



# AQUATIC CONSULTING & TESTING, INC.

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P.O. Box 1510  
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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:** 01/12/17

**Date Reported:** 02/06/17

**Project:** Riverside Traditional School

## RESULTS

**Client ID:** RSTS 1  
**ACT Lab No.:** BZ00331

**Sample Type:** Surface Water  
**Sample Time:** 01/10/17 06:47

| <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             | 01/19/17             | 01/19/17   | 200.8             | 0.0010     | 0.0033        | mg/L        | SLM            |

**Client ID:** RSTS 2  
**ACT Lab No.:** BZ00332

**Sample Type:** Surface Water  
**Sample Time:** 01/10/17 06:51

| <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             | 01/19/17             | 01/19/17   | 200.8             | 0.0010     | 0.0021        | mg/L        | SLM            |

**Client ID:** RSTS 4.5  
**ACT Lab No.:** BZ00333

**Sample Type:** Surface Water  
**Sample Time:** 01/10/17 06:54

| <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             | 01/19/17             | 01/19/17   | 200.8             | 0.0010     | 0.0014        | mg/L        | SLM            |

**Client ID:** RSTS 4  
**ACT Lab No.:** BZ00334

**Sample Type:** Surface Water  
**Sample Time:** 01/10/17 06:59

| <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             | 01/19/17             | 01/19/17   | 200.8             | 0.0010     | <0.0010       | mg/L        | SLM            |

## RESULTS

Client ID: RSTS 5  
ACT Lab No.: BZ00335

Sample Type: Surface Water  
Sample Time: 01/10/17 07:05

| <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             | 01/19/17             | 01/19/17   | 200.8             | 0.0010     | 0.0010        | mg/L        | SLM            |

Client ID: RSTS 6  
ACT Lab No.: BZ00336

Sample Type: Surface Water  
Sample Time: 01/10/17 07:09

| <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             | 01/19/17             | 01/19/17   | 200.8             | 0.0010     | <0.0010       | mg/L        | SLM            |

Client ID: RSTS 7  
ACT Lab No.: BZ00337

Sample Type: Surface Water  
Sample Time: 01/10/17 07:12

| <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             | 01/19/17             | 01/19/17   | 200.8             | 0.0010     | <0.0010       | mg/L        | SLM            |

Client ID: RSTS 8  
ACT Lab No.: BZ00338

Sample Type: Surface Water  
Sample Time: 01/10/17 07:16


| <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             | 01/19/17             | 01/19/17   | 200.8             | 0.0010     | <0.0010       | mg/L        | SLM            |

Client ID: RSTS 9  
ACT Lab No.: BZ00339

Sample Type: Surface Water  
Sample Time: 01/10/17 07:20

| <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             | 01/19/17             | 01/19/17   | 200.8             | 0.0010     | <0.0010       | mg/L        | SLM            |


Reviewed by:

  
Frederick A. Amalfi, Ph.D.  
Laboratory Director

## Sample Recordkeeping Form

### For initial lead drinking water samples

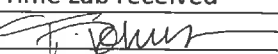
To be completed by the sample collector

|   |  |
|---|--|
| Name of School District   | Riverside Elementary District  |
| Name of School  | Riverside Traditional School   |
| Name (or number) of Building  | 600  |
| Type of Fixture (tap, drinking fountain etc..)                                    | tap  |
| Location of Fixture (example, room number)  | kitchen sink   |
| Sample Identification Number (ensure this number is also on the sample container) | RSTS 1   |
| Date of Collection  | 1/10/17  |
| Time of Collection  | 6:47am   |
| Name of Sample Collector  | David Burchard   |
| Signature Sample Collector  |  |

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

|       |          |
|-------|----------|
| Notes | BZ-00331 |
|-------|----------|


One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

| For Lab use only  |                     |
|---|---------------------|
| Date and Time Lab received  |                     |
| Signature  | JAN 12 2017 @ 14:26 |

