

Water Quality Reports

2004

Finch

Bacti Analysis
Chemical Analysis
Annual Report
Summary Report and Resolution of Council
Performance Assesment
Annual Rate of Water Taking
Meter Calibrations
Adverse Water Reports
Chemical Aquisitions



TOWNSHIP OF NORTH STORMONT

Resolution

Moved By: Dennis R. Finch

Date: March 22, 2005

Seconded By: Dennis R. Finch

Resolution #: _____

That this Council, having deliberated 2004 Summary Water Reports for Crysler, Finch and Moose Creek with Ontario Clean Water Agency (Blair Henderson), hereby accepts said reports as presented.

CERTIFIED A TRUE COPY
Chris J. Schramm
Clerk and
Commissioner of Oaths
Township of North Stormont

Recorded Vote:

FOR

AGAINST

CARRIED

Dennis R. Finch
Mayor

DEFEATED

Mayor

Declaration Of Conflict Of Interest: _____

- Disclosed His/Her/Their Interest
 Vacated His/Her/Their Seat
 Abstained From Discussion & Did Not Vote On The Question

Clerk



Dave Markell
02/24/2005 02:10 PM

To: Reg170_FormSubmission@ene.gov.on.ca
cc: "Norstor" <admin@townshipofnorthstormont.on.ca>

Subject: Annual Report-Finch,210003912

Annual Report-Finch,210003912



Annual report 2004-Finch.DC

dave markell
448-3098

Part III Form 2**Section 11. ANNUAL REPORT.**

Drinking-Water System Number:

210003912

Drinking-Water System Name:

Finch

Drinking-Water System Owner:

Township of North Stormont

Drinking-Water System Category:

Large Municipal Residential

Period being reported:

January 1 to December 31, 2004

Complete if your Category is Large Municipal Residential or Small Municipal Residential

Does your Drinking-Water System serve more than 10,000 people? Yes [] No [x]

Is your annual report available to the public at no charge on a web site on the Internet?
Yes [x] No []

Location where Report required under O. Reg. 170/03 Schedule 22 will be available for inspection.

Available at the Township of North Stormont Office, 2 Victoria Street, Berwick, Ontario and on their website www.townshipofnorthstormont.on.ca

Complete for all other Categories.

Number of Designated Facilities served:

Did you provide a copy of your annual report to all Designated Facilities you serve?

Yes [] No [] N/A []

Number of Interested Authorities you report to:

Did you provide a copy of your annual report to all Interested Authorities you report to for each Designated Facility?

Yes [] No [] N/A []

List Drinking-Water Systems, which receive all of their drinking water from your system:

None

Did you provide a copy of your annual report to all Drinking-Water System owners that are connected to you and to whom you provide all of its drinking water?

Yes [] No [] N/A [x]

Indicate how you notified system users that your annual report is available, and is free of charge.

- [x] Public access/notice via the web
- [x] Public access/notice via Government Office
- [] Public access/notice via a newspaper
- [] Public access/notice via Public Request
- [] Public access/notice via a Public Library
- [] Public access/notice via other method _____

Drinking-Water Systems Regulation O. Reg. 170/03**Describe your Drinking-Water System**

Groundwater is pumped from one of two source wells through an aeration tower for Hydrogen Sulphide removal. From the tower, water flows to a contact tank where Sodium Hypochlorite is added and allowed sufficient time for disinfection. As water is used throughout the distribution system, the level of the water tower falls to a preset limit and a pump in the plant starts. This pump draws water from the contact tank and forces it through pressure filters and out to refill the water tower.

List all water treatment chemicals used over this reporting period

Sodium Hypochlorite was used at an average dosage rate of 3.8 mg/L.

Were any significant expenses incurred to?

- Install required equipment
- Repair required equipment
- Replace required equipment

Describe:

Replaced filter backwash water flow meter.
Cleaned and inspected elevated water tower.

Provide details on the notices submitted in accordance with subsection 18(1) of the Safe Drinking-Water Act or section 16-4 of Schedule 16 of O.Reg.170/03 and reported to Spills Action Centre?

Incident Date	Parameter	Result	Unit of Measure	Corrective Action	Corrective Action Date
N/A					

Microbiological testing done under section 8 (2) during this reporting period

	Number of Samples	Range of E.Coli or Fecal Results (#-#)	Range of Total Coliform Results (#-#)	Number of HPC Samples	Range of HPC Results (#-#)	Number of Background Samples	Range of Background Samples (#-#)
Raw	306	0-0	0-0	0	0	100	0-32
Treated	156	0-0	0-0	39	<2-480	14	0-0
Distribution	261	0-0	0-0	39	<2-26	15	0-7

Drinking-Water Systems Regulation O. Reg. 170/03

Operational testing done under Schedule 7, 8 or 9 during the period covered by this Annual Report.

	Number of Grab Samples	Range of Results (#-#)
Turbidity Treated	8760	0.029-4.98 NTU's
Turbidity Raw	24	0.09-1.88 NTU's
Chlorine	8760	0.2-2.39

NOTE: For continuous monitors use 8760 as the number of samples.

NOTE: Record the unit of measure if it is not milligrams per litre.

Summary of additional testing and sampling carried out in accordance with the requirement of an approval or order.

Date of order or C of A	Parameter	Date Sampled	Result	Unit of Measure
Oct.01/02	Sodium	Sept. 21/04	84	mg/L

Summary of Inorganic parameters tested during this reporting period or most recent

Parameter	Minimum Sample Date	Maximum Sample Date	Minimum Value	Maximum Value	Unit of Measure	Exceedance
Antimony	12/9/03	12/9/03	<0.6	<0.6	ug / L	No
Arsenic	01/20/03	01/20/03	<0.001	<0.001	mg / L	No
Barium	01/20/03	01/20/03	0.38	0.38	mg / L	No
Boron	01/20/03	01/20/03	0.17	0.17	mg / L	No
Cadmium	01/20/03	01/20/03	<0.0001	<0.0001	mg / L	No
Chromium	01/20/03	01/20/03	0.002	0.002	mg / L	No
Copper	01/20/03	01/20/03	0.033	0.033	mg / L	No
Iron	01/20/03	01/20/03	0.01	0.01	mg / L	No
Lead	01/05/04	01/05/04	<0.001	<0.001	mg / L	No
Mercury	01/20/03	01/20/03	<0.0001	<0.0001	mg / L	No
Selenium	01/20/03	01/20/03	<0.001	<0.001	mg / L	No
Uranium	01/20/03	01/20/03	<0.001	<0.001	mg / L	No
Fluoride	04/24/03	01/20/03	0.45	0.5	mg / L	No
Nitrite	01/15/04	11/08/04	<0.1	<0.1	mg / L	No
Nitrate	11/08/04	05/13/04	<0.1	0.12	mg / L	No

Summary of Organic parameters sampled during this reporting period or most recent

Parameter	Minimum Sample Date	Maximum Sample Date	Minimum Value	Maximum Value	Unit of Measure	Exceedance
Alachlor	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Aldicarb	12/9/03	04/24/03	<0.3	<9	ug / L	No
Aldrin + Dieldrin	01/20/03	01/20/03	<0.012	<0.012	ug / L	No
Atrazine + N-dealkylated metabolites	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Azinphos-methyl	01/20/03	01/20/03	<2	<2	ug / L	No
Bendiocarb	01/20/03	01/20/03	<2	<2	ug / L	No
Benzene	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Benzo(a)pyrene	12/9/03	12/9/03	<0.6	<0.6	ug / L	No
Bromoxynil	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Carbaryl	01/20/03	01/20/03	<5	<5	ug / L	No
Carbofuran	01/20/03	01/20/03	<5	<5	ug / L	No
Carbon Tetrachloride	01/20/03	01/20/03	<0.9	<0.9	ug / L	No

Drinking-Water Systems Regulation O. Reg. 170/03

Chlordane (Total)	01/20/03	04/24/03	<0.012	<0.015	ug / L	No
Chlorpyrifos	01/20/03	01/20/03	<1	<1	ug / L	No
Cyanazine	01/20/03	01/20/03	<1	<1	ug / L	No
Diazinon	01/20/03	01/20/03	<1	<1	ug / L	No
Dicamba	01/20/03	01/20/03	<1	<1	ug / L	No
1,2-Dichlorobenzene	01/20/03	01/20/03	<0.4	<0.4	ug / L	No
1,4-Dichlorobenzene	01/20/03	01/20/03	<0.4	<0.4	ug / L	No
Dichlorodiphenyltrichloroethane (DDT) + metabolites	01/20/03	01/20/03	<0.024	<0.024	ug / L	No
1,2-Dichloroethane	01/20/03	01/20/03	<0.7	<0.7	ug / L	No
1,1-Dichloroethylene (vinylidene chloride)	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Dichloromethane	01/20/03	01/20/03	<4	<4	ug / L	No
2-4 Dichlorophenol	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
2,4-Dichlorophenoxy acetic acid (2,4-D)	01/20/03	01/20/03	<1	<1	ug / L	No
Diclofop-methyl	01/20/03	01/20/03	<0.9	<0.9	ug / L	No
Dimethoate	01/20/03	01/20/03	<2.5	<2.5	ug / L	No
Dinoseb	01/20/03	01/20/03	<1	<1	ug / L	No
Diquat	01/20/03	01/20/03	<7	<7	ug / L	No
Diuron	01/20/03	01/20/03	<10	<10	ug / L	No
Glyphosate	01/20/03	01/20/03	<10	<10	ug / L	No
Heptachlor + Heptachlor Epoxide	01/20/03	01/20/03	<0.012	<0.012	ug / L	No
Linadane (Total)	01/20/03	01/20/03	<0.006	<0.006	ug / L	No
Malathion	01/20/03	01/20/03	<5	<5	ug / L	No
Methoxychlor	01/20/03	01/20/03	<0.024	<0.024	ug / L	No
Metolachlor	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Metribuzin	01/20/03	01/20/03	<5	<5	ug / L	No
Monochlorobenzene	01/20/03	01/20/03	<0.2	<0.2	ug / L	No
Paraquat	01/20/03	01/20/03	<1	<1	ug / L	No
Parathion	01/20/03	01/20/03	<1	<1	ug / L	No
Pentachlorophenol	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Phorate	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Picloram	01/20/03	01/20/03	<5	<5	ug / L	No
Polychlorinated Biphenyls(PCB)	01/20/03	04/24/03	<0.05	<0.1	ug / L	No
Promethyne	01/20/03	01/20/03	<0.25	<0.25	ug / L	No
Simazine	01/20/03	04/24/03	<1	<0.25	ug / L	No
THM (NOTE: show latest quarterly average)	01/15/04	07/08/04	55.9	99.0	ug / L	No
Temephos	01/20/03	01/20/03	<10	<10	ug / L	No
Terbufos	12/9/03	01/20/03	<0.12	<0.7	ug / L	No
Tetrachloroethylene	01/20/03	01/20/03	<0.3	<0.3	ug / L	No
2,3,4,6-Tetrachlorophenol	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Triallate	01/20/03	01/20/03	<1	<1	ug / L	No
Trichloroethylene	01/20/03	01/20/03	<0.3	<0.3	ug / L	No
2,4,6-Trichlorophenol	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
2,4,5-Trichlorophenoxy acetic acid (2,4,5-T)	01/20/03	01/20/03	<1	<1	ug / L	No
Trifluralin	01/20/03	01/20/03	<1	<1	ug / L	No
Vinyl Chloride	01/20/03	01/20/03	<0.5	<0.5	ug / L	No

