residential	ition Water GW = R PNR = Plumbing No Sedimentation/Clari	on-Residentia	<pre>" ** Faste " = Clarifier,</pre>	aw Sur st pos	face Wa sible TA	ater U	GW = U ievable	ntreat (same	ed Grou day if a	ndwater (D pplicable)	* See	Caduc	eon Ge	neral Turn				Raw Water for
Lab No.	Sample Source and/	or Sample Identifi	cation		Sample Matrix *	Control Point **	Date Collected (yy-mm-dd)	Time Collected	Adverse Resample				By			est For Each		ovided			F	Chlorin ree T	otal	# Bottles/ Sample
CONTRACTOR STATE	Raw Drinking Wate				\$W		16/04/29			х	x	х	х	х	х	×								8
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4	Total				111										_			-		++	+			
		Has La	ab Service No	tification (LSN) Forn	n been co	mpleted & s	ubmitted	to the M	OE/F	PHU?		7	Yes		□ No	0 [Not	Applica	able			
	y .	Labo	oratory Analy			ce until a	II Notification		tion is re	ceiv	ed ar	nd th	e Su	bmi					ely co	mplete	ed			
		SUBMISSION I			0		INFORMATION		REPORT			$\overline{}$	de Locales			MPLE RE					and the last		ONLY	
	Sampled by: Submitted by:			Courier (Client account) Courier (Caduceon account)			Invoice	nvoice Results by Fax [Results by Email [Received By (print):							Signature: 713				
The gas on Type Gastron							# of Pieces Invoice by E					Date Received (yy-mm-dd): 4/0						7/16 Time Received: 10:40						
organ promote the state of the										Laboratory Prepared Bottles: Yes No Comments: Sample Temperature °C: R G Labeled by:														
	06/06/29 Date (yy-mr	4 PM	14/06/24 Date (yy-mn	n-dd)/Time:	Sada Georg	ion-up)		7	III VOICE D	, man			Samp Comm		nperatu	ire °C:	800	0		eled by:)	
	Kingston La	b - 285 Dalton Av		ario Laboratory 7K 6Z1, Tel: (61				ingston@cad	luceonlabs.c	com						10	PR	7	IXI		Г	1		
Kingston Lab - 285 Dalton Ave., Kingston, ON K7K 6Z1, Tel: (613) 544-2001 Fax: (613) 544-2770 Email: contactki Ottawa Lab - 2378 Holly Lane, Ottawa, ON K1V 7P1, Tel: (613) 526-0123 Fax: (613) 526-1244 Email: contactott Richmond Hill Lab - #14-110 West Beaver Creek Rd., Richmond Hill, ON L4B 1J9, Tel: (289) 475-5442 Fax: (866) 562-1963 Email								tawa@caduce	com	IPET						Page of				of				
RIGH							66-9567 Email: cont					COIII				10	4				D	W		
	1 157											7				2	000				0 (0 0			

Interlaboratory Submission Sheet

Caduceon Enterprises Inc. Environmental Laboratory

Ship to:

Purchase Order #: P160704-NG

Report to:

Niagara Analytical 5808 Progress St Niagara Falls, ON

L2E 6T3

1-905-374-5227 Fax: 1-905-956-9672 Attn: Stephne Johnston Caduceon Enterprises Inc.

2378 Holly Lane Ottawa, Ontario

K1V 7P1 Tel: 613-526-0123

Fax(1): 613-228-1148 - Ottawa West Fax(2): 613-544-2770 - Kingston

Date Ordered:

4-Jul-16

Contact :- Contact (1): - Greg Clarkin

Contact (2): - Krystyna Pipin

Contact (3): - Gord Murphy

gclarkin@caduceonlabs.com

kpipin@caduceonlabs.com gmurphy@caduceonlabs.com

Date Required:

Regular (5/7 days)

Item # Quantity Workorder #			Sample #	Water Works # & Lo A	nalyses required	Sample	Unit Pr	-100-0	
				Water Works #	Analysis	Date	Sample		
Item#	Quantity	Workorder #	Sample #	& Location	required	Sampled	Type	Price	Extension
1	1	B16-18740-1	#1	90	Surfactant	29-Jun-16	WW		
4									
5									
6									
7		Please send report to	o all the co	ontacts above.					
8		Please contact Sabir	na Islam a	t sislam@caduceonla	abs.com for any inq	uiry about the subm	nission		
9									
14									
15									
_16									

DW= Drinking Water WW= Waste Water SW= Surface Water GW= Ground Water W= Water S= Solid LS= Liquid Sludge SS= Solid Sludge Sed= Sediment PC= Paint chips F= Filter