

**Professional
Laboratory
Services**

13035 SW Pacific Hwy
Tigard, OR 97223
Tel.: (503) 639-9311 Fax: (503) 684-1588

ANALYSIS REPORT

ORELAP Accredited Lab#: OR-100013

Reported: 04/06/2017
Received: 03/21/2017
Sampled By:
Work Order: 7080002

C Tigard-Tualatin SD
L Attn: Phil Wentz
I 6960 SW Sandburg St.
E Tigard OR, 97223
N Phone: (503) 431-4017
T

Project:
Project # : N/A
Sample Type :

Sampling Location: Durham

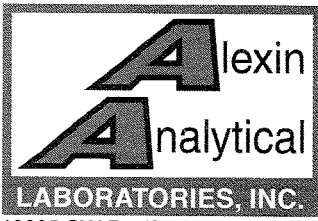
Lab Number

Lab Number	Code	Method	Result	Units	MRL	EPA MCL*	Analysis Date/ Time
7080002-01	Sample Name: RM 3 F Sampled: 3/21/17 5:45		Matrix: Water				
+Lead	1030	EPA 200.9	4.1	ppb	4.0	20 ppb	04/05/17 16:50
7080002-02	Sample Name: RM 3 F Flush Sampled: 3/21/17 5:45		Matrix: Water				
+Lead	1030	EPA 200.9	ND	ppb	4.0	20 ppb	04/05/17 16:50
7080002-03	Sample Name: RM 3 BB Sampled: 3/21/17 5:45		Matrix: Water				
+Lead	1030	EPA 200.9	ND	ppb	4.0	20 ppb	04/05/17 16:50
7080002-04	Sample Name: RM 3 BB Flush Sampled: 3/21/17 5:45		Matrix: Water				
+Lead	1030	EPA 200.9	ND	ppb	2.0	20 ppb	04/04/17 16:44
7080002-05	Sample Name: RM 20 F Sampled: 3/21/17 5:45		Matrix: Water				
+Lead	1030	EPA 200.9	8.2	ppb	4.0	20 ppb	04/04/17 16:44
7080002-06	Sample Name: RM 20 F Flush Sampled: 3/21/17 5:45		Matrix: Water				
+Lead	1030	EPA 200.9	5.3	ppb	2.0	20 ppb	04/04/17 16:44
7080002-07	Sample Name: RM 20 BB Sampled: 3/21/17 5:45		Matrix: Water				
+Lead	1030	EPA 200.9	7.6	ppb	4.0	20 ppb	04/05/17 16:50
7080002-08	Sample Name: RM 20 BB Flush Sampled: 3/21/17 6:00		Matrix: Water				
+Lead	1030	EPA 200.9	ND	ppb	4.0	20 ppb	04/05/17 16:50

ND = None detected at the MRL **MRL** = Minimum Reporting Limit **MCL** = Maximum Contamination Limit

†All procedures for this analysis are in accordance with NELAP standards.

* The EPA MCL for Lead in Public Drinking Water Systems is 15 ppb. For school, daycare, or non-residential building testing the EPA recommends outlets be taken out of service if the lead level exceeds 20 ppb; this is a maximum contamination level for lead in samples based on a 250 mL first-draw sample, exceedences require remediation or further sampling. This is not an acceptance level for health based exposure.



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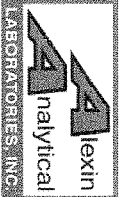
Sampling Location: Durham

Lab Number

Approved by: _____



Adriana Gonzalez-Gray
Laboratory Director



Professional Laboratory Services

Chain of Custody Record

Laboratory Job Number: 20200201-08

Page 1 of 1

13035 SW Pacific Hwy Tigard, OR 97223 ph: 503.639.9311 fax: 503.684.1588 email: mail@alexinlabs.com

Client Contact Information	Results Reporting Information	Invoicing Information
Company/Client Name: Tigard-Tualatin S.D.	Project Manager: Phil Wentz	Accounts Payable Contact: Lisa Cresap
Address: 6960 SW Sandburg	Mailing Address: -SAME-	Mailing Address: -SAME-
City/State/Zip: Tigard OR 97223	City/State/Zip:	City/State/Zip:
phone: 503-431-4017	phone:	phone:
fax or email: pwentz@ttsd.k12.or.us	fax or email: pwentz@ttsd.k12.or.us	fax or email: lcresap@ttsd.k12.or.us

SAMPLING INFORMATION

Sampling Location: Duckham P.O. #: _____ PW/SID #: _____

Sampled By: _____ Project Name: _____ Project #: _____ Permit #: _____

Send results to OR State Health Division? (Please circle) Yes No

Analysis Requested**

Lab ID	Sample Identification	Date Collected	Time Collected (Begin-End if comp)	Sample Matrix*	# of cont. rec'd	Analysis Requested**	Sample Specific Notes/Field Data for each WW sample, specify <u>Grab</u> / <u>Composite</u> for each DW sample, specify <u>Raw</u> / <u>Treated</u> , <u>Source / Distribution, Single / Combined</u> WHERE APPLICABLE
080002	RM 3 F	3/21/17	5:45	LEAD	1		SEE ATTACHED
02	RM 3 F Flush						
03	RM 3 BB						
04	RM 3 BB Flush						
05	RM 20 F						
06	RM 20 F Flush						
07	RM 20 BB						
08	" " Flush		6:00				

Relinquished By (print): _____ Company: _____ Date/Time: _____ Signature: _____

Received By: _____ Company: _____ Date/Time: _____ Signature: _____

Relinquished By (print): _____ Company: _____ Date/Time: _____ Signature: _____

Received By: _____ Company: _____ Date/Time: _____ Signature: _____

Temp. on receipt: _____ °C On ice? Y N

Containers intact? Y N ID: TRM-10-0003

* Drinking water (DW), effluent (EFF), ground water (GW), influent (INF), non-aqueous liquid (NAL), paint chips, raw water (RW), sludge, soil, solid, source water (SOURCE), spring, stormwater (SW), surface water, wastewater (WW), well water (WELL)

** Analyses for SOC, Radionuclide, Radon, and Asbestos are subcontracted out to other accredited laboratories.