



**SGS Canada Inc.**

P.O. Box 4300 - 185 Concession St.  
Lakefield - Ontario - K0L 2H0  
Phone: 705-652-2000 FAX: 705-652-6365

**Works #:** 500035894

**Project :** PO#126993

06-August-2024

**PVNC Catholic DSB (Reg243 - St Peter's SS)**

Attn : Nicole Teunissen

**Date Rec. :** 30 July 2024

**LR Report:** CA85026-JUL24

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

**Copy:** #1

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           |                    | ---                         | 10:47     |
| 5: MAC                               |                    | ---                         | 10        |
| 6: MDL                               |                    | ---                         | 0.01      |
| 7: TAP Standing - H1505 - BF         | 25-Jul-24 02:46    | 24.0                        | 0.61      |
| 8: TAP Flushed - H1505 - BF          | 25-Jul-24 03:28    | 24.0                        | 0.37      |
| 9: TAP Standing - Staff Rm 102 - Tap | 25-Jul-24 02:56    | 24.0                        | 0.66      |
| 10: TAP Flushed - Staff Rm 102 - Tap | 25-Jul-24 03:34    | 24.0                        | 0.30      |

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



Industries & Environment

# Request for Laboratory Services and CHAIN OF CUSTODY - specific SDWA/HPPA (1st Party)

Lakeland 185 Concession St., Lakeland, ON N0L 2H0 Phone: 705-652-2000 Fax: 705-652-9385 Web: www.sgs.com/environment  
London 657 Consortium Court, London, ON, N6E 2S8 Phone: 519-872-4500 Toll Free: 877-848-8060 Fax: 519-872-0361

Received By: Sean Wray  
Received Date: 7/30/24 (mm/dd/yy)  
Received Time: 9:43 (hr: min)

Received By (signature): [Signature]  
Cooling Agent Present: Yes  No  Type: sg

Temperature Upon Receipt: 24.0 x 3  
Laboratory Received Date: \_\_\_\_\_ (hr: min)  
Laboratory Received Time: \_\_\_\_\_ (hr: min)

LAB LIMS #: Jul-85036 NL  
Client ID#: \_\_\_\_\_

## REPORT INFORMATION

Company: Cambium Inc.  
Contact: Stew Dolstra  
Address: 194 Sophia Street  
Peterborough ON K9H 1E5  
Phone: 705-742-7900 ext 210 (Stew D)

Fax: \_\_\_\_\_  
Email: Stew.Dolstra@cambium-inc.com  
joshw.mumford@cambium  
-nl.com

Project #: 11774-001

## INVOICE INFORMATION

(same as Report Information)  
Company: PVNC Catholic DSB  
Contact: Mwenu Amukun  
Address: 1355 Lansdowne Street West  
Peterborough, ON  
K9J 7M3  
Office: 705-748-4861 Ext. 1286 Cell:  
416-770-5521  
accounts@pvncdsb.on.ca;  
mamukun@pvncdsb.on.ca

P.O.#: \_\_\_\_\_  
#: \_\_\_\_\_

## WATER FACILITY INFORMATION

System Name: Peterborough Victoria Northumberland and Clarington CDSB (St Peter's)  
Waterworks/DWS#: 500035894  
Contact: Cambium Inc. - Stew Dolstra  
705-742-7900 ext 210 (Stew D), or 705-740-4378 (Stew D - cell)  
Physical Address: 733 Parkhill Road West, Peterborough, Ontario, K9J 8M4, Canada  
Contact Fax: 705-742-7907  
Contact Email: Stew.Dolstra@cambium-inc.com  
MOH Unit: Peterborough County-City Health Unit  
Day Care License #/SFIS#: N/A

## TURNAROUND TIME (TAT) REQUIRED

TATs are quoted in business days (exclude statutory holidays & weekends). Samples received after 6pm or on weekends: TAT begins next business day.  
 Regular TAT (5-7days)  
 Rush TAT (1-4days)  
Specify Due Date: \_\_\_\_\_  
PLEASE CONFIRM RUSH FEASIBILITY WITH SGS REPRESENTATIVE PRIOR TO SUBMISSION (Additional Charges May Apply)

As per the Ontario Safe 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.

