



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

Date Submitted: 04/14/17
Date Reported: 05/04/17

Attn: David Burchard

Project: Estrella Mountain Elementary

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: 100.01 ACT Lab No.: BZ05104		Sample Type: Drinking Water Sample Time: 04/10/17 03:15					
Lead	05/01/17	05/01/17	200.8	1.0	<1.00	ug/L	SLM
Client ID: 200.01 ACT Lab No.: BZ05105		Sample Type: Drinking Water Sample Time: 04/10/17 03:19					
Lead	05/01/17	05/01/17	200.8	1.0	<1.00	ug/L	SLM
Client ID: 200.02 ACT Lab No.: BZ05106		Sample Type: Drinking Water Sample Time: 04/10/17 03:24					
Lead	05/01/17	05/01/17	200.8	1.0	<1.00	ug/L	SLM
Client ID: 300.01 ACT Lab No.: BZ05107		Sample Type: Drinking Water Sample Time: 04/10/17 03:29					
Lead	05/01/17	05/01/17	200.8	1.0	<1.00	ug/L	SLM

RESULTS

Client ID: 300.02
ACT Lab No.: BZ05108

Sample Type: Drinking Water
Sample Time: 04/10/17 03:33

<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	05/01/17	05/01/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: 400.01
ACT Lab No.: BZ05109

Sample Type: Drinking Water
Sample Time: 04/10/17 03:37

<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	05/01/17	05/01/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: 500.01
ACT Lab No.: BZ05110

Sample Type: Drinking Water
Sample Time: 04/10/17 03:41

<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	05/01/17	05/01/17	200.8	1.0	<1.00	ug/L	SLM

Reviewed by: _____



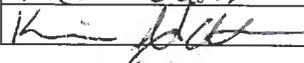
Frederick A. Amalfi, Ph.D.
Laboratory Director

Collection Log

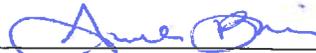
for experienced sample collectors

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.

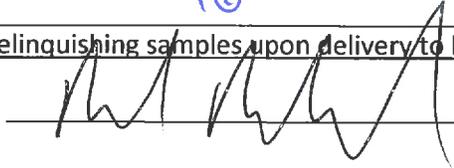
- Check this box to confirm that **water had not been used at this tap or other taps in the area for 6 hours** and **no flushing** was done prior to sampling

Name of School District	Liberty Elementary District
School Name	Estrella Mountain Elementary School
Building (name/number)	100 (Admin)
Type of Fixture (tap, drinking fountain etc.)	Tap
Location of Fixture (example, room number)	Nurse/Health Office sink
Sample Identification Number (Write this number on the sample container and on this sheet)	100.01
Date of Collection	4/10/2017
Time of Collection	3:15 AM
Printed Name of Sample Collector	Keara Gades
Signature Sample Collector	

Notes Sample collector:	BZ-05104
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For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	
<div style="display: flex; justify-content: space-between;"> 10:00 @ 24°C APR 14 2017 </div> 	

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	Liberty Elementary District
School Name	Estrella Mountain Elementary School
Building (name/number)	200
Type of Fixture (tap, drinking fountain etc.)	Tap
Location of Fixture (example, room number)	Girls Rest Room
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	200.02
Date of Collection	4/10/2017
Time of Collection	3:24 AM
Printed Name of Sample Collector	Kevin Grafus
Signature Sample Collector	

Notes Sample collector:	BZ-05106
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For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

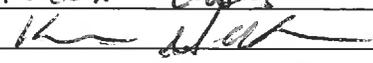
Relinquished date and signature _____

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

Collection Log
for experienced sample collectors

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- 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	Liberty Elementary District
School Name	Estrella Mountain Elementary School
Building (name/number)	300
Type of Fixture (tap, drinking fountain etc.)	Tap
Location of Fixture (example, room number)	306
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	300.01
Date of Collection	4/10/2017
Time of Collection	3:29 AM
Printed Name of Sample Collector	Kevin Lopez
Signature Sample Collector	

Notes Sample collector:	BZ-05107
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For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

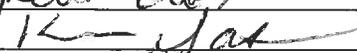
These samples were collected for lead screening purposes only and cannot be used for compliance.

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	Liberty Elementary District
School Name	Estrella Mountain Elementary School
Building (name/number)	300
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	North West
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	300.02
Date of Collection	8/10/2017
Time of Collection	3:33 AM
Printed Name of Sample Collector	Kennedy
Signature Sample Collector	

Notes Sample collector:	BZ-05108
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For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

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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	Liberty Elementary District
School Name	Estrella Mountain Elementary School
Building (name/number)	400
Type of Fixture (tap, drinking fountain etc.)	Tap
Location of Fixture (example, room number)	401
Sample Identification Number (Write this number on the sample container and on this sheet)	400.01
Date of Collection	4/10/2017
Time of Collection	3:37 AM
Printed Name of Sample Collector	Kevin Baker
Signature Sample Collector	

Notes Sample collector:	BZ-05109
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For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	

For relinquishing samples upon delivery to labs only

Relinquished date and signature _____

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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	Liberty Elementary District
School Name	Estrella Mountain Elementary School
Building (name/number)	500
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	South/East
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	500.01
Date of Collection	4/10/2017
Time of Collection	8:41 AM
Printed Name of Sample Collector	Heaven Gaffney
Signature Sample Collector	

Notes Sample collector:	BZ-05110
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For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	

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.