Drinking-Water Systems Regulation O. Reg. 170/03

List any Inorganic or Organic parameter(s) that exceeded half the standard prescribed in Schedule 2 of Ontario Drinking Water Quality Standards.

Parameter	Result Value	Unit of Measure	Date of Sample
N/A			

(Only if category is large municipal residential, small municipal residential, large municipal non residential, small municipal non residential, large non municipal non residential)



Dave Markell
03/11/2005 04:05 PM

To: "Norstor" <admin@townshipofnorthstormont.on.ca>
cc: Blair Henderson/OCWA@OCWA

Subject: Finch Summary Report

Rheal, attached find the 2004 Summary Report for Finch as per the following excerpts of Schedule 22 of O.Reg 170. Blair says if you want, he will come and present this to council. If not the regulations state this must be "given to the members of the municipal council". This should be documented in some way eg: a resolution of council.

Report

22-2. (1) The owner of a drinking-water system shall ensure that, not later than March 31 of each year after 2003, a report is prepared in accordance with subsections (2) and (3) for the preceding calendar year and is given to,

(a) in the case of a drinking-water system owned by a municipality, the members of the municipal council;

(2) The report must,

(a) list the requirements of the Act, the regulations, the system's approval and any order that the system failed to meet at any time during the period covered by the report and specify the duration of the failure; and

(b) for each failure referred to in clause (a), describe the measures that were taken to correct the failure.

(3) The report must also include the following information for the purpose of enabling the owner of the system to assess the capability of the system to meet existing and planned uses of the system:

1. A summary of the quantities and flow rates of the water supplied during the period covered by the report, including monthly average and maximum daily flows and daily instantaneous peak flow rates.

2. A comparison of the summary referred to in paragraph 1 to the rated capacity and flow rates approved in the system's approval.



2004 Annual Record of Water Taking-Well#2, 2004 Annual Record of Water Taking-Well#1,



2004 Summary Report Finch Water.d FW-PARS-04.pdf

dave

SUMMARY REPORTS FOR MUNICIPALITIES

Report

This report is a summary of water quality information for the **Finch WTF**, published in accordance with Schedule 22 of Ontario's Drinking-Water Systems Regulation for the reporting period of January 1, 2004 to December 31, 2004. The Finch WTF is categorized as a Large Municipal Residential Drinking Water System.

This report was prepared by The Ontario Clean Water Agency on behalf of The Township of North Stormont.

Who gets a copy of the Report:

- in the case of a drinking-water system owned by a municipality, the members of the municipal council;
- in the case of a drinking-water system owned by a municipal service board established under section 195 of the *Municipal Act, 2001*, the members of the municipal service board; or
- in the case of a drinking-water system owned by a corporation, the board of directors of the corporation.

What must the Report contain?

The report must,

- list the requirements of the Act, the regulations, the system's approval and any order that the system failed to meet at any time during the period covered by the report and specify the duration of the failure; and
- for each failure referred to in clause (a), describe the measures that were taken to correct the failure.

The following table lists the requirements that the system failed to meet and the measures taken to correct the failure:

Drinking Water Legislation	List the requirement(s) the system failed to meet	Specify the duration of the failure (i.e. date(s))	Describe the measures taken to correct the failure	Status (complete or outstanding)
Safe Drinking Water Act	NA			
Ontario Regulations (eg. O.Reg 170/03, O.Reg 435/93, O.Reg 903)	Weekly raw water samples from the standby well were not collected as per O.Reg 170/03.	June 14,2004 to June 28, 2004	Well #1 raw water supply line leak was repaired.	Complete
System Certificate of Approval #1269-5E5MU3	Upgrade Requirements 5.1 (a) (i) Controls to automatically switch over the sodium hypochlorite metering pumps and alarm in the event of the failure of one pump.	January 1, 2004 to January 28,2004	A chlorine pump panel with alarm and automatic switchover has since been installed.	Complete
System Certificate of Approval #1269-5E5MU3	Upgrade Requirements 5.1 (a) (ii) Installation of standby hypochlorite solution tank with automatic switchover.	January 1,2004 to January 28,2004	Necessary equipment was purchased and has since been installed.	Complete
Provincial Officer's Order No.	N/A			

What else must the Report contain?

The report must also include the following information for the purpose of enabling the owner of the system to assess the capability of the system to meet existing and planned uses of the system:

1. A summary of the quantities and flow rates of the water supplied during the period covered by the report, including monthly average and maximum daily flows and daily instantaneous peak flow rates.
2. A comparison of the summary referred to in paragraph 1 to the rated capacity and flow rates approved in the system's approval.

Attached please find a copy of the 2004 Performance Assessment Report and 2004 Annual Record of Water Taking for the Finch WTF, which contains all required flow information.

When Does the Report Get Submitted?

If a report is prepared for a system that supplies water to a municipality under the terms of a contract, the owner of the system shall give a copy of the report to the municipality by March 31.

Personal information contained on this form is collected under the authority of the Ontario Water Resources Act, Section 20. The Purpose of the form to record details and information about the taking of water annually. Questions should be directed to the Ministry of the Environment's Regional Office in your area.

Les renseignements personnes qui figurent dans le présent formulaire sont resueillis en vertu de l'article 20 de la Loi sur les ressources en eau de l'Ontario. La présente sert à consigner aux dossiers les détails et les renseignements concernant la prise d'eau annuelle. Prié d'adresser toute Question au bureau régional du ministère de l'Environnement le Plus proche.

Year(Année): 2004 Permit No.(N° de permis): 80-P-4002

Location: RW1 - FINCH WS WELL NO 1

Source: Groundwater

Name of Permittee: VILLAGE OF FINCH

Nom du titulaire du permis

Mailing Address: O.C.W.A. 5 INDUSTRIAL DRIVE CHESTERVILLE

Adresse postale

Location Of Taking: <i>Lieu de la prise d'eau</i>		Twp. or Municipality: <i>Canton ou municipalité</i>		Concession:		Lot:	
Date Of Taking <i>Date de la prise d'eau</i>	Total <i>Heure</i>	Hours Of Taking <i>(Hour)</i>	Daily Rate Of Taking <i>Débit de prise d'eau</i>	Amount Of Taking <i>Volume des prises</i>	PLAN #48	PART LOT 24&25	
JAN	400.80		4.80	6,919		281	5
FEB	271.40		4.81	4,485		282	6
MAR	234.00		5.16	4,303		280	6
APR	166.30		5.18	3,094		282	6
MAY	181.10		5.40	3,590		256	6
JUN	145.20		5.01	2,571		290	6
"L	245.90		4.75	4,176		347	6
JG	225.50		4.69	3,804		299	6
SEP	186.10		4.86	3,243		305	6
OCT	225.20		4.68	3,782		315	6
NOV	257.80		4.05	3,680		252	5
DEC	189.40		5.08	3,327		253	5
Total:				46,974			
Criteria:			9.00			777	9

I certify that the above information is true, complete and accurate.
J'atteste que les renseignements ci-dessus sont vrais, complets et exacts.

Signature

Date

Personal information contained on this form is collected under the authority of the Ontario Water Resources Act, Section 20. The Purpose of the form to record details and information about the taking of water annually. Questions should be directed to the Ministry of the Environment's Regional office in your area.

Les renseignements personnes qui figurent dans le présent formulaire sont resueillis en vertu de l'article 20 de la Loi sur les ressources en eau de l'Ontario. La présente sert à consigner aux dossiers les détails et les renseignements concernant la prise d'eau annuelle. Priére d'adresser toute Question au bureau régional du ministère de l'Environnement le Plus proche.

