



AQUATIC CONSULTING & TESTING, INC.

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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: 04/26/17

Date Reported: 05/04/17

Project: Desert Mirage Elementary

RESULTS

Client ID: DM-A
ACT Lab No.: BZ05533

Sample Type: Drinking Water
Sample Time: 04/20/17 05:05

<u>Parameter</u>	<u>Analysis Date</u>		<u>Method No.</u>	<u>MDL</u>	<u>Result</u>	<u>Unit</u>	<u>Analyst</u>
Lead	<u>Start</u>	<u>End</u>					
	05/02/17	05/02/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: DMB
ACT Lab No.: BZ05534

Sample Type: Drinking Water
Sample Time: 04/20/17 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>
Lead	<u>Start</u>	<u>End</u>					
	05/02/17	05/02/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: DMC
ACT Lab No.: BZ05535

Sample Type: Drinking Water
Sample Time: 04/20/17 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>
Lead	<u>Start</u>	<u>End</u>					
	05/02/17	05/02/17	200.8	1.0	<1.00	ug/L	SLM

Client ID: DMD
ACT Lab No.: BZ05536

Sample Type: Drinking Water
Sample Time: 04/20/17 05:28

<u>Parameter</u>	<u>Analysis Date</u>		<u>Method No.</u>	<u>MDL</u>	<u>Result</u>	<u>Unit</u>	<u>Analyst</u>
Lead	<u>Start</u>	<u>End</u>					
	05/02/17	05/02/17	200.8	1.0	<1.00	ug/L	SLM

RESULTS

Client ID: DME
ACT Lab No.: BZ05537

Sample Type: Drinking Water
Sample Time: 04/20/17 05:11

<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

Client ID: DML
ACT Lab No.: BZ05538

Sample Type: Drinking Water
Sample Time: 04/20/17 05:13

<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

Client ID: DMF
ACT Lab No.: BZ05539

Sample Type: Drinking Water
Sample Time: 04/20/17 05:25

<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

Client ID: DMI
ACT Lab No.: BZ05540

Sample Type: Drinking Water
Sample Time: 04/20/17 05:21

<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

Client ID: DMGYM
ACT Lab No.: BZ05541

Sample Type: Drinking Water
Sample Time: 04/20/17 05:03

<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

Client ID: DMK
ACT Lab No.: BZ05542

Sample Type: Drinking Water
Sample Time: 04/20/17 05:08

<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

RESULTS

Client ID: DMCAFE
ACT Lab No.: BZ05543

Sample Type: Drinking Water
Sample Time: 04/20/17 05:18

<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

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	Pendergast Elementary District
School Name	Desert Mirage Elementary
Building (name/number)	1001 A-1000 Admission
Type of Fixture (tap, drinking fountain etc.)	Primary Fountain
Location of Fixture (example, room number)	Outside
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	DM-A
Date of Collection	4-20-2017
Time of Collection	505
Printed Name of Sample Collector	Rachel J. Szabo
Signature Sample Collector	<i>Rachel J. Szabo</i>

Notes Sample collector:

BZ-05533

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	
Signature	
Notes: <div>APR 26 2017 8:23 <i>AB @ 20C</i></div>	

For relinquishing samples upon delivery to labs only

Relinquished date and signature

[Signature]

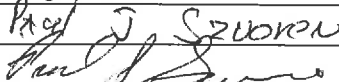
These samples were collected for lead screening purposes only and cannot be used for compliance.

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	Pendergast Elementary District
School Name	Desert Mirage Elementary
Building (name/number)	1002 A-2000 B-Building
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Outside
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	DM B
Date of Collection	4-20-2017
Time of Collection	5:33
Printed Name of Sample Collector	Pat J. SZUORIN
Signature Sample Collector	

Notes Sample collector:

BZ-05534

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	APR 26 2017 @ 08:23 209
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	Pendergast Elementary District
School Name	Desert Mirage Elementary
Building (name/number)	1003 A-3000 C-Building
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Outside
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	DMC
Date of Collection	4-20-2017
Time of Collection	5:15
Printed Name of Sample Collector	Paul J. Szoreu
Signature Sample Collector	<i>Paul J. Szoreu</i>

Notes Sample collector:

