



## Sample Receipt Confirmation

**Invoice Distribution: Report Distribution:** 

Acct Name: Municipality of Sanikiluaq Company Name: Municipality of Sanikiluag

Contact: MOSES NOVALINGA Contact: Accounts Payable Address: PO Box 157, PO Box 157, Address:

Sanikiluaq, NU, X0A 0W0 Sanikiluaq, NU, X0A 0W0 Phone: 867-266-7900

Phone: 867-266-7900 Fax: 867-266-7924 Fax: 867-266-7924 Email: sanisao@qiniq.com broy@gov.nu.ca

sanisao@qiniq.com Invoice Email: cvanlankveld1@gov.nu.ca Project #: N/A

sanilands@qiniq.com sanisrec@qiniq.com Account #: W10375

Fax: Y

Report Name: STANDARD

**Digital Type:** Digital Email: Distribution: Hard Copy: N

**Client Information:** 

Job Reference #: SANIKILUAQ WTP - DRINKING WATER Date Sampled: 21-JAN-13

Email: Y

Date Received: 22-JAN-13 Project PO #: Legal Site Description: N/A Sampled By: Moses

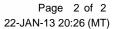
**Chain Of Custody:** Quote #: N/A

Client Job #: SANIKILUAQ WTP - DRINKING WATER Workorder Summary:

Lab Work Order #: L1260495 Account Manager: Paul Nicolas Estimated completion date: 25-JAN-13 Estimated sample disposal date: 24-FEB-13

5 Samples received at ALS in WINNIPEG

Lab Sample ID	Client Sample ID	Date Sampled	Date Received	Sample Priority Due Date Flag	Sample Type	
L1260495-1	TRUCK NOZZLE	21-JAN-13 11:45	22-JAN-13 12:00	25-JAN-13	Water	
L1260495-2	PAATSAALIK SCHOOL	21-JAN-13 11:40	22-JAN-13 12:00	25-JAN-13	Water	
L1260495-3	NUIJAK SCHOOL	21-JAN-13 10:26	22-JAN-13 12:00	25-JAN-13	Water	
L1260495-4	HEALTH CENTRE	21-JAN-13 10:20	22-JAN-13 12:00	25-JAN-13	Water	
L1260495-5	HAMLET OFFICE	21-JAN-13 12:35	22-JAN-13 12:00	25-JAN-13	Water	





Analysis Requested :		
	Total Coliform and E.coli	Sample Handling and Disposal Fee
TRUCK NOZZLE	✓	✓
PAATSAALIK SCHOOL	$\checkmark$	✓
NUIJAK SCHOOL	✓	✓
HEALTH CENTRE	✓	✓
HAMLET OFFICE	✓	✓

**Sample Integrity Observations:** No observations were identified for this work order submission.

ALS Group strives to deliver on-time results to our clients at all times. However, there are times when due to capacity issues or other unforeseen circumstances we are unable to meet our expected turnaround times. The information above is related to a recent workorder you have submitted to our laboratory. In the event that you have an inquiry, please refer to the Lab Work Order # when calling your Account Manager.

(ALS) Environmental

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Report To				1))	Servi	ce Reque	sted (	Rush for	routine :	analysis s	ubject to	availabil	lity)		
Company: Municipality of SANIKILUAQ (W10375)		L1260495-COFC				Regular (Standard Turnaround Times - Business Days)									
Contact: MOSES NOVALINGA	_	பு புதாவ 🗹 Fax 🔘 Priority (2-4 Business Days) - 50% Surcharge - Contact Al						ct ALS to (	Confirm *	TAT					
Address: Box 157	Email 1:	sanisao@qiniq.			O Em	ergency (1-	2 Bus. D	ays) • 100	s) • 100% Surcharge - Contact ALS to Confirm TAT						
Sanikiluaq, NU, X0A 0W0		sanirec@qiniq.c			○ Sar	ne Day or W	eekend	Emergeno	y - Conta	tact ALS to Confirm TAT					
Phone: 867-266-7900 Fax: 867-266-7924		cvanlankveld1@					Analysis Request								
Invoice To Same as Report ? Yes No	Client / Project Information Please indicate below Filtered, Preserved or both (F.						, P, F/	P)							
Hardcopy of Invoice with Report? Yes No	Job#:					<u> </u>									
Company: (W10375)	PO / AFE:					Ê									
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Lab Work Order #	<del>-  </del>				12 ×	🖫							Š		
(lab use only)	Contact:		Sampler:	OSES	C-QT51-WF	ROU4W+MET-T-WP	COLOUR-TRUE-WP						Number of Containers		
Sample Sample Identification  (This description will appear on the report)		Date (dd-mmm-yy)	Time (hh:mm)	Sample Type	10,E(	ROU	COLC						Nom		
1) Truck Nozale		21-01-13	11:45 AM	Ho-42											
2) Pacetsaalik school		11		LAUNDRYRM											
3) Neujak school		li .	10126 AM	STAFF ROOM											
4) Health lastre		r.	10:20 AM	SERVICE RM											
5) Hamlet office		11	12:35AM												
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Special Instructions / Regulations with water or la	and use (CCM	E-Freshwater A	quatic Life/BC	CSR - Commerc	ial/AB	Tier 1 - N	latural	l, etc) /	Hazard	ous Det	ails				
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By the use of this form the user ac	knowledges a	nd agrees with	the Terms and	Conditions as p	rovide	ed on a s	eparat				nalveos	2			
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