Year(Année): 2004 Permit No.(N° de permis): 80-P-4002

Location: RW2 - FINCH WS WELL NO 2

Source: Groundwater

Name of Permittee: VILLAGE OF FINCH

Nom du titulaire du permis

Mailing Address: O.C.W.A. 5 INDUSTRIAL DRIVE CHESTERVILLE

Adresse postale

Location Of Taking: <i>Lieu de la prise d'eau</i>	Twp. or Municipality: <i>Canton ou municipalité</i>	Concession:	Lot:			
Date Of Taking <i>Date de la prise d'eau</i>	Hours Of Taking (Hour) Heure	Avg. Daily Rate Of Taking (L/sec) Débit de prise d'eau	Total Amount Of Taking (m³) Volume des prises	Peak Daily Flow (m³/day) Prélèvement maximum journalier	PLAN #48	PART LOT 24&25
JAN	1.10	5.18	20	8	5	
FEB	116.25	4.68	1,934	229	5	
MAR	252.40	4.65	2,354	213	5	
APR	176.00	5.14	3,194	240	5	
MAY	189.90	5.05	3,394	293	5	
JUN	239.80	5.35	4,607	330	7	
'L	198.00	5.24	3,726	347	6	
JG	183.00	4.78	3,138	240	6	
SEP	210.40	5.01	3,790	259	5	
OCT	234.50	4.50	3,812	264	5	
NOV	240.00	4.41	3,711	427	5	
DEC	207.60	4.51	3,370	245	5	
Total:			37,050			
Criteria:		9.00		777		9

I certify that the above information is true, complete and accurate.
J'atteste que les renseignements ci-dessus sont vrais, complets et exacts.

Signature

Date

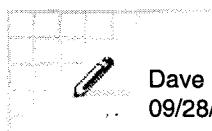
ONTARIO CLEAN WATER AGENCY
WATER PLANT PERFORMANCE ASSESSMENT REPORT

MUNICIPALITY: FINCH
PROJECT: FINCH WATER SUPPLY
PROJ. NUM.: 5-0128-00-00
WORKS NUM.: 210003912
DESCRIPTION: A TWO WELL SYSTEM EQUIPPED WITH AN AERATION TOWER, FILTRATION AND A CLEAR WELL.
DISINFECTION IS WITH SODIUM HYPOCHLORITE.

YEAR: 2004
WATER SOURCE: GROUNDWATER
DESIGN CAP.: 0.7776 X 1000 M3/d

MONTH	SYSTEM FLOWS TREATED			TREATED		DISTRIBUTION		BACTI (INDICATE NO. OF SAMPLES)				RAW WATER	
	TOTAL FLOW m3	AVG DAY FLOW m3	MAX DAY FLOW m3	MIN FREE. CL2 RESID.	MAX FREE. CL2 RESID.	MIN FREE. CL2 RESID.	MAX FREE. CL2 RESID.	TREAT	DIST	TREAT	DIST	ABSENT	E.COLI PRESENT
JAN	6797	219	273	0.38	2.10	0.86	1.80	12	20	0	0	8	0
FEB	6119	219	276	0.40	2.21	0.60	1.54	12	20	0	0	8	0
MAR	6351	205	275	0.40	2.20	0.65	1.54	15	25	0	0	10	0
APR	6205	207	276	0.42	2.20	0.71	1.96	12	20	0	0	8	0
MAY	6867	222	261	0.40	2.02	0.65	2.10	15	25	0	0	10	0
JUN	7066	236	328	0.40	2.00	0.35	1.46	12	21	0	0	6	0
JUL	7805	252	348	0.58	2.30	0.10	1.51	12	20	0	0	8	0
AUG	6867	222	294	0.20	2.00	0.47	2.39	15	25	0	0	10	0
SEP	7002	233	298	0.38	1.99	0.51	1.56	12	20	0	0	8	0
OCT	7553	244	307	0.40	2.10	0.53	1.36	12	20	0	0	8	0
NOV	7321	244	426	0.31	2.10	0.37	1.64	15	25	0	0	10	0
DEC	6637	214	248	0.30	1.90	0.50	1.66	12	20	0	0	8	0
TOTAL	82590							156	261	0	0	102	0
AVG		226											
MIN				0.20		0.10							
MAX			426		2.30		2.39						
CRITERIA				0.20		0.05	4.00						

COMMENTS: No Raw Water samples Well#1 Weeks of June 14 & 21 (pipe leak)
Tower cleaned and inspected November
Max. day flow high in Nov. as a result of refilling water tower.



Dave Markell
09/28/2004 09:31 AM

To: "Idalia Milan" <imilan@eohu-bseo.on.ca>
cc:

Subject: Sodium Finch Water Treatment Plant

Idalia, the Finch Certificate of Approval requires we sample for Sodium annually. I have just received the results for 2004. The value was 84 mg/L. This is not reportable as adverse water because it has been reported Apr. 30/2003 which is within the last 60 months.

dave

Accutest Laboratories Ltd. 146 Colonnade Rd., Unit 8, Ottawa, Ontario, K2E 7Y1 www.accutestlabs.com

ACCUTEST

Exceedance Report

Attention: **Mr. Blair Henderson**
FINCH WELL SUPPLY
Fax: **613-448-1616**

Health Unit: **Dr. Bordeau**
Fax: **613-933-7930**

MOE Spills Action Centre **1-800-268-6061**

Date: **September 28, 2004**Number of pages including cover sheet: **4**

From:
Allison MacLeod
Lab Technician

Phone: **613-727-5692**Fax phone: **613-727-5222**e-mail: **info@accutestlabs.com**

REMARKS	<input checked="" type="checkbox"/> Urgent	<input type="checkbox"/> For your review	<input type="checkbox"/> Reply ASAP	<input type="checkbox"/> Please comment
----------------	--	--	-------------------------------------	---

Originals to follow:	<input type="checkbox"/> YES	<input type="checkbox"/> NO	VIA:	<input type="checkbox"/> Mail	<input type="checkbox"/> Courier
-----------------------------	------------------------------	-----------------------------	-------------	-------------------------------	----------------------------------

Exceedance Parameter(s): Na	Waterworks Number: 210003912
	Accutest Report Number: 3418089

Sir/Madam,

This is a notice of an adverse water quality result for FINCH WELL SUPPLY. I have attached a copy of the report as well as Part 1 and 3 of the MOE Notice of Drinking Water Analysis form.

Please contact me if you have any questions.

Best regards,

Allison MacLeod

The information contained in this fax may include confidential or proprietary information that is the property of the sender. The information is intended for the use of the individual named above. If you are not the intended recipient, you are hereby notified that any disclosure, copying, dissemination or the taking of any action in relation with the contents of this fax is strictly prohibited. If you have received this message in error, please notify us immediately by fax at the sender's fax number, or by telephone at 1-866-271-8378.

Ontario

Ministry of the Environment

Drinking-Water Systems Regulation O. Reg. 170/03

**NOTICE OF ADVERSE TEST RESULTS AND OTHER PROBLEMS
and
NOTICE OF ISSUE RESOLUTION at DRINKING-WATER SYSTEMS**

SECTION 1 - WRITTEN NOTICE BY LABORATORY

Indicators of Adverse Water Quality	Micro <input type="checkbox"/> Exceeds Standard	Phys/Chem <input checked="" type="checkbox"/> Exceeds Standard	Radiological <input type="checkbox"/> Exceeds Standard
	CofA/Order <input type="checkbox"/>		Exceeds Limit
Oral Notification to SPILLS ACTION CENTRE			
Person Contacted: Julian	Date: Sept 28 04	Time: 9:15	
Person Notifying: Allison MacLeod	AWQI Notification No (s)		
Laboratory Name: Accutest Laboratories Ltd.	Laboratory Emergency Contact Name Peter Maitena		
Address 8-146 Colonnade Rd. S, Nepean, K2E 7Y1	Position Analytical Services Manager		
Telephone # of Lab (613) 727-5692	Phone # (613) 727-5692	Fax # (613) 727-5222	
Drinking-Water System (DWS) Name	DWS Emergency Contact		
Finch Well Supply	Blair Henderson		
DWS (Waterworks) # 210003912	Name ↗		
Location Chesterville, Ontario	Position		
Telephone # of DWS (613) 448-3098	Phone # (613) 448 3098	Fax # (613) 448-1616	
Oral Notification to Drinking-Water System Owner	Oral Notification to Local Medical Officer of Health		
Person Contacted: Blair Henderson	Person Contacted: Idalia Milan		
Position	Position: Special Project		
Date Sept 28 2004	Time 8:05	Date Sept 28 2004	Time 9:10
Laboratory Written Notification Prepared by: (Lab Results must be attached using Section 3 of this form)			
Signature: Allison MacLeod	Date: Sept 28 04		

Date Due: 2004-09-29

Report Number: 2418089

ACCUTEST - Sample Submittal

MOE REPORTABLE

Client: FINCH WELL SUPPLY
Attention: Mr. Blair HendersonDate Submitted: 2004-09-22
Date Collected: 2004-09-21
Project:

	Matrix	Supply Water
LAB ID:	343405	
Client ID:	FW-01	
Sample Type:	TREATEDWATER	
Regulation:		
Reportable:	YES	
Na	Y 84 mg/L	

Mr. Blair Henderson notified us that this was reported in April 2003.

Person from Spills Action Centre notified us that this sample was not reportable because it had been reported within the last 5 years.

APPROVALS:

INORG: _____

FINAL: _____

WATERWORKS NUMBER: 210003912

Rev: 2.02

Ontario
Ministry of Environment

Drinking-Water Systems Regulation O. Reg 170/03

Water Use License de

Environnement

SECTION 3:

For Indicators Listed in Drinking-Water Systems Regulation

Microbiological Testing

AWRI Notification Record No.	Laboratory Submission ID	Laboratory Sample ID	Date/Time - Sample Type & Sample Location			Membrane Filtration Count / 100 ml.			P/A / 100ml Confirmed	HPC / 1mL	Date - Date Approved (mm/yyyy/dd)
			U Unfiltered*	T Treated**	D Distribution	Total	Total Coliform	E. Coli			
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

For Parameters Listed In Drinking-Water Systems Regulation or cited in MOE CoA or Order

AWRI Notification Record No.	Laboratory Submission ID	Laboratory Sample ID	Date/Time - Sample Collected (mm/yyyy) T Treated** D Distribution			Parameter	Result(s)***	Unit of Measure	Standard	Data - Data Approved (mm/yyyy)	
			U Unfiltered*	T Treated**	D Distribution						
FW-01	343405	2004/09/17 10:35	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	Na	84	mg/L	20 mg/L	2004/09/26	
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>						

Authorization

Signature *Allison MacLeod* **Name** *Allison MacLeod* **Date** *2004 09 28* **MM** **DD**

* Only for Drinking Water Systems that are not currently required under O.Reg.170/03 to treat their drinking water.