15°C  
no Ice

# **Sample Recordkeeping Form** **For initial lead drinking water samples**

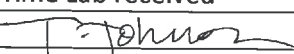
To be completed by the sample collector

|   |  |
|---|--|
| Name of School District   | Riverside Elementary District  |
| Name of School  | Riverside Traditional School   |
| Name (or number) of Building  | 400  |
| Type of Fixture (tap, drinking fountain etc..)                                    | Drinking Fountain  |
| Location of Fixture (example, room number)  | South side   |
| Sample Identification Number (ensure this number is also on the sample container) | RSTS2  |
| Date of Collection  | 1/10/17  |
| Time of Collection  | 6:51 am  |
| Name of Sample Collector  | David Burchard   |
| Signature Sample Collector  |  |

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

|       |                 |
|-------|-----------------|
| Notes | <b>BZ-00332</b> |
|-------|-----------------|


One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

| For Lab use only  |                     |
|---|---------------------|
| Date and Time Lab received  |                     |
| Signature  | JAN 12 2017 @ 14:26 |

15°C  
No Ice

# **Sample Recordkeeping Form** **For initial lead drinking water samples**

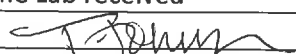
To be completed by the sample collector

|   |  |
|---|--|
| Name of School District   | Riverside Elementary District  |
| Name of School  | Riverside Traditional School   |
| Name (or number) of Building  | 500  |
| Type of Fixture (tap, drinking fountain etc..)                                    | Drinking Fountain  |
| Location of Fixture (example, room number)  | room 513 Pre school Sink   |
| Sample Identification Number (ensure this number is also on the sample container) | RSTS 4.5   |
| Date of Collection  | 1/10/17  |
| Time of Collection  | 6:54 am  |
| Name of Sample Collector  | David Burchard   |
| Signature Sample Collector  |  |

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 ☒

|       |                 |
|-------|-----------------|
| Notes | <b>BZ-00333</b> |
|-------|-----------------|


One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

| For Lab use only  |                   |
|---|-------------------|
| Date and Time Lab received  |                   |
| Signature  | JAN 12 2017 14:26 |

16°C  
No Ice

# **Sample Recordkeeping Form** **For initial lead drinking water samples**

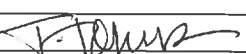
To be completed by the sample collector

|   |  |
|---|--|
| Name of School District   | Riverside Elementary District  |
| Name of School  | Riverside Traditional School   |
| Name (or number) of Building  | 500  |
| Type of Fixture (tap, drinking fountain etc..)                                    | Drinking Fountain  |
| Location of Fixture (example, room number)  | office hall  |
| Sample Identification Number (ensure this number is also on the sample container) | RSTS 4   |
| Date of Collection  | 1/10/17  |
| Time of Collection  | 6:59 am  |
| Name of Sample Collector  | David Burchard   |
| Signature Sample Collector  |  |

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

|       |                 |
|-------|-----------------|
| Notes | <b>BZ-00334</b> |
|-------|-----------------|


One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

| For Lab use only  |                             |
|---|-----------------------------|
| Date and Time Lab received  |                             |
| Signature <b>JAN 1 2 2017</b>  | <b>JAN 1 2 2017</b> @ 14:26 |

16°C  
No Ice

# **Sample Recordkeeping Form** **For initial lead drinking water samples**

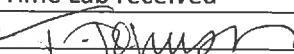
To be completed by the sample collector

|   |  |
|---|--|
| Name of School District   | Riverside Elementary District  |
| Name of School  | Riverside Traditional School   |
| Name (or number) of Building  | 100  |
| Type of Fixture (tap, drinking fountain etc..)                                    | Drinking Fountain  |
| Location of Fixture (example, room number)  | Hall near rest room  |
| Sample Identification Number (ensure this number is also on the sample container) | RSTSS  |
| Date of Collection  | 1/10/17  |
| Time of Collection  | 7:05 am  |
| Name of Sample Collector  | David Burchard   |
| Signature Sample Collector  |  |

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

|       |                 |
|-------|-----------------|
| Notes | <b>BZ-00335</b> |
|       |                 |

One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.


| For Lab use only  |                     |
|---|---------------------|
| Date and Time Lab received  |                     |
| Signature  | JAN 12 2017 @ 14:26 |


