



AQUATIC CONSULTING & TESTING, INC.

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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: 03/17/17

Date Reported: 04/07/17

Project: Dreaming Summit Elem.

RESULTS

Client ID: DSEA
ACT Lab No.: BZ03539

Sample Type: Drinking Water
Sample Time: 03/13/17 05:15

<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	03/29/17	03/29/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: DSEB
ACT Lab No.: BZ03540

Sample Type: Drinking Water
Sample Time: 03/13/17 05:20

<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	03/29/17	03/29/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: DSEC
ACT Lab No.: BZ03541

Sample Type: Drinking Water
Sample Time: 03/13/17 05:26

<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	03/29/17	03/29/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: DSED
ACT Lab No.: BZ03542

Sample Type: Drinking Water
Sample Time: 03/13/17 05:33

<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	03/29/17	03/29/17	200.8	1.0	<1.00	ug/L	SLM

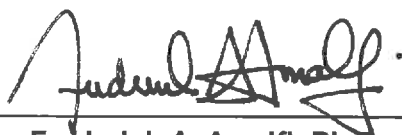
RESULTS

Client ID: DSEE
ACT Lab No.: BZ03543

Sample Type: Drinking Water
Sample Time: 03/13/17 05:38

<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	03/29/17	03/29/17	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	Litchfield Elementary District
School Name	Dreaming Summit Elementary
Building (name/number)	1004 Gym
Type of Fixture (tap, drinking fountain etc.)	Drinking fountain
Location of Fixture (example, room number)	By Door to Cafeteria
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	05EA
Date of Collection	03/13/17
Time of Collection	0515
Printed Name of Sample Collector	Thomas M Rooney
Signature Sample Collector	<i>Thomas M Rooney</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	
BZ-03539	

For relinquishing samples upon delivery to labs only

Relinquished date and signature

T. Johnson ACT

MAR 17 2017

15:30

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

24°C

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.

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Name of School District	Litchfield Elementary District
School Name	Dreaming Summit Elementary
Building (name/number)	1002 200 pod
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Rm 203
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	DSE B
Date of Collection	8/3/17
Time of Collection	0520
Printed Name of Sample Collector	Thomas M Fooney
Signature Sample Collector	Thomas M Fooney

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	
BZ-03540	

For relinquishing samples upon delivery to labs only

Relinquished date and signature

MAR 17 2017

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

15:30
24°C

Collection Log
for experienced sample collectors

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Name of School District	Litchfield Elementary District
School Name	Dreaming Summit Elementary
Building (name/number)	1001 Media
Type of Fixture (tap, drinking fountain etc.)	drinking fountain
Location of Fixture (example, room number)	By Restrooms
Sample Identification Number (Write this number on the sample container and on this sheet)	DSEC
Date of Collection	03/13/17
Time of Collection	0526
Printed Name of Sample Collector	Thomas M. Rooney
Signature Sample Collector	(Thomas M. Rooney)

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	
BZ-03541	

For relinquishing samples upon delivery to labs only

Relinquished date and signature

MAR 17 2017

15:30
24°C

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Collection Log
for experienced sample collectors

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Name of School District	Litchfield Elementary District
School Name	Dreaming Summit Elementary
Building (name/number)	1003 700 Pod
Type of Fixture (tap, drinking fountain etc.)	Drinking fountain
Location of Fixture (example, room number)	Rm 702
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	DSED
Date of Collection	03/13/17
Time of Collection	0533
Printed Name of Sample Collector	Thomas M Rooney
Signature Sample Collector	Thomas M Rooney

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	
BZ-03542	

For relinquishing samples upon delivery to labs only

Relinquished date and signature

MAR 17 2017

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15:30
24°C

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	Litchfield Elementary District
School Name	Dreaming Summit Elementary
Building (name/number)	1005 900 POD
Type of Fixture (tap, drinking fountain etc.)	Drinking fountain
Location of Fixture (example, room number)	Rm 902
Sample Identification Number (Write this number on the sample container and on this sheet)	DSEE
Date of Collection	03/13/17
Time of Collection	05:38 per bottle AB 3/13/17
Printed Name of Sample Collector	Thomas M Rooney
Signature Sample Collector	<i>Thomas M Rooney</i>

Notes Sample collector:

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes:	
BZ-03543	

For relinquishing samples upon delivery to labs only

Relinquished date and signature

MAR 17 2017

15:30
2400

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