** Refers to treatment point or entry point samples.

... If you are reporting Trihalomethanes, please include the quarterly sample result followed by the calculated running annual average value.

Notice of Adverse Test Results and Other Problems

Notice of Issue Resolution at Drinking Water Systems

Client: FINCH WELL SUPPLY

5 Industrial Drive
Chesterville, ON
K0C 1H0

Attention: Mr. Blair Henderson

Report Number: 2418089
Date: 2004-09-29
Date Submitted: 2004-09-22

Project:

P.O. Number:
Matrix: Supply Water

PARAMETER	UNITS	MDL	TREATED					GUIDELINE		
								LAB ID:	343405	
								Sample Date:	2004-09-21	
Sodium	mg/L	1	84					Sample ID:	FW-01	
Lab reported 84 mg/L. No treatment was required. No action is recommended at this time.								TYPE	LIMIT	UNITS
										mg/L

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

Comment:

APPROVAL: _____

Ewan McRobbie
Inorganic Lab Supervisor

Finch 2004

Treated NO2	Treated NO3	Distribution THM	Distribution Lead	Treated Sodium	Well Head Monitoring	Well Head Inspection
-------------	-------------	------------------	-------------------	----------------	----------------------	----------------------

January	<0.1	0.11	55.9	<0.001	84	
February						
March						
April	<0.1	0.12	81.5			
May						
June						
July	<0.1	0.1	99			
August						
September						
October	<0.1	<0.1	76.4			
November						
December						

Schedule 23	Treated Water	last collected	Apr.2003	2006
Schedule 24	Treated Water	last collected	Apr.2003	2006
Fluoride	Treated Water	last collected	Jan. 2003	2008

(PENDING) Wellhead Monitoring as per Genivar's recommendations

ACCUTEST LABORATORIES LTD

Client: FINCH WELL SUPPLY
 5 Industrial Drive
 Chesterville, ON
 K0C 1H0
 Attention: Mr. Blair Henderson

REPORT OF ANALYSIS

Report Number: 2400810
 Date: 2004-01-21
 Date Submitted: 2004-01-16
 MOE DWIS UPLOAD: 2400346
 Project: Finch Treated & System

P.O. Number:	Matrix:	Supply Water GUIDELINE			MOE REG 170/03		
		TYPE	LIMIT	UNITS	TYPE	LIMIT	UNITS
LAB ID:	286754	286756			MAC	1.0	mg/L
Sample Date:	2004-01-16	2004-01-15			MAC	10.0	mg/L
Sample ID:	Finch Treated	FW-003			MAC	0.01	mg/L
PARAMETER	UNITS	MDL	TREATED	DISTRIBUTION			
N-NO2 (Nitrite)	mg/L	0.10	<0.10 ✓				
N-NO3 (Nitrate)	mg/L	0.10	0.11 ✓				
Lead	mg/L	0.001	<0.001 ✓				

*P2+O2
H2 / 22.47
P2O5*

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IAC = Interim Maximum Allowable Concentration Comment:

ACCUTEST LABORATORIES LTD

Client: FINCH WELL SUPPLY
 5 Industrial Drive
 Chesterville, ON
 K0C 1H0

Attention: Mr. Blair Henderson

REPORT OF ANALYSIS

Report Number: 2400810
 Date: 2004-01-21
 Date Submitted: 2004-01-16
 MOE DWIS UPLOAD: 2400346
 Project: Finch Treated & System

P.O. Number:	Matrix:	Supply Water GUIDELINE			TYPE	LIMIT	UNITS
		MOE REG 170/03					
LAB ID: 296755							
Sample Date: 2004-01-15							
Sample ID: FW-002							
PARAMETER	UNITS	MDL	DISTRIBUTION				
VOLATILE ORGANIC COMPOUNDS - VOCs	ug/L	0.3	16.9				
Bromodichloromethane	ug/L	0.4	2.1				
Bromoform	ug/L	0.5	18.5				
Chloroform	ug/L	0.3	16.4				
Dibromo-chloromethane	ug/L	2.0	55.9				
Trihalomethanes (total)	%		102				
VOC SURROGATES							
Toluene-d8							

10/22/04
10/22/04
10/22/04

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration iMAC = Interim Maximum Allowable Concentration
 Comment:

APPROVAL: *Mina Nasirai*
 Mina Nasirai
 Organic Lab Supervisor

ACCUTEST LABORATORIES LTD

Client: FINCH WELL SUPPLY
5 Industrial Drive
Chesterville, ON
K0C 1H0

Attention: Mr. Blair Henderson

REPORT OF ANALYSIS

Report Number: 2408703
Date: 2004-05-27
Date Submitted: 2004-05-17
MOE DWIS UPLOAD: 2403011
Project: Finch Wells

Comment:

P.O. Number:

Matrix:

Supply Water

GUIDELINE

LAB ID:	318173	TYPE	LIMIT	UNITS
Sample Date:	2004-05-13			
Sample ID:	FW-01			
	Treated Water At Plant			
PARAMETER	MDL	TREATED		
N-NO ₂ (Nitrite)	0.10	<0.10	1.0	mg/L
N-NO ₃ (Nitrate)	0.10	0.12	10.0	mg/L

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

Comment:

ACCUTEST LABORATORIES LTD**REPORT OF ANALYSIS**

Client: FINCHWELL SUPPLY
 5 Industrial Drive
 Chesterville, ON
 K0C 1H0
Attention: Mr. Blair Henderson

Report Number: 240870
 Date: 2004-05-27
 Date Submitted: 2004-05-17
MOE DWIS UPLOAD: 2403011
Project: Finch Wells

P.O. Number:	Matrix:	Supply Water	GUIDELINE
			MOE REG 170/03
LAB ID:	318174		
Sample Date:	2004-05-13		
Sample ID:	FW-02 Pumping Station #1		
PARAMETER	UNITS	MDL	DISTRIBUTION
VOLATILE ORGANIC COMPOUNDS - VOCs	ug/L		
Bromodichloromethane	0.3	27.0	
Bromoform	0.4	3.2	
Chloroform	0.5	29.6	
Dibromochloromethane	0.3	21.7	
Trihalomethanes (total)	2.0	81.5	
VOC SURROGATES	%	99	
Toluene-d8			

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration Comment:

ACONTEST LABORATORIES LTD

Client: FINCH WELL SUPPLY
5 Industrial Drive
Chesterville, ON
K0C 1H0
Attention: Mr. Blair Henderson

REPORT OF ANALYSIS

Report Number: 2413070
Date: 2004-07-15
Date Submitted: 2004-07-12
MOE DWIS UPLOAD:
Project: 2404359

P.O. Number:	Supply Water Matrix:	GUIDELINE
		MOE REG 170/03
LAB ID:	330297	
Sample Date:	2004-07-08	
Sample ID:	FWP-003	
PARAMETER	UNITS	MDL DISTRIBUTION
N-NO ₂ (Nitrite)	mg/L	0.10 <0.10 ✓
N-NO ₃ (Nitrate)	mg/L	0.10 0.10

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration Comment:

APPROVAL:

Ewan McRobbie
Inorganic Lab Supervisor

Client: FINCH WELL SUPPLY
 5 Industrial Drive
 Chesterville, ON
 K0C 1H0
 Attention: Mr. Blair Henderson

Report Number: 2413070
 Date: 2004-07-15
 Date Submitted: 2004-07-12
 MOE DWIS UPLOAD: 2404359
 Project:

P.O. Number:
 Matrix: Supply Water

PARAMETER	UNITS	MDL	DISTRIBUTION	GUIDELINE			TYPE	LIMIT	UNITS
				LAB ID:	330298				
				Sample Date:	2004-07-08				
				Sample ID:	FWP-0003				
MOE REG 170/03									
VOLATILE ORGANIC COMPOUNDS - VOCs									
Bromodichloromethane	ug/L	0.3	33.3						
Bromoform	ug/L	0.4	3.7						
Chloroform	ug/L	0.5	40.0						
Dibromochloromethane	ug/L	0.3	22.0						
Trihalomethanes (total)	ug/L	2.0	99.0						
VOC SURROGATES									
Toluene-d8	%		103						
<i>Dave JUL 19/04</i>									
<i>TTHM 99</i>									

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

Comment:

APPROVAL: _____
 Mina Nasirai
 Organic Lab Supervisor

Client: FINCH WELL SUPPLY

5 Industrial Drive
Chesterville, ON
K0C 1H0

Attention: Mr. Blair Henderson

Report Number: 2421610
Date: 2004-11-11
Date Submitted: 2004-11-08
MOE DWIS UPLOAD: 2406997
Project: Finch Wells

P.O. Number:
Matrix: Supply Water
GUIDELINE

PARAMETER	UNITS	MDL	TREATED	GUIDELINE		
				MOE REG 170/03		
				TYPE	LIMIT	UNITS
N-NO2 (Nitrite)	mg/L	0.10	<0.10 ✓	MAC	1.0	mg/L
N-NO3 (Nitrate)	mg/L	0.10	<0.10 ✓	MAC	10.0	mg/L

Dave
Nov 12/04

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

Comment:

APPROVAL: _____
Ewan McRobbie
Inorganic Lab Supervisor

Client: FINCH WELL SUPPLY
 5 Industrial Drive
 Chesterville, ON
 K0C 1H0
 Attention: Mr. Blair Henderson

Report Number: 2421610
 Date: 2004-11-11
 Date Submitted: 2004-11-08
 MOE DWIS UPLOAD: 2406997
 Project: Finch Wells

