

Your P.O. #: 1491
Your C.O.C. #: 002430

Attention:Mike Squire

City of Parksville
Engineering and Operations Dpt
PO Box 1390
Parksville, BC
Canada V9P 2H3

Report Date: 2014/11/10
Report #: R1681173
Version: 1 - Final

CERTIFICATE OF ANALYSIS

MAXXAM JOB #: B4A0227

Received: 2014/11/04, 09:00

Sample Matrix: DRINKING WATER
Samples Received: 4

Analyses	Quantity	Date Extracted	Date Analyzed	Laboratory Method	Analytical Method
VOCs, VH, F1, LH in Water by HS GC/MS	4	2014/11/07	2014/11/08	BBY8SOP-00009	EPA 8260c R3 m

* RPDs calculated using raw data. The rounding of final results may result in the apparent difference.

Encryption Key

Please direct all questions regarding this Certificate of Analysis to your Project Manager.

Shanaz Akbar, Project Manager

Email: SAKbar@maxxam.ca

Phone# (604) 734 7276

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This report has been generated and distributed using a secure automated process.

Maxxam has procedures in place to guard against improper use of the electronic signature and have the required "signatories", as per section 5.10.2 of ISO/IEC 17025:2005(E), signing the reports. For Service Group specific validation please refer to the Validation Signature Page.

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Sampler Initials: SC

TRIHALOMETHANES (THM) IN WATER

Maxxam ID		LB0555	LB0556	LB0557	LB0558		
Sampling Date		2014/11/03 01:00	2014/11/03 01:40	2014/11/03 01:30	2014/11/03 02:00		
COC Number		002430	002430	002430	002430		
	Units	RESERVOIR #5	851 TEMPLE	COMMUNITY PARK	DAFFODIL	RDL	QC Batch
Volatiles							
Chloroform	ug/L	16	<1.0	1.7	<1.0	1.0	7711478
Chlorodibromomethane	ug/L	5.0	2.8	3.7	2.6	1.0	7711478
Bromodichloromethane	ug/L	9.7	1.6	2.4	1.2	1.0	7711478
Bromoform	ug/L	1.1	2.0	2.2	1.9	1.0	7711478
Surrogate Recovery (%)							
1,4-Difluorobenzene (sur.)	%	102	101	99	101		7711478
4-Bromofluorobenzene (sur.)	%	107	102	102	101		7711478
D4-1,2-Dichloroethane (sur.)	%	93	114	116	116		7711478
RDL = Reportable Detection Limit							

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GENERAL COMMENTS

Each temperature is the average of up to three cooler temperatures taken at receipt

Package 1	7.3°C
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Results relate only to the items tested.

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QUALITY ASSURANCE REPORT

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QC Batch	Parameter	Date	Matrix Spike		Spiked Blank		Method Blank	
			% Recovery	QC Limits	% Recovery	QC Limits	Value	Units
7711478	1,4-Difluorobenzene (sur.)	2014/11/08	101	70 - 130	100	70 - 130	129	%
7711478	4-Bromofluorobenzene (sur.)	2014/11/08	110	70 - 130	103	70 - 130	112	%
7711478	D4-1,2-Dichloroethane (sur.)	2014/11/08	116	70 - 130	116	70 - 130	100	%
7711478	Bromodichloromethane	2014/11/08	94	70 - 130	93	70 - 130	<1.0	ug/L
7711478	Bromoform	2014/11/08	94	70 - 130	84	70 - 130	<1.0	ug/L
7711478	Chlorodibromomethane	2014/11/08	96	70 - 130	92	70 - 130	<1.0	ug/L
7711478	Chloroform	2014/11/08	95	70 - 130	94	70 - 130	<1.0	ug/L

Matrix Spike: A sample to which a known amount of the analyte of interest has been added. Used to evaluate sample matrix interference.

Spiked Blank: A blank matrix sample to which a known amount of the analyte, usually from a second source, has been added. Used to evaluate method accuracy.

Method Blank: A blank matrix containing all reagents used in the analytical procedure. Used to identify laboratory contamination.

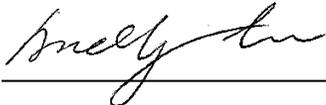
Surrogate: A pure or isotopically labeled compound whose behavior mirrors the analytes of interest. Used to evaluate extraction efficiency.

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VALIDATION SIGNATURE PAGE

The analytical data and all QC contained in this report were reviewed and validated by the following individual(s).



Andy Lu, Data Validation Coordinator

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DRINKING WATER SUBMISSION CHAIN OF CUSTODY RECORD

Maxxam Job #: B4A0227

COC #: 002430

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Invoice To: Require Report? Yes [checked] No []

Report To:

Company Name: City of Parksville
Contact Name: Scott Churko
Address: Po Box 1390 Parksville BC PC: V9P 2H3
Phone / Fax#: Ph: 250-248-5412 Fax: 250-248-6140
E-mail: schurko@parksville.ca

Company Name:
Contact Name:
Address: Same
PC:
Ph:
Fax:

PO #: 1491
Quotation #: B14-262-5T
Project #:
Proj. Name:
Location:
Sampled by: Scott Churko

SERVICE REQUESTED:

- [checked] Regular Turn Around Time (TAT) (5 days for most tests)
[] RUSH (Please contact the lab)
[] 1 Day [] 2 Day [] 3 Day

Date Required:

SPECIAL INSTRUCTIONS:

Return Cooler [] Ship Sample Bottles (please specify) []

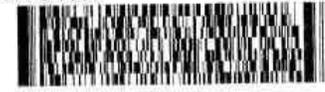
Drinking Water Package (includes total metals, total coliform & E. coli)
Total Coliform and E. coli
Number of Containers

Table with columns: Sample Identification, Lab Identification, Water Type, Date/Time Sampled, Total Coliform and E. coli, Number of Containers. Rows include Reservoir #5, 851 Temple, Community Park, Daffodil.

Are the samples from a drinking water source? YES [checked] NO []
Does the water source supply multiple households? YES [checked] NO []
Are individuals drinking this water? YES [checked] NO []

Please check the region where the samples were collected from:
MHO = Medical Health Officer; DWO = Drinking Water Officer

- [] FRASER HEALTH AUTHORITY
[checked] VANCOUVER ISLAND HEALTH AUTHORITY
[] INTERIOR HEALTH AUTHORITY
[] NORTHERN HEALTH AUTHORITY
[] VANCOUVER COASTAL HEALTH AUTHORITY - check any areas below if applicable



B4A0227

Coast Garibaldi MHO: 604-885-8708 and select one of the DWO below

- [] Powell River: 604-485-3335 [] Sechelt Area: 604-885-8711
[] Sea to Sky (Howe Sound): 604-815-6841 or 604-892-2293 ext. 273

North Shore MHO: 604-983-6751 / 604-983-6813 and select one of the DWO below

- [] Bowen Island, Lions Bay, Bella Bella: 604-904-6200 ext. 1265
[] Mount Seymour, Indian Arm, Bella Coola, Anahim Lake: 604-904-6457
[] Grouse Mountain and Municipal Systems: 604-904-6200 ext. 1264

Table for Chain of Custody with columns: Relinquished By, Date, Time, Received by, Date, Time, Temperature on Receipt, Custody Seal, Yes, No, N/A.

IT IS THE RESPONSIBILITY OF THE RELINQUISHER TO ENSURE THE ACCURACY OF THE CHAIN OF CUSTODY RECORDS. AN INCOMPLETE CHAIN OF CUSTODY MAY RESULT IN ANALYTICAL TAT DELAYS.