BZ-05535

For Lab use only			
Analyze this drinking water sample for lead			
Date and Time Lab received	APR 26 2017	08:23	20C
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	Pendergast Elementary District
School Name	Desert Mirage Elementary
Building (name/number)	1004 A-4000 D-Building
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Outside
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	DMD
Date of Collection	4-20-2017
Time of Collection	5:28
Printed Name of Sample Collector	Rachel J. Szoreau
Signature Sample Collector	Rachel J. Szoreau

Notes Sample collector:

BZ-05536

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	APR 26 2017 @ 08:23 20°C
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	Pendergast Elementary District
School Name	Desert Mirage Elementary
Building (name/number)	1005 A-5000 E-Building
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	outside
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	DME
Date of Collection	4-20-17
Time of Collection	5:11
Printed Name of Sample Collector	Patricia Szoreu
Signature Sample Collector	<i>Patricia Szoreu</i>

Notes Sample collector:

BZ-05537

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	APR 26 2017 @ 08:23 200
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	Pendergast Elementary District
School Name	Desert Mirage Elementary
Building (name/number)	1006 A-6000 <i>Library</i>
Type of Fixture (tap, drinking fountain etc.)	<i>Medicine</i>
Location of Fixture (example, room number)	<i>Drinking Fountain</i>
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	<i>Outside</i>
Date of Collection	<i>DMH</i>
Time of Collection	<i>4-20-2017</i>
Printed Name of Sample Collector	<i>5:13</i>
Signature Sample Collector	<i>Paul J. Szum</i>

Notes Sample collector:

BZ-05538

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	<i>APR 26 2017 @ 08:23</i> <i>20°C</i>
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	Pendergast Elementary District
School Name	Desert Mirage Elementary
Building (name/number)	1007 A-7000 F-Building
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Outside
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	DMF
Date of Collection	4-20-17
Time of Collection	5:25
Printed Name of Sample Collector	Rachel J. Sworen
Signature Sample Collector	<i>Rachel J. Sworen</i>

Notes Sample collector:

BZ-05539

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	APR 26 2017 @ 08:23 20°C
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	Pendergast Elementary District
School Name	Desert Mirage Elementary
Building (name/number)	1008 E A-8000 I Building
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Outside
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	DMI
Date of Collection	4-20-2017
Time of Collection	5:21
Printed Name of Sample Collector	Paul J. Szymer
Signature Sample Collector	<i>Paul J. Szymer</i>

Notes Sample collector:

BZ-05540

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	APR 26 2017 @ 08:23 20°C
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	Pendauget School Dist #92
School Name	Desert Mirage Elementary
Building (name/number)	1013 GYM
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	lobby
Sample Identification Number (ensure this number is also on the sample container)	DM GYM
Date of Collection	4-20-2017
Time of Collection	5:03
Printed Name of Sample Collector	Paul Severan
Signature Sample Collector	<i>Paul Severan</i>

Notes Sample collector:

BZ-05541

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	APR 26 2017 @ 08:23 20°C
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	Pendergast Elementary District
School Name	Desert Mirage Elementary
Building (name/number)	1012 A12000 K Building
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	Outside
Sample Identification Number (<u>Write this number on the sample container and on this sheet</u>)	DMK
Date of Collection	4-20-2017
Time of Collection	5:08
Printed Name of Sample Collector	Pavel Szucman
Signature Sample Collector	<i>Pavel Szucman</i>

Notes Sample collector:

BZ-05542

For Lab use only		
Analyze this drinking water sample for lead		
Date and Time Lab received	APR 26 2017 @ 08:23	20C
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	Pendergast School Dist.
School Name	Desert Mirage Elem. Sch.
Building (name/number)	1009 A 9000 Cafeteria
Type of Fixture (tap, drinking fountain etc.)	Drinking Fountain
Location of Fixture (example, room number)	
Sample Identification Number (ensure this number is also on the sample container)	DMCAFE
Date of Collection	4-20-17
Time of Collection	05:18
Printed Name of Sample Collector	Paul Sevoren
Signature Sample Collector	

Notes Sample collector:
BZ-05543

For Lab use only	
Analyze this drinking water sample for lead	
Date and Time Lab received	APR 26 2017 @ 08:23 20°C
Signature	ACT
Notes:	No paper work submitted. * paper work filled out per bottle info - tny/ACT

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.