P.O. Number:
 Matrix: Supply Water

PARAMETER	UNITS	MDL	DISTRIBUTION	LAB ID:	353669					GUIDELINE
				Sample Date:	2004-11-08					
				Sample ID:	FW-02 Pumping Station #1 Dist					
VOLATILE ORGANIC COMPOUNDS - VOCs										
Bromodichloromethane	ug/L	0.3	24.7							
Bromoform	ug/L	0.4	3.4							
Chloroform	ug/L	0.5	26.9							
Dibromochloromethane	ug/L	0.3	21.4							
Trihalomethanes (total)	ug/L	2.0	76.4 ✓							
VOC SURROGATES	%		100							
Toluene-d8										
<i>Dave Nov. 21/04</i>				<i>4 quarter running average</i>				<i>78.2 ug/L</i>		

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

Comment:

APPROVAL: _____
 Mina Nasirai
 Organic Lab Supervisor



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00197

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-132

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 06-Jan-04

JOB/PROJECT NO.:

DATE REPORTED: 08-Jan-04

P.O. NUMBER: Finch WTP

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	06-Jan-2004	06-Jan-2004	06-Jan-2004	06-Jan-2004	06-Jan-2004

Client I.D.	Sample I.D.	Date Collected	<1 ✓	32 ✓	<1 ✓	--	--
Well # 1 Raw FW 01	B04-132-1	05-Jan-04	<1 ✓	32 ✓	<1 ✓	--	--
Finch WS No.2 (Standby) Raw FW 02	B04-132-2	05-Jan-04	<1 ✓	<1 ✓	<1 ✓	--	--
Finch WTP Treated	B04-132-3	05-Jan-04	<1 ✓	--	<1 ✓	<2 ✓	1.25
Arena FW 04	B04-132-4	05-Jan-04	<1 ✓	--	<1 ✓	<2 ✓	0.98
McEwen's Gas FW 05	B04-132-5	05-Jan-04	<1 ✓	--	<1 ✓	--	0.87

*Raw
for B10
(Ex + ED)*

K. Pipin

Krstyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00198

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-751

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 13-Jan-04

JOB/PROJECT NO.:

DATE REPORTED: 16-Jan-04

P.O. NUMBER: Finch WTP

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine		
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L		
M.D.L.:	1	1	1	2	2.20		
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a		
Date Analyzed:	13-Jan-2004	13-Jan-2004	13-Jan-2004	13-Jan-2004	13-Jan-2004		
Client I.D.	Sample I.D.	Date Collected					
Well # 1 Raw	B04-751-1	12-Jan-04	< 1	< 1	< 1	--	--
Finch WS No.2 (Standby) Raw	B04-751-2	12-Jan-04	< 1	< 1	< 1	--	--
Finch WTP Treated	B04-751-3	12-Jan-04	< 1	--	< 1	2	1.42
SPS	B04-751-4	12-Jan-04	< 1	--	< 1	< 2	1.06
St.Bernard's	B04-751-5	12-Jan-04	< 1	--	< 1	--	1.07

Jan 16/04
KAT

K. Pipin

Krystyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

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Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00199

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-1186

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 11/04/03

JOB/PROJECT NO.:

DATE REPORTED: 21-Jan-04

P.O. NUMBER: FINCH WTP

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	19-Jan-2004	19-Jan-2004	19-Jan-2004	19-Jan-2004	19-Jan-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	2 ✓	< 1 ✓	--	--
Well # 1 Raw	B04-1186-1	19-Jan-04	< 1 ✓	2 ✓	< 1 ✓	--	--
Finch WS No.2 (Standby) Raw	B04-1186-2	19-Jan-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WTP Treated	B04-1186-3	19-Jan-04	< 1 ✓	--	< 1 ✓	< 2 —	1.32
Arena	B04-1186-4	19-Jan-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.21
MAQ Labs	B04-1186-5	19-Jan-04	< 1 ✓	--	< 1 ✓	--	1.45

Dave 22/04
Sor dated.

K. Pipin

Krstyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00200

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-1699

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 26-Jan-04

JOB/PROJECT NO.:

DATE REPORTED: 28-Jan-04

P.O. NUMBER: Finch WTP

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	26-Jan-2004	26-Jan-2004	26-Jan-2004	26-Jan-2004	26-Jan-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	1 ✓	< 1 ✓	--	--
Well # 1 Raw	B04-1699-1	26-Jan-04	< 1 ✓	1 ✓	< 1 ✓	--	--
Finch WS No.2 (Standby) Raw	B04-1699-2	26-Jan-04	< 1 ✓	10 ✓	< 1 ✓	--	--
Finch WTP Treated	B04-1699-3	26-Jan-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.42
SPS	B04-1699-4	26-Jan-04	< 1 ✓	--	< 1 ✓	< 2 ✓	0.86
McEwen	B04-1699-5	26-Jan-04	< 1 ✓	--	< 1 ✓	--	0.96

Dave
Jan 28/04
Fot ed

K. Pipin

Krstyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.
The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00201

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-2230

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Cheserville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 02-Feb-04

JOB/PROJECT NO.:

DATE REPORTED: 04-Feb-04

P.O. NUMBER: Finch WTP

SAMPLE MATRIX: Drinking Water

210003912

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	2.20
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	02-Feb-2004	02-Feb-2004	02-Feb-2004	02-Feb-2004	02-Feb-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Well # 1 Raw	B04-2230-1	02-Feb-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS No.2 (Standby) Raw	B04-2230-2	02-Feb-04	< 1 ✓	15 ✓	< 1 ✓	--	--
Finch WTP Treated	B04-2230-3	02-Feb-04	< 1 ✓	--	< 1 ✓	312 ✓	1.33
SPS	B04-2230-4	02-Feb-04	< 1 ✓	--	< 1 ✓	2 ✓	0.80
St. Bernard's	B04-2230-5	02-Feb-04	< 1 ✓	--	< 1 ✓	--	1.07

Dave
Feb 6/04
Report delivered to
Municipality:

M.D.L. = Method Detection Limit

Krystyna Pipin
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.
The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



C.O.C.: C-00202

Environmental Laboratories
(Division of Caduceon Enterprises Inc.)**CERTIFICATE OF ANALYSIS**
Final Report

REPORT No. B04-2781

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 09-Feb-04

JOB/PROJECT NO.:

DATE REPORTED: 11-Feb-04

P.O. NUMBER: Finch WTP

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	09-Feb-2004	09-Feb-2004	09-Feb-2004	09-Feb-2004	09-Feb-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Well # 1 Raw	B04-2781-1	09-Feb-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS No.2 (Standby) Raw	B04-2781-2	09-Feb-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WTP Treated	B04-2781-3	09-Feb-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.18
Arena	B04-2781-4	09-Feb-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.03
McEwen Gas	B04-2781-5	09-Feb-04	< 1 ✓	--	< 1 ✓	--	1.16

Feb 13/04
Dave
fated.

Krystyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00204

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-3889

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Cheserville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 23-Feb-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 25-Feb-04

P.O. NUMBER: Finch WTP

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

	Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
	Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
	M.D.L.:	1	1	1	2	2.20
	Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
	Date Analyzed:	23-Feb-2004	23-Feb-2004	23-Feb-2004	23-Feb-2004	23-Feb-2004
Client I.D.	Sample I.D.	Date Collected				
Well # 1 Raw ✓	B04-3889-1	23-Feb-04	< 1 ✓	< 1 ✓	< 1 ✓	--
Finch WS No.2 (Standby) Raw ✓	B04-3889-2	23-Feb-04	< 1 ✓	< 1 ✓	< 1 ✓	--
Finch WTP Treated S Tap ✓	B04-3889-3	23-Feb-04	< 1 ✓	--	< 1 ✓	< 2 ✓ 1.75
SPS S Tap ✓	B04-3889-4	23-Feb-04	< 1 ✓	--	< 1 ✓	< 2 ✓ 0.68
McEwen Gas W.R Tap ✓	B04-3889-5	23-Feb-04	< 1 ✓	--	< 1 ✓	-- 1.16

Dave
Feb 25/04

Faxed

K. Pipin

Krystyna Pipin, M. Sc.

Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00203

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-3315

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 16-Feb-04

JOB/PROJECT NO.:

DATE REPORTED: 18-Feb-04

P.O. NUMBER: Finch WTP

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	2.20
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	17-Feb-2004	17-Feb-2004	17-Feb-2004	17-Feb-2004	17-Feb-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Well # 1 Raw	B04-3315-1	16-Feb-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS No.2 (Standby) Raw	B04-3315-2	16-Feb-04	< 1 ✓	9 ✓	< 1 ✓	--	--
Finch WTP Treated	B04-3315-3	16-Feb-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.60
MAQ Labs W.R. Tap	B04-3315-4	16-Feb-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.27
Smith Cartage	B04-3315-5	16-Feb-04	< 1 ✓	--	< 1	--	1.03

Fatigd *Dave*
Feb 19/04

K. Pipin

Krstyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00205

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-4393

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 01-Mar-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 03-Mar-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	01-Mar-2004	01-Mar-2004	01-Mar-2004	01-Mar-2004	01-Mar-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 1 - Raw	B04-4393-1	01-Mar-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 2 (standby) - Raw	B04-4393-2	01-Mar-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WTP - Treated	B04-4393-3	01-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.51
SPS # 1 S. Tap	B04-4393-4	01-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.06
McEwen Gas WR Tap	B04-4393-5	01-Mar-04	< 1 ✓	--	< 1 ✓	--	1.05

Dave
Mar 31 04
Patel

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00584

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-4973

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 08-Mar-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 10-Mar-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	08-Mar-2004	08-Mar-2004	08-Mar-2004	08-Mar-2004	08-Mar-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	1 ✓	< 1 ✓	--	--
Finch WS Well No. 1 - Raw	B04-4973-1	08-Mar-04	< 1 ✓	1 ✓	< 1 ✓	--	--
Finch WS Well No. 2 (standby) - Raw	B04-4973-2	08-Mar-04	< 1 ✓	1 ✓	< 1 ✓	--	--
Finch WTP - Treated	B04-4973-3	08-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.10
St.Bernards water Tower	B04-4973-4	08-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.28
	B04-4973-5	08-Mar-04	< 1 ✓	--	< 1 ✓	--	1.09

Dave
Mar 12/04

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

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Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00206

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-5595

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 15-Mar-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 17-Mar-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

	Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
	Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
	M.D.L.:	1	1	1	2	
	Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
	Date Analyzed:	15-Mar-2004	15-Mar-2004	15-Mar-2004	15-Mar-2004	15-Mar-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 —	< 1 ✓	--	--
Finch WS Well No. 1 - Raw	B04-5595-1	15-Mar-04	< 1 ✓	< 1 —	< 1 ✓	--	--
Finch WS Well No. 2 (standby) - Raw	B04-5595-2	15-Mar-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WTP - Treated	B04-5595-3	15-Mar-04	< 1 ✓	--	< 1 ✓	2 ✓	1.70
Senior Residence Kitchen Tap	B04-5595-4	15-Mar-04	< 1 ✓	--	< 1 ✓	8 ✓	1.20
Smith Cottage Outside Tap	B04-5595-5	15-Mar-04	< 1 ✓	--	< 1 ✓	--	1.10

*Mar 19
Krystyna Pipin*

K. Pipin

Krystyna Pipin, M. Sc.

Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

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Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: 00207

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-6180

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 22-Mar-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 24-Mar-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	22-Mar-2004	22-Mar-2004	22-Mar-2004	22-Mar-2004	22-Mar-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 1 - Raw FW-01	B04-6180-1	22-Mar-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 2 (standby) - Raw FW-02	B04-6180-2	22-Mar-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WTP - Treated FW-03	B04-6180-3	22-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.71
St Bernards Wr. Tap FW-04	B04-6180-4	22-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.54
Arena Wr. Tap Fw-05	B04-6180-5	22-Mar-04	< 1 ✓	--	< 1 ✓	--	1.16

Dave
Mar 26/04
f mailed

K. Pipin

Krstyna Pipin, M. Sc.

Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00583

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-6732

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 29-Mar-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 31-Mar-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	29-Mar-2004	29-Mar-2004	29-Mar-2004	29-Mar-2004	29-Mar-2004

Client I.D.	Sample I.D.	Date Collected					
Finch WS Well No. 1 - Raw	B04-6732-1	29-Mar-04	1 ✓	12 ✓	< 1 ✓	--	--
Finch WS Well No. 2 (standby) - Raw	B04-6732-2	29-Mar-04	1 ✓	4 ✓	< 1 ✓	--	--
Finch WTP - Treated S Tap	B04-6732-3	29-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.50
SPS # 1 S. Tap	B04-6732-4	29-Mar-04	< 1 ✓	--	< 1 ✓	2 ✓	0.93
MAQ Labs- S Tap	B04-6732-5	29-Mar-04	< 1 ✓	--	< 1 ✓	--	1.49

Dave
Mar 31/04 - mailed

K. Pipin

Krstyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00582

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-7372

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 05-Apr-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 07-Apr-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

	Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
	Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
	M.D.L.:	1	1	1	2	
	Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
	Date Analyzed:	05-Apr-2004	05-Apr-2004	05-Apr-2004	05-Apr-2004	05-Apr-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 1 - Raw	B04-7372-1	05-Apr-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 2 (standby) - Raw	B04-7372-2	05-Apr-04	< 1 ✓	1 ✓	< 1 ✓	--	--
Finch WTP - Treated	B04-7372-3	05-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.59
St. Bernard's WR Tap	B04-7372-4	05-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.34
SPS Tap	B04-7372-5	05-Apr-04	< 1 ✓	--	< 1 ✓	--	1.04

April 8/04
KPK

K. Pipin

Krstyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: 00581

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-8067

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 13-Apr-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 15-Apr-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	14-Apr-2004	14-Apr-2004	14-Apr-2004	14-Apr-2004	14-Apr-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 1 - Raw	B04-8067-1	13-Apr-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 2 (standby) - Raw	B04-8067-2	13-Apr-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WTP - Treated	B04-8067-3	13-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.60
W.R.TAP Mc Ewen Gas	B04-8067-4	13-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.02
W.R.TAP ARENA	B04-8067-5	13-Apr-04	< 1 ✓	--	< 1 ✓	--	1.17

Dave
Apr. 16/04

emailed

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00580

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-8569

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 19-Apr-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 21-Apr-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	19-Apr-2004	19-Apr-2004	19-Apr-2004	19-Apr-2004	19-Apr-2004

Client I.D.	Sample I.D.	Date Collected	<1 ✓	<1 ✓	<1 ✓	--	--
Finch WS Well No. 1 - Raw	B04-8569-1	19-Apr-04	<1 ✓	<1 ✓	<1 ✓	--	--
Finch WS Well No. 2 (standby) - Raw	B04-8569-2	19-Apr-04	<1 ✓	<1 ✓	<1 ✓	--	--
Finch WTP - Treated	B04-8569-3	19-Apr-04	<1 ✓	--	<1 ✓	<2 ✓	1.75
MAQ Labs - WR Tap	B04-8569-4	19-Apr-04	<1 ✓	--	<1 ✓	<2 ✓	1.82
Smith's OS Tap	B04-8569-5	19-Apr-04	<1 ✓	--	<1 ✓	--	1.22

Dave Apr 21/04
e-mailed

K. Pipin

Krystyna Pipin, M. Sc.

Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: ---

**CERTIFICATE OF ANALYSIS
Final Report**

REPORT No. B04-9226

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 26-Apr-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 28-Apr-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	2.20
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	26-Apr-2004	26-Apr-2004	26-Apr-2004	26-Apr-2004	26-Apr-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 1 - Raw	B04-9226-1	26-Apr-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 2 (standby) - Raw	B04-9226-2	26-Apr-04	20 ✓	< 1 ✓	< 1 ✓	--	--
Finch WTP - Treated	B04-9226-3	26-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.35
Arena W.R. Tap	B04-9226-4	26-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	0.98
McEwen Gas WR Tap	B04-9226-5	26-Apr-04	< 1 ✓	--	< 1 ✓	--	0.90

April 29/04
K.H.

K. Pipin

Krstyna Pipin, M. Sc.

Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00578

**CERTIFICATE OF ANALYSIS
Final Report**

REPORT No. B04-9882

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 03-May-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 05-May-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	03-May-2004	03-May-2004	03-May-2004	03-May-2004	03-May-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 1 - Raw	B04-9882-1	03-May-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 2 (standby) - Raw	B04-9882-2	03-May-04	< 1 ✓	1 ✓	< 1 ✓	--	--
Finch WTP - Treated	B04-9882-3	03-May-04	< 1 ✓	--	< 1 ✓	6 ✓	1.67
SPS # 1 Sink	B04-9882-4	03-May-04	< 1 ✓	--	< 1 ✓	< 2 ✓	0.78
McEwen Gas WR Tap	B04-9882-5	03-May-04	< 1 ✓	--	< 1 ✓	--	1.23

Dave
May 6

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
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C.O.C.: C-00577

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-10597

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 10-May-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 12-May-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	10-May-2004	10-May-2004	10-May-2004	10-May-2004	10-May-2004
Client I.D.	Sample I.D.	Date Collected			
Finch WS Well No. 1 - Raw	B04-10597-1	10-May-04	< 1 ✓	< 1 ✓	< 1 ✓
Finch WS Well No. 2 (standby) - Raw	B04-10597-2	10-May-04	< 1 ✓	< 1 ✓	< 1 ✓
Finch WTP - Treated	B04-10597-3	10-May-04	< 1 ✓	--	< 1 ✓
SPS Store. Tap	B04-10597-4	10-May-04	< 1 ✓	--	< 1 ✓
Arena WR Tap	B04-10597-5	10-May-04	< 1 ✓	--	< 1 ✓

Dave
May 13/04

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
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C.O.C.: C-00576

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-11322

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Cheserville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 17-May-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 19-May-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

	Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
	Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
	M.D.L.:	1	1	1	2	
	Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
	Date Analyzed:	17-May-2004	17-May-2004	17-May-2004	17-May-2004	17-May-2004
Client I.D.	Sample I.D.	Date Collected				
Finch WS Well No. 1 - Raw	B04-11322-1	17-May-04	<1 ✓	<1 ✓	<1 ✓	--
Finch WS Well No. 2 (standby) - Raw	B04-11322-2	17-May-04	<1 ✓	<1 ✓	<1 ✓	--
Finch WTP - Treated	B04-11322-3	17-May-04	<1 ✓	--	<1 ✓	2 ✓
Smith Cartage S Tap	B04-11322-4	17-May-04	<1 ✓	--	<1 ✓	<2 ✓
St Bernard's School WR Tap	B04-11322-5	17-May-04	<1 ✓	--	<1 ✓	--

Dave
May 20
I mailed

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
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C.O.C.: ---

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-12092

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE SUBMITTED: 25-May-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 27-May-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

	Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
	Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
	M.D.L.:	1	1	1	2	
	Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
	Date Analyzed:	26-May-2004	26-May-2004	26-May-2004	26-May-2004	26-May-2004
Client I.D.	Sample I.D.	Date Collected				
Finch WS Well No. 1 - Raw	B04-12092-1	25-May-04	< 1 ✓	< 1 ✓	< 1 ✓	--
Finch WS Well No. 2 (standby) - Raw	B04-12092-2	25-May-04	< 1 ✓	< 1 ✓	< 1 ✓	--
Finch WTP - Treated	B04-12092-3	25-May-04	< 1 ✓	--	< 1 ✓	< 2 ✓
SPS # 1 S. Tap	B04-12092-4	25-May-04	< 1 ✓	--	< 1 ✓	< 2 ✓
Arena WR Tap	B04-12092-5	25-May-04	< 1 ✓	--	< 1 ✓	--
						1.35
						0.85
						1.10

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.
The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

Krystyna Pipin, M. Sc.
Lab Supervisor



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00575

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-12691

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE SUBMITTED: 31-May-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 02-Jun-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	31-May-2004	31-May-2004	31-May-2004	31-May-2004	31-May-2004

Client I.D.	Sample I.D.	Date Collected	<1 ✓	<1 ✓	<1 ✓	--	--
Finch WS Well No. 1 - Raw	B04-12691-1	31-May-04	<1 ✓	<1 ✓	<1 ✓	--	--
Finch WS Well No. 2 (standby) - Raw	B04-12691-2	31-May-04	<1 ✓	<1 ✓	<1 ✓	--	--
Finch WTP - Treated	B04-12691-3	31-May-04	<1 ✓	--	<1 ✓	42 ✓	1.51
MQA Labs WR Tap	B04-12691-4	31-May-04	<1 ✓	--	<1 ✓	8 ✓	1.32
Arena WR Tap	B04-12691-5	31-May-04	<1 ✓	--	<1 ✓	--	1.22

Dave
June 3

K. Pipin

Krstyna Pipin, M. Sc.

Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00573

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-13423

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE SUBMITTED: 07-Jun-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 09-Jun-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

	Parameter Name:	E coli	Total Coliform	Background	Heterotrophic Plate Count	Free Chlorine
	Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
	M.D.L.:	1	1	1	2	
	Reference Method:	MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
	Date Analyzed:	07-Jun-2004	07-Jun-2004	07-Jun-2004	07-Jun-2004	07-Jun-2004
Client I.D.	Sample I.D.	Date Collected				
Finch WS Well No. 1 - Raw	B04-13423-1	07-Jun-04	<1 ✓	<1 ✓	<1 ✓	--
Finch WS Well No. 2 (standby) - Raw	B04-13423-2	07-Jun-04	<1 ✓	<1 ✓	<1 ✓	--
Finch WTP - Treated	B04-13423-3	07-Jun-04	<1 ✓	<1 ✓	<1 ✓	<2 ✓ 1.74
Smith Cartage O.S Tap	B04-13423-4	07-Jun-04	<1 ✓	<1 ✓	<1 ✓	10 ✓ 1.14
St. Bernard's Tap	B04-13423-5	07-Jun-04	<1 ✓	<1 ✓	<1 ✓	-- 1.18

June 11/04
BHK

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00572

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-14155

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE SUBMITTED: 14-Jun-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 16-Jun-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	E coli	Background	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
Date Analyzed:	14-Jun-2004	14-Jun-2004	14-Jun-2004	14-Jun-2004	14-Jun-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 2 (standby) - Raw	B04-14155-1	14-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WTP - Treated S tap	B04-14155-2	14-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	< 2 ✓	1.42
MPA LABS WR Tap	B04-14155-3	14-Jun-04	< 1 ✓	< 1 ✓	--	< 2 ✓	1.37
SPS#1 S Tap	B04-14155-4	14-Jun-04	< 1 ✓	< 1 ✓	--	--	0.88

Dave
Jun 17/04

Well #1 out of Service.
Flange split. No Raw Sample
until repaired.

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00571

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-14904

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 21-Jun-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 23-Jun-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	E coli	Background	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
Date Analyzed:	21-Jun-2004	21-Jun-2004	21-Jun-2004	21-Jun-2004	21-Jun-2004

Client I.D.	Sample I.D.	Date Collected	<1 ✓	<1 ✓	<1 ✓	--	--
Finch WS Well No. 2 (standby) - Raw	B04-14904-1	21-Jun-04	<1 ✓	<1 ✓	<1 ✓	--	--
Finch WTP - Treated	B04-14904-2	21-Jun-04	<1 ✓	<1 ✓	<1 ✓	2 ✓	1.67
FW-04	B04-14904-3	21-Jun-04	<1 ✓	<1 ✓	--	2 ✓	1.47
FW-05	B04-14904-4	21-Jun-04	<1 ✓	<1 ✓	--	<2 ✓	1.23

D. w/e
June 23/04

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00570

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-15592

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 28-Jun-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 30-Jun-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	E coli	Background	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
Date Analyzed:	29-Jun-2004	29-Jun-2004	29-Jun-2004	28-Jun-2004	28-Jun-2004

Client I.D.	Sample I.D.	Date Collected	<1 ✓	<1 ✓	1 ✓	--	--
Finch WS Well No. 1 - Raw	B04-15592-1	28-Jun-04	<1 ✓	<1 ✓	1 ✓	--	--
Finch WS Well No. 2 (standby) - Raw	B04-15592-2	28-Jun-04	<1 ✓	<1 ✓	<1 ✓	--	--
Finch WTP - Treated	B04-15592-3	28-Jun-04	<1 ✓	<1 ✓	--	<2 ~	1.96
Post Office W.R Tap	B04-15592-4	28-Jun-04	<1 ✓	<1 ✓	--	<2 ✓	1.03
SPS S. Tap	B04-15592-5	28-Jun-04	<1 ✓	<1 ✓	--	--	1.12

↓ w/e
Jun 2

Krystyna Pipin, M. Sc.

Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00569

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-16141

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 05-Jul-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 07-Jul-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	E coli	Background	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
Date Analyzed:	05-Jul-2004	05-Jul-2004	05-Jul-2004	05-Jul-2004	05-Jul-2004

Client I.D.	Sample I.D.	Date Collected	< 1	< 1	< 1	--	--
Finch WS Well No. 1 - Raw	B04-16141-1	05-Jul-04	< 1	< 1	< 1	--	--
Finch WS Well No. 2 (standby) - Raw	B04-16141-2	05-Jul-04	< 1	< 1	< 1	--	--
Finch WTP - Treated	B04-16141-3	05-Jul-04	< 1	< 1	--	< 2	1.46
St. Bernard's O.S Tap	B04-16141-4	05-Jul-04	< 1	< 1	--	< 2	1.04
Smith Cartage O.S Tap Tap	B04-16141-5	05-Jul-04	< 1	< 1	--	--	1.20

July 8/04
BKF.

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00568

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-16803

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 12-Jul-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 14-Jul-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	E coli	Total Coliform	E coli	Background
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3407	MOE E3407	MOE E3371
Date Analyzed:	12-Jul-2004	12-Jul-2004	12-Jul-2004	12-Jul-2004	12-Jul-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 ✓	--	--	< 1 ✓
Finch WS Well No. 1 - Raw	B04-16803-1	12-Jul-04	< 1 ✓	< 1 ✓	--	--	< 1 ✓
Finch WS Well No. 2 (Standby) - Raw	B04-16803-2	12-Jul-04	< 1 ✓	< 1 ✓	--	--	< 1 ✓
Finch WTP - Treated	B04-16803-3	12-Jul-04	--	--	< 1 ✓	< 1 ✓	--
Maq Labs W.R Tap	B04-16803-4	12-Jul-04	--	--	< 1 ✓	< 1 ✓	--
McEwen Gas W.R Tap	B04-16803-5	12-Jul-04	--	--	< 1 ✓	< 1 ✓	--

1 unknown growth

Dave
Jul 11/04

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

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Environmental Laboratories
(Division of Caduceon Enterprises Inc.)

C.O.C.: C-00568

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-16803

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 12-Jul-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 14-Jul-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

	Parameter Name:	Heterotrophic Plate Count	Free Chlorine				
	Units:	cfs/1mL	mg/L				
	M.D.L.:	2					
	Reference Method:	MOE E3371	n/a				
	Date Analyzed:	12-Jul-2004	12-Jul-2004				
Client I.D.	Sample I.D.	Date Collected					
Finch WS Well No. 1 - Raw	B04-16803-1	12-Jul-04	--	--			
Finch WS Well No. 2 (Standby) - Raw	B04-16803-2	12-Jul-04	--	--			
Finch WTP - Treated	B04-16803-3	12-Jul-04	< 2 ✓	1.55			
Maq Labs W.R Tap	B04-16803-4	12-Jul-04	< 2 ✓	1.51			
McEwen Gas W.R Tap	B04-16803-5	12-Jul-04	--	1.25			

1 unknown growth

M.D.L. = Method Detection Limit

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Krystyna Pipin, M. Sc.
Lab Supervisor



Environmental Laboratories
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C.O.C.: C-00566

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-17435

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 19-Jul-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 21-Jul-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	19-Jul-2004	19-Jul-2004	19-Jul-2004	19-Jul-2004	19-Jul-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 1 - Raw	B04-17435-1	19-Jul-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 2 (Standby) - Raw	B04-17435-2	19-Jul-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WTP - Treated	B04-17435-3	19-Jul-04	--	--	--	< 1 ✓	< 1 ✓
SPS South Tap	B04-17435-4	19-Jul-04	--	--	--	< 1 ✓	< 1 ✓
Smith's OS Tap	B04-17435-5	19-Jul-04	--	--	--	< 1 ✓	< 1 ✓

✓ unknown growth

Dave 22/04
JMR

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

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C.O.C.: C-00566

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-17435

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
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Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 19-Jul-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 21-Jul-04

P.O. NUMBER: -

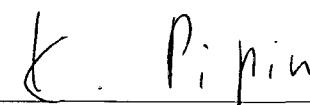
SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

	Parameter Name:	Heterotrophic Plate Count	Free Chlorine				
	Units:	cts/1mL	mg/L				
	M.D.L.:	2					
	Reference Method:	MOE E3371	n/a				
	Date Analyzed:	19-Jul-2004	19-Jul-2004				
Client I.D.	Sample I.D.	Date Collected					
Finch WS Well No. 1 - Raw	B04-17435-1	19-Jul-04	--	--			
Finch WS Well No. 2 (Standby) - Raw	B04-17435-2	19-Jul-04	--	--			
Finch WTP - Treated	B04-17435-3	19-Jul-04	< 2	✓ 1	1.48		
SPS South Tap	B04-17435-4	19-Jul-04	2	✓	0.92		
Smith's OS Tap	B04-17435-5	19-Jul-04	--		1.44		

1 unknown growth

Chlorine results provided by client
M.D.L. = Method Detection Limit


Krystyna Pipin, M. Sc.
Lab Supervisor

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Environmental Laboratories
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C.O.C.: C-00565

