



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: 04/24/17

Date Reported: 05/04/17

Project: Williams Field HS

RESULTS

<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>					
Client ID: 1 ACT Lab No.: BZ05469		Sample Type: Drinking Water Sample Time: 03/23/17 06:35					
Lead	05/02/17	05/02/17	200.8	1.0	<1.00	ug/L	SLM
Client ID: 2 ACT Lab No.: BZ05470		Sample Type: Drinking Water Sample Time: 03/23/17 06:45					
Lead	05/02/17	05/02/17	200.8	1.0	<1.00	ug/L	SLM
Client ID: 3.1 ACT Lab No.: BZ05471		Sample Type: Drinking Water Sample Time: 03/23/17 06:50					
Lead	05/02/17	05/02/17	200.8	1.0	<1.00	ug/L	SLM
Client ID: 3.2 ACT Lab No.: BZ05472		Sample Type: Drinking Water Sample Time: 03/23/17 06:55					
Lead	05/02/17	05/02/17	200.8	1.0	<1.00	ug/L	SLM

RESULTS

Client ID: 4
ACT Lab No.: BZ05473

Sample Type: Drinking Water
Sample Time: 03/23/17 07:00

<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	05/02/17	05/02/17	200.8	1.0	<1.00	ug/L	SLM

ba

Reviewed by: _____



Frederick A. Amalfi, Ph.D.
Laboratory Director

Collection Log

for experienced sample collectors

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	Higley Unified District
School Name	Williams Field High School
Building (name/number)	500
Type of Fixture (tap, drinking fountain etc.)	
Location of Fixture (example, room number)	Cafe
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	L
Date of Collection	3-23-17
Time of Collection	6:35 AM
Printed Name of Sample Collector	James Miller
Signature Sample Collector	<i>James Miller</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	APR 24 2017 @ 14:40 26°C
Signature <i>[Signature]</i>	
Notes:	
BZ-05469	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

These samples were collected for lead screening purposes only and cannot be used for compliance.

Collection Log

for experienced sample collectors

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	Higley Unified District
School Name	Williams Field High School
Building (name/number)	600 GYM
Type of Fixture (tap, drinking fountain etc.)	drinking
Location of Fixture (example, room number)	604
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	2
Date of Collection	3-23-17
Time of Collection	6:45 AM
Printed Name of Sample Collector	JAMES MILLER
Signature Sample Collector	<i>James Miller</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	APR 24 2017 @ 14:40 26°C
Signature	
Notes:	
BZ-05470	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

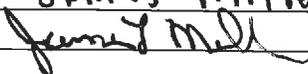
These samples were collected for lead screening purposes only and cannot be used for compliance.

Collection Log

for experienced sample collectors

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	Higley Unified District
School Name	Williams Field High School
Building (name/number)	100 ADMIT
Type of Fixture (tap, drinking fountain etc.)	Drinking
Location of Fixture (example, room number)	163
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	3.1
Date of Collection	8-23-17
Time of Collection	6:50
Printed Name of Sample Collector	JAMES MILLER
Signature Sample Collector	

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	APR 24 2017 @ 14:40 26°C
Signature	
Notes:	
BZ-05471	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

These samples were collected for lead screening purposes only and cannot be used for compliance.

Collection Log

for experienced sample collectors

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	Higley Unified District
School Name	Williams Field High School
Building (name/number)	300
Type of Fixture (tap, drinking fountain etc.)	DRINKING
Location of Fixture (example, room number)	305
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	3, 2
Date of Collection	3-23-17
Time of Collection	6:55 AM
Printed Name of Sample Collector	James Miller
Signature Sample Collector	<i>James J. Miller</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	APR 24 2017 @ 14:40 26C
Signature	
Notes:	
BZ-05472	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

These samples were collected for lead screening purposes only and cannot be used for compliance.

Collection Log

for experienced sample collectors

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	Higley Unified District
School Name	Williams Field High School
Building (name/number)	4100
Type of Fixture (tap, drinking fountain etc.)	Drinking
Location of Fixture (example, room number)	
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	4
Date of Collection	3-23-17
Time of Collection	7:00 AM
Printed Name of Sample Collector	JAMES MILLER
Signature Sample Collector	<i>James J. Miller</i>

Notes Sample collector:

For Lab use only		
Analyze this drinking water sample for lead		
Date and Time Lab received	APR 24 2017 @ 14:40	260
Signature		
Notes:		
BZ-05473		

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

These samples were collected for lead screening purposes only and cannot be used for compliance.