15L  
No IQ

## Sample Recordkeeping Form

### For initial lead drinking water samples

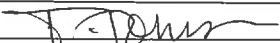
To be completed by the sample collector

|   |  |
|---|--|
| Name of School District   | Riverside Elementary District  |
| Name of School  | Riverside Traditional School   |
| Name (or number) of Building  | 100  |
| Type of Fixture (tap, drinking fountain etc..)                                    | Drinking Fountain  |
| Location of Fixture (example, room number)  | near restrooms 129/130   |
| Sample Identification Number (ensure this number is also on the sample container) | RSTS 6   |
| Date of Collection  | 1/10/17  |
| Time of Collection  | 7:09 am  |
| Name of Sample Collector  | David Burchard   |
| Signature Sample Collector  |  |

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

|       |          |
|-------|----------|
| Notes | BZ-00336 |
|-------|----------|

One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.


| For Lab use only  |                     |
|---|---------------------|
| Date and Time Lab received  |                     |
| Signature  | JAN 12 2017 @ 14:26 |


16°C  
No Ice



# **Sample Recordkeeping Form** **For initial lead drinking water samples**

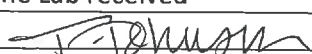
To be completed by the sample collector

|   |  |
|---|--|
| Name of School District   | Riverside Elementary District  |
| Name of School  | Riverside Traditional School   |
| Name (or number) of Building  | 200  |
| Type of Fixture (tap, drinking fountain etc..)                                    | Drinking Fountain  |
| Location of Fixture (example, room number)  | East side near 213   |
| Sample Identification Number (ensure this number is also on the sample container) | RSTS 7   |
| Date of Collection  | 1/10/17  |
| Time of Collection  | 7:12 am  |
| Name of Sample Collector  | David Burchard   |
| Signature Sample Collector  |  |

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

|       |                 |
|-------|-----------------|
| Notes | <b>BZ-00337</b> |
|       |                 |

One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.


| For Lab use only  |                     |
|---|---------------------|
| Date and Time Lab received  |                     |
| Signature  | JAN 12 2017 @ 14:26 |

15°C  
 No Ice

## Sample Recordkeeping Form

### For initial lead drinking water samples

To be completed by the sample collector


|   |  |
|---|--|
| Name of School District   | Riverside Elementary District  |
| Name of School  | Riverside Traditional School   |
| Name (or number) of Building  | 300  |
| Type of Fixture (tap, drinking fountain etc..)                                    | Drinking fountain  |
| Location of Fixture (example, room number)  | South side near room 308   |
| Sample Identification Number (ensure this number is also on the sample container) | RSTS 8   |
| Date of Collection  | 1/10/17  |
| Time of Collection  | 7:16 am  |
| Name of Sample Collector  | David Burchard   |
| Signature Sample Collector  |  |

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



|       |          |
|-------|----------|
| Notes | BZ-00338 |
|-------|----------|

One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

| For Lab use only  |                       |
|---|-----------------------|
| Date and Time Lab received  |                       |
| Signature  | JAN 12 2017 (a) 14:26 |

16°C  
No Ice

# **Sample Recordkeeping Form** **For initial lead drinking water samples**

To be completed by the sample collector

|   |                               |
|---|-------------------------------|
| Name of School District   | Riverside Elementary District |
| Name of School  | Riverside Traditional School  |
| Name (or number) of Building  | 800                           |
| Type of Fixture (tap, drinking fountain etc..)                                    | Drinking fountain             |
| Location of Fixture (example, room number)  | near Gym                      |
| Sample Identification Number (ensure this number is also on the sample container) | RSTS 9                        |
| Date of Collection  | 1/10/17                       |
| Time of Collection  | 7:20 am                       |
| Name of Sample Collector  | David Burchard                |
| Signature Sample Collector  | <i>[Signature]</i>            |

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 ☒

|       |                 |
|-------|-----------------|
| Notes | <b>BZ-00339</b> |
|-------|-----------------|

One Sample Recordkeeping form should be complete for each sample collected. Copies should be sent to the lab with the samples.

| For Lab use only             |                     |
|------------------------------|---------------------|
| Date and Time Lab received   |                     |
| Signature <i>[Signature]</i> | JAN 12 2017 @ 14:26 |

16°C  
No Ice