

SGS Canada Inc.

P.O. Box 4300 - 185 Concession St. Lakefield - Ontario - KOL 2HO

Phone: 705-652-2000 FAX: 705-652-6365

Works #: 500002861 Project : PO#126993

06-August-2024

Date Rec. : 30 July 2024 LR Report: CA85034-JUL24

Copy: #1

PVNC Catholic DSB (Reg243 - St Mary's ES-Lindsay)

Attn: Nicole Teunissen

1355 Lansdowne Street West Peterborough, ON K9J 7M3, Canada

Phone: Office: 705-748-4861 Ext. 1286 Cell: 905-914-7130

Fax:

CERTIFICATE OF ANALYSIS Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	Lead ug/L
1: Analysis Start Date			06-Aug-24
2: Analysis Start Time			08:27
3: Analysis Completed Date			06-Aug-24
4: Analysis Completed Time			10:52
5: MAC			10
6: MDL			0.01
7: TAP Standing - Rm 128 - Tap	25-Jul-24 22:54	22.0	2.06
8: TAP Flushed - Rm 128 - Tap	25-Jul-24 23:29	22.0	0.81

MAC - Maximum Acceptable Concentration MDL - SGS Method Detection Limit

Method Descriptions

Parameter	Description	SGS Method Code
Lead	Lead by ICP-MS Drinking Water	ME-CA-[ENV]SPE-LAK-AN-006

Kimberley Didsbury

Project Specialist,

Environment, Health & Safety

Email: Phone: Address: Contact: Company: Cambium Inc. eceived Time: __ ceived Date: Stew Dolstra Stew.Dolstra@cambium-inc.com
JOShha. Munlo@Cambium 705-742-7900 ext 210 (Stew D) 194 Sophia Street REPORT INFORMATION 130124 (mm/dd/y) Peterborough ON K9H 1E5 ndustries & Envir (mm/dd/yy) Email: - Lakefield: 185 Concession St., Lakefield, ON K0L 2H0 Phone: 705-652-2000 Fax: 705-652-6365 Web: www.sgs.com/envir Phone: Address: Contact: Company: PVNC Catholic DSB - London: 657 Consortium Court, London, ON, N6E 2S8 Phone: 519-672-4500 Toll Free: 877-848-8060 Fax: 519-672-0361 Request for Laboratory Services and CHAIN OF CUSTODY - specific SDWA/HPPA (1st Party) (same as Report Information) accounts@pvnccdsb.on.ca; Peterborough, ON Mwenu Amukun mamukun@pvnccdsb.on.ca 416-770-5521 Office: 705-748-4861 Ext. 1286 Cell: **K9J 7M3** 1355 Lansdowne Street West INVOICE INFORMATION Received By (signature): Cooling Agent Present Yes No Type: Laboratory Information Section - Lab use only Contact Fax: Physical Address: Contact Phone: Contact: Waterworks/DWS#: System Name: WATER FACILITY INFORMATION 500002861 705-742-7907 2J8, Canada Clarington CDSB (St Mary's) Peterborough Victoria Northumberand and 16 St Lawrence Street, Lindsay, Ontario, K9V 4378 (StewD - cell) 705-742-7900 ext 210 (StewD), or 705-740-Cambium Inc. - Stew Dolstra Laboratory Received Date: Temperature Upon Receipt Laboratory Received Time: Specify Due Date TAT's are quoted in business days (exclude statutory holidays & weekends). Samples received after 6pm or on weekends: TAT begins next business day. PLEASE CONFIRM RUSH FEASIBILITY WITH SGS REPRESENTATIVE PRIOR TO SUBMISSION (Additional Charges May Apply) 4 Regular TAT (5-7days) (hr: min) Client ID#: Rush TAT (1-4days) (mm/dd/yy) TURNAROUND TIME (TAT) REQUIRED

Project #: 17744-001

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| As per the Ontario Sate Drinking Water Act and Health Protection and Promotion Act, the water facility information and the sample information sections must be filled out prior to processing samples. Sample source codes indicate whether samples are Reportable or Not Reportable under these acts. The laboratory will report all adverse results as per the applicable regulation and source code.

