CADUCEON ENVIRONMENTAL LABORATORIES
Client committed. Quality assured.

**TESTING REQUIREMENTS**

- ☐ O.Reg 153/09 ☐ O.Reg 153/04 Table _____ ☐ MISA Guidelines
- ☐ Surface Soil ☐ Sub Surface Soil (O.Reg 153/09) ☐ O.Reg 558 Leachate Analysis
- ☐ Yes ☐ No Record of Site Condition (O.Reg 153/09) Disposal Site: _____
- ☐ Provincial Water Quality Objectives ☐ Landfill Monitoring
- ☐ Sewer Use By-Law: _____ ☐ Other: _____

**REPORT NUMBER (Lab Use)** July 27.12 B2-18967

Indicate Laboratory Samples are submitted to: ☐ Kingston ☐ Ottawa ☐ Richmond Hill ☐ Windsor

Organization: Hamlet of Hall Beach
Contact: John R Ivey
Tel: 867-928-8829
Fax: 867-928-8871
Email: sao_hbhamlet@qiniq.com

Address and Invoicing Address (if different): P.O. Box 3, Hall Beach, X0A 0K0

Quote No.:
P.O. No.:
Project Name: Waste Water Sample
Additional Info:

**ANALYSES REQUESTED (Print Test In Boxes)**: BOD, TSS; Suspected Highly Contaminated

**TURNAROUND SERVICE REQUESTED (see back page)**

- ☐ Platinum 200% Surcharge**
- ☐ Gold 100% Surcharge
- ☐ Silver 50% Surcharge
- ☐ Bronze 25% Surcharge
- ☐ Standard 5-7 days
- ☐ Specific Date: _____

Are any samples to be submitted intended for Human Consumption? ☐ Yes ☐ No (If yes, submit all drinking water samples on a drinking water Chain of Custody)

* Sample Matrix Legend: WW=Waste Water SW=Surface Water GW=Groundwater LS=Liquid Sludge SS=Solid Sludge S=Soil Sed=Sediment PC=Paint Chips F=Filter Oil = Oil

| Lab No: | Sample Identification Sewer | Sample Matrix * | Date Collected (yy-mm-dd) | Time Collected | BOD | TSS | ✓ | Field pH | Field Temp. | # Bottles/ Sample | Field Filtered(Y/N) |
|---|---|---|---|---|---|---|---|---|---|---|---|
| | Site #1 Hall Beach Truck | WW | 12-07-26 | 8:15 | ✓ | ✓ | | | | | |
| | Site #2 Hall Beach Lagoon | WW | " | " | ✓ | ✓ | | | | | |
| | Site #3 Hall Beach Wetlands | WW | " | " | ✓ | ✓ | | | | | |

**SAMPLE SUBMISSION INFORMATION**
Sampled By (print): JACK KAMMUKA
Submitted By (print):
Signature:
Date(yy-mm-dd): Time:

**SHIPPING INFORMATION**
- ☒ Courier (Client account)
- ☐ Courier (Caduceon account)
- ☐ Drop Off
- ☐ Caduceon (Pick-up)

# of Pieces Shipped

**REPORTING / INVOICING**
- ☐ Report by Fax
- ☒ Report by Email
- ☒ Invoice by Email
- ☐ Invoice by Mail

**SAMPLE RECEIVING INFORMATION (LABORATORY USE ONLY)**
Received By (print): Vasona Signature: [illegible]
Date Received (yy-mm-dd): July 27 12 Time Received: 2:40
Laboratory Prepared Bottles: ☒ Yes ☐ No
Sample Temperature °C: 20°C Labeled by:
Comments: 2 pet 2 R.

Page ___ of ___

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., 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) 966-8541 Fax: (519) 966-9567 Email: contactwindsor@caduceonlabs.com

White: Lab Copy / Yellow: Invoicing Copy / Pink: Client Copy

CofC., Sep 2011, Revision No: 14

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