

**DRINKING WATER FACILITY CLASSIFICATION**

- ☒ Municipal ☐ Non-Municipal ☐ Reg. 170/03  
☐ Large ☐ Small ☐ Reg. 318/08 & 319/08  
☐ Residential ☐ Non-Residential ☐ Reg. 243/07  
☐ Seasonal ☐ Year-Round ☐ Private Well Water  
☐ Other: \_\_\_ Raw Drinking water

REPORT NUMBER (Lab Use)

July 26, 16  
B16-21906

**Indicate Laboratory Samples are Submitted to**

- ☐ Kingston ☒ Ottawa ☐ Richmond Hill ☐ Windsor

<b>Organization:</b> Hamlet of Resolute Bay ATCO		<b>Waterworks Address:</b> Hamlet of Resolute Bay PO BOX 88 Resolute Bay, NU X0A 0V0		<b>Invoicing Address (if different):</b> ATCO Structures & Logistics PO Box 88 Resolute Bay NU X0A 0V0		<b>ANALYSES REQUESTED</b>										<b>TURNAROUND TIME REQUESTED</b>																											
<b>Contact:</b> Rick Gaulton						<table border="1"> <tr> <th colspan="5">Microbiological</th> <th colspan="5">Chemical</th> <th colspan="2">Other</th> </tr> <tr> <td>Surfactants, DOC</td> <td>N02/N03, Cl, S04, FI</td> <td>TDS</td> <td>Phenol</td> <td>As, Cu, Fe, Mn, Zn, Ba, Cd</td> <td>CrVI, Pb, Se, Ag</td> <td>Cyanide</td> <td>E.Coli</td> <td></td> <td></td> <td></td> <td></td> <td></td> <td></td> </tr> </table>										Microbiological					Chemical					Other		Surfactants, DOC	N02/N03, Cl, S04, FI	TDS	Phenol	As, Cu, Fe, Mn, Zn, Ba, Cd	CrVI, Pb, Se, Ag	Cyanide	E.Coli							Summary of Surcharges *** <input type="checkbox"/> Platinum 200% - same day** <input type="checkbox"/> Gold 100% - 24 Hour <input type="checkbox"/> Silver 50% - 48 Hours <input type="checkbox"/> Bronze 25% - 72 Hours <input checked="" type="checkbox"/> Standard 5-7 days <input type="checkbox"/> Specific Date: _____	
Microbiological					Chemical					Other																																	
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<b>Tel:</b> 867-252-3925		<b>Fax:</b>		<b>Project Name/No.:</b> Raw Drinking Water																																							
<b>After Hours Tel:</b>		<b>Public Health Unit:</b>		<b>Waterworks No.:</b>																																							
<b>Quote No.:</b>		<b>P.O. No.:</b>																																									
<b>Richard.gaulton@atcosl.com</b>																																											

\* Sample Matrix Legend: TW = Treated Water DW = Distribution Water GW = Raw Groundwater SW = Raw Surface Water UGW = Untreated Groundwater (Drinking Water/Distribution)

GUDI = Groundwater under the influence of surface water PR = Plumbing Residential PNR = Plumbing Non-Residential \*\* Fastest possible TAT achievable (same day if applicable) \*\*\* See Caduceon General Turnaround Time Terms

\*\*Control Points (RW = Raw, TW = Treated, DW = Distribution, C/F = Coagulation/Flocculation, S/C = Sedimentation/Clarification, Clar = Clarifier, Filt = Filter, BW = Backwash, FSup = Filter Supernatant, FBW = Filterbackwash, WW = Wastewater, RWFC = Raw Water for Consumption)

Lab No.	Sample Source and/or Sample Identification	Sample Matrix *	Control Point **	Date Collected (yy-mm-dd)	Time Collected	Adverse Resample	Indicate Test For Each Sample By Using A Check Mark In The Box Provided												Chlorine		# Bottles/ Sample
																			Free	Total	
1	Tap water	TW					x	x	x	x	x	x	x								8
2	Treated		DW	16-07-20	8AM	X															1
3	Treated			16-07-20	8AM		X														1
4	Treated			16-07-20	8AM			X													1
5	Treated			16-07-20	8AM				X												1
6	Treated			16-07-20	8AM					X											1
7	Treated			16-07-20	8AM						X										1
	Chlor passed bordering		TDS not done																		2

Has Lab Service Notification (LSN) Form been completed & submitted to the MOE/PHU? ☐ Yes ☐ No ☒ Not Applicable

Laboratory Analysis will not commence until all Notification information is received and the Submission form is appropriately completed

SAMPLE SUBMISSION INFORMATION		SHIPPING INFORMATION		REPORTING / INVOICING	SAMPLE RECEIVING INFORMATION (LABORATORY USE ONLY)	
<b>Print:</b> Phil Chubbbs <b>Sign:</b> [Signature]	<b>Submitted by:</b> Phil Chubbbs <b>Date (yy-mm-dd)/Time:</b> 16-07-20 8AM	<b>Courier (Client account)</b> <input checked="" type="checkbox"/> <b>Courier (Caduceon account)</b> <input type="checkbox"/> <b>Drop Off</b> <input type="checkbox"/> <b>Caduceon (Pick-up)</b> <input type="checkbox"/>	<b>Invoice</b> <input type="checkbox"/> <b># of Pieces</b> <input type="checkbox"/>	<b>Results by Fax</b> <input type="checkbox"/> <b>Results by Email</b> <input checked="" type="checkbox"/> <b>Invoice by Email</b> <input checked="" type="checkbox"/> <b>Invoice by Mail</b> <input type="checkbox"/>	<b>Received By (print):</b> JOL <b>Date Received (yy-mm-dd):</b> 26/07/16 <b>Laboratory Prepared Bottles:</b> <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <b>Sample Temperature °C:</b> 20.5 <b>Comments:</b> H-L glass/clear / 1CN 1CM 1M 1NP 1back 1ph 1DOC	<b>Signature:</b> [Signature] <b>Time Received:</b> 11:50 <b>Labeled by:</b> <b>Page</b> _____ <b>of</b> _____ <b>DW 21906</b>

**Ontario Laboratory Locations/ Shipping Addresses**

Kingston Lab - 285 Dalton Ave., Kingston, ON K7K 6Z1, Tel: (613) 544-2001 Fax: (613) 544-2770 Email: contactkingston@caduceonlabs.com  
 Ottawa Lab - 2378 Holly Lane, Ottawa, ON K1V 7P1, Tel: (613) 526-0123 Fax: (613) 526-1244 Email: contactottawa@caduceonlabs.com  
 Richmond Hill Lab - #14-110 West Beaver Creek Rd., Richmond Hill, ON L4B 1J9, Tel: (289) 475-5442 Fax: (866) 562-1963 Email: contactrichmondhill@caduceonlabs.com  
 Windsor Lab - #5-3201 Marentette Ave., Windsor, ON N8X 4G3, Tel: (519) 966-9541 Fax: (519) 966-9567 Email: contactwindsor@caduceonlabs.com