

CENTRAL ONTARIO ANALYTICAL LABORATORY INC.

4260 Burnside Line, R.R. #4
Orillia, ON L3V 6H4
Tel: (705) 326-8285 Fax: (705) 326-9316
www.coalab.ca

Chain of Custody

Primary Report for Nitrate and Nitrite Analysis of Water

FOR LAB USE ONLY	Date/Time/Temp. (°C) Received: Initials of Receiver:
	RECEIVED AB 86 APR 23 2015 9:00

Date Sampled: 2015-04-23

Township/Town Gravenhurst	
Systems Health Unit SMDHU	
Total # of pages sent	
# of samples sent this page	
# of samples r'cvd this page	2

Collected By: (Please Print) GERALD ENCHIN
Signature: [Signature]
Name of Facility: Camp Winston

Report To: **Camp Winston ATTN: Gerald Enchin**
Address: 1147 River Lane R.R. #2 Kilworthy, ON P0E 1G0 Mailing: Camp Winston c/o Pine Bay Foundation 55 Eglin
Telephone: 705 689-9096 Ext: Fax: Scan & Email
Email Address: mail@campwinston.com; gerald@campwinston.com

Drinking Water System (DWS) #
(As Assigned By MOE/MOHLTC) **Please See Below**
Submitted By: (Please Print)
Signature:

"Live Person" After Hours Contact Name and Tel. No: Gerald Enchin cell: 416-453-4504

Comments/Conditions:

Time Sampled (Indicate AM/PM with 12-hour clock or use 24-hour clock)	Sample Identifier	Sampling Location Describe the location AND indicate an appropriate letter classification. (D) Distribution - Consumed (R) Raw - Before Treatment & Not Consumed (E) Point of Entry - Consumed (RWC) Raw Water - Consumed	Requires Notification as per SDWA 2002: (Please check one)				Temp. of Sample (Indicate °F or °C)	Treatment Information - Indicate Type/Chlorine Levels				Please Check Parameter Required			Laboratory Number (SFA-)	Nitrate as N (mg/L)	Reportable	Nitrite as N (mg/L)	Reportable	Nitrate + Nitrite as N (mg/L)	Reportable
			170/03	318/08; 319/08	N/A	U.V.		Other	Operational/Field Chlorine		Nitrate	Nitrite	Nitrate + Nitrite								
									Total mg/L	Free mg/L											
THIS AREA FOR LABORATORY USE ONLY																					
WS #260027924																					
		SYSTEM CLOSED FOR WINTER																			
		Jean Lodge #260092690																			
		AM 7:35 AM 1														SFA 121	<0.006	<0.003		<0.006	
		New Building #260092716																			
		AM 7:42 AM 2														SFA 122	<0.006	<0.003		<0.006	

All samples will be considered DISTRIBUTION samples unless otherwise indicated. Sampling Precautions: Transport water samples under refrigeration to laboratory. The samples require analysis ideally within 30 hours and must be analyzed within 7 days of collection. Analysis performed by qualified analysts. Results relate only to the aliquot submitted. COAL is accredited by SCC and licensed by MOE in these specific inorganic parameters. Samples have been analyzed as received. COAL accepts no responsibility for parameters selected, misidentification of samples or incorrect quantity, this is the responsibility of the submitting agency. For collection and handling procedures visit www.coalab.ca/watersamples.html. If holding time is required the laboratory will add the preservative. N/R = Not Received N/A = Not Applicable

Pre-Fax Check By: AB
SCANNED & EMAILED

FOR LABORATORY USE ONLY / LABORATORY COMMENTS

Analysis Date & Time: Apr 23/15 Analyzed By: SGS Audited By: [Signature] Nitrate/Nitrate + Nitrite Methodology (COAL N): SFA mg/L, Reportable Limit- 10.0 mg/L
Nitrite Methodology (COAL N): SFA mg/L, Reportable Limit- 1.0 mg/L

Lab No: _____ Parameter: _____ Adverse Reported to Submitting Agency @ _____ H.U. @ _____ SAC @ _____ AWQI # _____ By: _____ Date: _____

Transcribed By: _____ Transcription Verified By: _____ Report Authorized By: _____ Email/Mail Customer: _____ Email H.U.: _____ MOE/MOHLTC Upload: _____ Invoiced: _____

Form cannot be altered without approval of COAL. The Safe Drinking Water Act (SDWA 2002), O. Reg 170/03 and O. Reg 318/08; 319/08 (please see www.ene.gov.on.ca for more information), requires that notification of exceedances must be reported to MOE/MOH/Waterworks for O. Reg 170/03 and to MOHLTC/MOH/Waterworks for O. Reg 318/08; 319/08. Health Unit telephone and fax numbers are indicated on adverse paperwork. Failure to do so is an offence under the Act. It is necessary that the above information is complete. A "live person" must be available in the event that notification is required. THIS FORM MUST BE COMPLETELY FILLED OUT OR THE LABORATORY MAY REFUSE RECEIPT OF THE SAMPLE(S) OR MAY APPLY AN ADMINISTRATIVE CHARGE FOR COMPLETION OF INFORMATION. Results will be sent by fax to one number or scan & email or postal mail and then transcribed and emailed to an unlimited number of addressee(s) inclusive in the standard price. After hours phone number for adverse resample emergencies 705-323-2828 (Surcharge for after hours samples)