MOH Unit:

Haliburton, Kawartha, Pine Ridge District Health Unit Stew.Dolstra@cambium-inc.com

Contact Email:

P.O.#

	Diagon shock requisition that applies to wat	for comple cuhmitted					Sample Source Codes	ource (Sapo			
□ O.Reg 170/03	03	of confidence		RW=	RW = Raw Water		Source water prior to treatment. Water is not for consumption	reatmen	t. Wate	er is not for	consumption.	
	08			= WT	TW = Treated Water		Water taken immediate	ely after	treatm	ent at poin	Water taken immediately after treatment at point of entry to the distribution system	n system.
	07			DW=	DW = Distribution Water	er	Water taken from a distribution point in a system with treatment	stribution	point i	in a systen	n with treatment.	
	Certificate of Approval Requirement			W-	DW-IIT = Untreated Distribution Water	stribution Wa		ption. W	ater tal	ken from a	Raw water for consumption. Water taken from a distribution point in a system with no treatment finctudes raw water from systems that have qualified for an exemption from treatment and raw water from	tem with no treatment nent and raw water from
☐ Regulated N	Regulated Not Reportable (RNR)			3	Control			tment sys	tem tha	it is not app	roved).	
☐ Required-Upload	MA	Not Required-Do not upload sample results in DWIS/LRMA	DWIS/LRMA	TAP (TAP (Standing & Flushed)	ed)	Water taken for the pu	rposes	of lead	testing un	Water taken for the purposes of lead testing under O.Reg. 243/07 (Schools & Daycare)	ols & Daycare)
□ Not Regulated (NR)	ed (NR)			RNR	RNR = Regulated Not Reportable	Reportable	Samples taken from a non-standard location under the other than assessing water quality against the OSDWA	non-sta vater qu	ndard II ality ag	ocation un ainst the C	Samples taken from a non-standard location under the direction of the system owner for reasons other than assessing water quality against the OSDWA.	stem owner for reasons
				NR =	NR = Not Regulated Not Reportable	ot Reportable	Samples are not regulated by SDWA	ated by	SDWA	263		
Sample Information	tion						ANALYSIS REQUESTED	REQ	JEST	ED OB		
					ple	ase enter the	please enter the analysis required below and check off which analysis applies to each sample	check	off whi	ch analys	is applies to each same	ole .
SAMPLE SOURCE CODE	SAMPLE IDENTIFICATION	DATE TIME SAMPLED SAMPLED	ED BOTTLES	Check if RE-SAMPLE from an adverse report	Field Total Residual Chlorine	Field Free Residual Chlorine	Lead					Comments
1 TAP-Standing	Rm 138-TUP	45:EC HC15C/10	4 2		THE ENGINEERING		. X		H			
2 TAP-Flushed	Rm 128-TUP	04/25/2423:29	9 2				*					
3 TAP-Standing												
4 TAP-Flushed												
5 TAP-Standing									,			
6 TAP-Flushed												
7 TAP-Standing												
8 TAP-Flushed						Section 5						
9 TAP-Standing			1.									
10 TAP-Flushed												
Observations/Comments/Special Instructions	ecial Instructions											
Sampled By (NAME):	Ethan Martile	Signature:	カラ				Date 0:	176	35	ng	(mm/dd/yy)	
Relinquished by (NAME):		Signature:	EM				Date 0	2	36	24	(mm/dd/yy)	
Revision # 3.4	Note: (1) Submission of samples to SGS is acknowledgement	that you have been provided direction on sa	ample collection/handling	and transp	ortation of samples. (2) Sub	mission of samples to	SGS is considered authorization for completion	of work. Sig	natures ma	ay appear on in	is form or be retained on the in the cont	on for completion of work. Signatures may appear on this form of or retained on the in the contract, of it are distributed to the signatures may appear on this form of or retained on the in the contract, of it are distributed to the signature of the signature o