



AQUATIC CONSULTING & TESTING, INC.

1525 W. University Drive, Suite 106
P.O. Box 1510
Tempe, Arizona 85281
Phone: (480) 921-8044 • Fax: (480) 921-0049

Lic. No. AZ0003

LABORATORY REPORT

Client: ADEQ

Lead in Drinking Water School Proj.
1110 W. Washington Street
Phoenix, AZ 85007

Attn: David Burchard

Date Submitted: 02/24/17

Date Reported: 03/16/17

Project: Neely Elementary School

RESULTS

Client ID: 1006-01
ACT Lab No.: BZ02168

Sample Type: Drinking Water
Sample Time: 02/19/17 08:28

<u>Parameter</u>	<u>Analysis Date</u>		<u>Method No.</u>	<u>MDL</u>	<u>Result</u>	<u>Unit</u>	<u>Analyst</u>
	<u>Start</u>	<u>End</u>					
Lead	03/06/17	03/06/17	200.8	1.0	1.22	ug/L	SLM

Client ID: 1002-02
ACT Lab No.: BZ02169

Sample Type: Drinking Water
Sample Time: 02/18/17 15:02

<u>Parameter</u>	<u>Analysis Date</u>		<u>Method No.</u>	<u>MDL</u>	<u>Result</u>	<u>Unit</u>	<u>Analyst</u>
	<u>Start</u>	<u>End</u>					
Lead	03/06/17	03/06/17	200.8	1.0	<1.00	ug/L	SLM

Reviewed by: _____

Frederick A. Amalfi, Ph.D.
Laboratory Director

Sample Collection Record

To be completed by the sample collector

Complete copy of this form for each sample collected. Your drinking water sample cannot be tested unless a copy of this form is shipped to the lab with each sample. In addition, the sample cannot be tested unless the Sample Identification Number matches the number on the sample container label.

Check this box to confirm that water had not been used at this tap or other taps in the area for 6 hours and no flushing was done prior to sampling

Name of School District	Gilbert Unified District
Name of School	Neely Elementary School
Building (name/number)	1006
Type of Fixture (tap, drinking fountain etc.)	Sink
Location of Fixture (example, room number)	Room # F-3
Sample Identification Number (ensure this number is also on the sample container)	1006-01
Date of Collection	02-19-17
Time of Collection	8:28 AM
Name of Sample Collector	Daniel Robles
Signature Sample Collector	<i>Daniel Robles</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
<p style="text-align: center; font-size: 24px; font-weight: bold;">BZ-02168</p> <div style="text-align: right; font-size: 18px;"> 15:00 FEB 24 2017 <i>160</i> </div>	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

These samples are collected and are to be analyzed for screening purposes only and cannot be used for compliance.

Sample Collection Record

To be completed by the sample collector

Complete copy of this form for each sample collected. Your drinking water sample cannot be tested unless a copy of this form is shipped to the lab with each sample. In addition, the sample cannot be tested unless the Sample Identification Number matches the number on the sample container label.

Check this box to confirm that water had not been used at this tap or other taps in the area for 6 hours and no flushing was done prior to sampling

Name of School District	Gilbert Unified District
Name of School	Neely Elementary School
Building (name/number)	1002
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Multi Purpose Room
Sample Identification Number (ensure this number is also on the sample container)	1002-02
Date of Collection	02-18-17
Time of Collection	3:02
Name of Sample Collector	Daniel Robles
Signature Sample Collector	<i>Daniel Robles</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
<p style="text-align: center; font-size: 1.2em; font-weight: bold;">BZ-02169</p> <p style="text-align: right; font-size: 1.2em;">15:00 FEB 24 2017</p>	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

These samples are collected and are to be analyzed for screening purposes only and cannot be used for compliance.