## Please check regulation that applies to water sample submitted

- O.Reg. 170/03
- O.Reg. 319/08
- O.Reg. 243/07
- Certificate of Approval Requirement
- Regulated Not Reportable (RNR)
- Required-Upload sample results in DWIS/LRMA
- Not Regulated (NR)

## Sample Source Codes

- RW = Raw Water Source water prior to treatment. Water is not for consumption.
- TW = Treated Water Water taken immediately after treatment at point of entry to the distribution system.
- DW = Distribution Water Water taken from a distribution point in a system with treatment.
- DW-UT = Untreated Distribution Water Raw water for consumption. Water taken from a distribution point in a system with no treatment (includes raw water from systems that have qualified for an exemption from treatment and raw water from systems that have a treatment system that is not approved).
- TAP (Standing & Flushed) Water taken for the purposes of lead testing under O.Reg. 243/07 (Schools & Daycare)
- RNR = Regulated Not Reportable Samples taken from a non-standard location under the direction of the system owner for reasons other than assessing water quality against the OSDWA.
- NR = Not Regulated Not Reportable Samples are not regulated by SDWA

## Sample Information

| SAMPLE SOURCE CODE | SAMPLE IDENTIFICATION | DATE SAMPLED | TIME SAMPLED | # OF BOTTLES | Comments |
|--------------------|-----------------------|--------------|--------------|--------------|----------|
| 1 TAP-Standing     | H1505-BF              | 07/25/24     | 02:46        | 2            |          |
| 2 TAP-Flushed      | H1505-BF              | 07/25/24     | 03:28        | 1            |          |
| 3 TAP-Standing     | Staff rm 102-TAP      | 07/25/24     | 02:50        | 1            |          |
| 4 TAP-Flushed      | Staff rm 102-TAP      | 07/25/24     | 03:34        | 1            |          |
| 5 TAP-Standing     |                       |              |              |              |          |
| 6 TAP-Flushed      |                       |              |              |              |          |
| 7 TAP-Standing     |                       |              |              |              |          |
| 8 TAP-Flushed      |                       |              |              |              |          |
| 9 TAP-Standing     |                       |              |              |              |          |
| 10 TAP-Flushed     |                       |              |              |              |          |

## ANALYSIS REQUESTED

please enter the analysis required below and check off which analysis applies to each sample

| Check if RE-SAMPLE from an adverse report | Field Total Residual | Field Free Residual | Chlorine | Lead | Comments |
|---|----------------------|---------------------|----------|------|----------|
| <input type="checkbox"/>                  |                      |                     |          | X    |          |
| <input type="checkbox"/>                  |                      |                     |          | X    |          |
| <input type="checkbox"/>                  |                      |                     |          | X    |          |
| <input type="checkbox"/>                  |                      |                     |          | X    |          |
| <input type="checkbox"/>                  |                      |                     |          |      |          |
| <input type="checkbox"/>                  |                      |                     |          |      |          |
| <input type="checkbox"/>                  |                      |                     |          |      |          |
| <input type="checkbox"/>                  |                      |                     |          |      |          |
| <input type="checkbox"/>                  |                      |                     |          |      |          |

## Observations/Comments/Special Instructions

Sampled By (NAME): Ethan Maitre Signature: EM Date: 07/25/24 (mm/dd/yy)

Retinquished By (NAME): Ethan Maitre Signature: EM Date: 07/25/24 (mm/dd/yy)

Revision # 3.4  
Date of Issue: 20 Oct. 2022  
Note: (1) Submission of samples to SGS is acknowledgement that you have been provided direction on sample collection, handling and transportation of samples. (2) Submission of samples to SGS is considered authorization for completion of work. Signatures may appear on this form or be retained on file in the contract, or in an alternative format (e.g. shipping documents). (3) Results may be sent by email to an unlimited number of addresses for no additional cost. Fax is available upon request. (4) Completion of work may require subcontracting samples between the London and Lakeland laboratories. This document is issued by the Company under its General Conditions of Service accessible at [http://www.sgs.com/terms\\_and\\_conditions.htm](http://www.sgs.com/terms_and_conditions.htm). (Printed copies are available upon request.) Attention is drawn to the limitation of liability, indemnification and jurisdiction issues defined therein.