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-18101

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 26-Jul-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 28-Jul-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

	Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
	Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
	M.D.L.:	1	1	1	1	1
	Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
	Date Analyzed:	26-Jul-2004	26-Jul-2004	26-Jul-2004	26-Jul-2004	26-Jul-2004
Client I.D.	Sample I.D.	Date Collected				
Finch WS Well No. 1 - Raw	B04-18101-1	26-Jul-04	< 1 ✓	< 1 ✓	< 1 L	--
Finch WS Well No. 2 (Standby) - Raw	B04-18101-2	26-Jul-04	< 1 ✓	< 1 ✓	< 1 ✓	--
Finch WTP - Treated	B04-18101-3	26-Jul-04	--	--	--	< 1 ✓
Pronto Foods Front St Kitchen Tap	B04-18101-4	26-Jul-04	--	--	--	< 1 ✓
Post Office WR Tap Main St	B04-18101-5	26-Jul-04	--	--	--	< 1 ✓

Dave
JW 28/04

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.
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Environmental Laboratories
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C.O.C.: C-00565

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-18101

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
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Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 26-Jul-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 28-Jul-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

	Parameter Name:	Heterotrophic Plate Count	Free Chlorine				
	Units:	cts/1mL	mg/L				
	M.D.L.:	2					
	Reference Method:	MOE E3371	n/a				
	Date Analyzed:	26-Jul-2004	26-Jul-2004				
Client I.D.	Sample I.D.	Date Collected					
Finch WS Well No. 1 - Raw	B04-18101-1	26-Jul-04	--	--			
Finch WS Well No. 2 (Standby) - Raw	B04-18101-2	26-Jul-04	--	--			
Finch WTP - Treated	B04-18101-3	26-Jul-04	480	1.92			
Pronto Foods Front St Kitchen Tap	B04-18101-4	26-Jul-04	<2	1.12			
Post Office WR Tap Main St	B04-18101-5	26-Jul-04	--	1.02			

Chlorine results provided by client
M.D.L. = Method Detection Limit

K. Pipin
Krystyna Pipin, M. Sc.
Lab Supervisor

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Environmental Laboratories
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C.O.C.: C-00567

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-18735

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 05-Aug-04

JOB/PROJECT NO.: [REDACTED]

DATE REPORTED: 05-Aug-04

P.O. NUMBER: [REDACTED]

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	03-Aug-2004	03-Aug-2004	03-Aug-2004	03-Aug-2004	03-Aug-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 1 - Raw	B04-18735-1	03-Aug-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 2 (Standby) - Raw	B04-18735-2	03-Aug-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WTP - Treated	B04-18735-3	03-Aug-04	--	--	--	< 1 ✓	< 1 ✓
Water Tower	B04-18735-4	03-Aug-04	--	--	--	< 1 ✓	< 1 ✓
SPS Basement Sink	B04-18735-5	03-Aug-04	--	--	--	< 1 ✓	< 1 ✓

6/1
Aug 6/04

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.
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C.O.C.: C-00567

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-18735

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 04-Aug-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 05-Aug-04

P.O. NUMBER:

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

	Parameter Name:	Heterotrophic Plate Count	Free Chlorine				
	Units:	cts/1mL	mg/L				
	M.D.L.:	2					
	Reference Method:	MOE E3371	n/a				
	Date Analyzed:	03-Aug-2004	03-Aug-2004				
Client I.D.	Sample I.D.	Date Collected					
Finch WS Well No. 1 - Raw	B04-18735-1	03-Aug-04	--	--			
Finch WS Well No. 2 (Standby) - Raw	B04-18735-2	03-Aug-04	--	--			
Finch WTP - Treated	B04-18735-3	03-Aug-04	< 2 ✓	1.35			
Water Tower	B04-18735-4	03-Aug-04	< 2 ✓	2.39			
SPS Basement Sink	B04-18735-5	03-Aug-04	--	0.84			

BT
Aug 6/04

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

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CERTIFICATE OF ANALYSIS

Final Report

C.O.C.: C-00843

REPORT No. B04-19312

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE RECEIVED: 09-Aug-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 11-Aug-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

	Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
	Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
	M.D.L.:	1	1	1	1	1
	Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
	Date Analyzed:	09-Aug-2004	09-Aug-2004	09-Aug-2004	09-Aug-2004	09-Aug-2004
Client I.D.	Sample I.D.	Date Collected				
Finch WS Well No. 1 - Raw	B04-19312-1	09-Aug-04	< 1 ✓	< 1 ✓	< 1 ✓	--
Finch WS Well No. 2 (Standby) - Raw	B04-19312-2	09-Aug-04	< 1 ✓	< 1 ✓	< 1 ✓	--
Finch WTP - Treated	B04-19312-3	09-Aug-04	--	--	--	< 1 ✓
McEwen Gas WR Tap	B04-19312-4	09-Aug-04	--	--	--	< 1 ✓
Arena WR Tap	B04-19312-5	09-Aug-04	--	--	--	< 1 ✓

1 unknown growth

Dave
Aug 13/04

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.
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CERTIFICATE OF ANALYSIS

Final Report

C.O.C.: C-00843

REPORT No. B04-19312

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE RECEIVED: 09-Aug-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 11-Aug-04

P.O. NUMBER: -

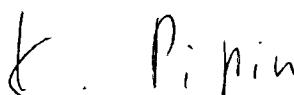
SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Heterotrophic Plate Count	Free Chlorine				
Units:	cts/1mL	mg/L				
M.D.L.:	2					
Reference Method:	MOE E3371	n/a				
Date Analyzed:	09-Aug-2004	09-Aug-2004				
Client I.D.	Sample I.D.	Date Collected				
Finch WS Well No. 1 - Raw	B04-19312-1	09-Aug-04	--	--		
Finch WS Well No. 2 (Standby) - Raw	B04-19312-2	09-Aug-04	--	--		
Finch WTP - Treated	B04-19312-3	09-Aug-04	< 2 ^{✓1}	1.25		
McEwen Gas WR Tap	B04-19312-4	09-Aug-04	2 ^{✓1}	1.05		
Arena WR Tap	B04-19312-5	09-Aug-04	--	1.04		

1. unknown growth

Chlorine results provided by client
M.D.L. = Method Detection Limit


Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.
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C.O.C.: C-00845

CERTIFICATE OF ANALYSIS

Final Report

REPORT No. B04-19966

Report To:

Ontario Clean Water Agency - Finch
 5 Industrial Dr
 Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories
 2378 Holly Lane
 Ottawa Ontario K1V 7P1
 Tel: 526-0123
 Fax 526-1244

DATE RECEIVED: 16-Aug-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 18-Aug-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	16-Aug-2004	16-Aug-2004	16-Aug-2004	16-Aug-2004	16-Aug-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 1 - Raw	B04-19966-1	16-Aug-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 2 (Standby) - Raw	B04-19966-2	16-Aug-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WTP - Treated	B04-19966-3	16-Aug-04	--	--	--	< 1 ✓	< 1 ✓
SPS South Tap	B04-19966-4	16-Aug-04	--	--	--	< 1 ✓	< 1 ✓
Arena WR Tap	B04-19966-5	16-Aug-04	--	--	--	< 1 ✓	< 1 ✓

Aug 19/04
 EH

K. Pipin

Krystyna Pipin, M. Sc.
 Lab Supervisor

Chlorine results provided by client
 M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

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ENVIRONMENTAL LABORATORIES

CERTIFICATE OF ANALYSIS

C.O.C.: C-00845

Final Report

REPORT No. B04-19966

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE RECEIVED: 16-Aug-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 18-Aug-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Heterotrophic Plate Count	Free Chlorine				
Units:	cts/1mL	mg/L				
M.D.L.:	2	0.01				
Reference Method:	MOE E3371	n/a				
Date Analyzed:	16-Aug-2004	16-Aug-2004				
Client I.D.	Sample I.D.	Date Collected				
Finch WS Well No. 1 - Raw	B04-19966-1	16-Aug-04	--	--		
Finch WS Well No. 2 (Standby) - Raw	B04-19966-2	16-Aug-04	--	--		
Finch WTP - Treated	B04-19966-3	16-Aug-04	2 ✓	1.59		
SPS South Tap	B04-19966-4	16-Aug-04	< 2 ✓	0.86		
Arena WR Tap	B04-19966-5	16-Aug-04	--	1.46		

Aug 19/04
JMK

K. Pipin

Krstyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.
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CERTIFICATE OF ANALYSIS

Final Report

C.O.C.: C-00846

REPORT No. B04-20572

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 23-Aug-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 25-Aug-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	23-Aug-2004	23-Aug-2004	23-Aug-2004	23-Aug-2004	23-Aug-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 1 - Raw	B04-20572-1	23-Aug-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 2 (Standby) - Raw	B04-20572-2	23-Aug-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WTP - Treated	B04-20572-3	23-Aug-04	--	--	--	< 1 ✓	< 1 ✓
Water Tower	B04-20572-4	23-Aug-04	--	--	--	< 1 ✓	< 1 ✓
St. Bernard's School	B04-20572-5	23-Aug-04	--	--	--	< 1 ✓	< 1 ✓

Dave 26/04
KWS

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

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CERTIFICATE OF ANALYSIS

ENVIRONMENTAL LABORATORIES

Final Report

C.O.C.: C-00846

REPORT No. B04-20572

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 23-Aug-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 25-Aug-04

P.O. NUMBER:

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

	Parameter Name:	Heterotrophic Plate Count	Free Chlorine					
	Units:	cts/1mL	mg/L					
	M.D.L.:	2	0.01					
	Reference Method:	MOE E3371	n/a					
	Date Analyzed:	23-Aug-2004	23-Aug-2004					
Client I.D.	Sample I.D.	Date Collected						
Finch WS Well No. 1 - Raw	B04-20572-1	23-Aug-04	--	--				
Finch WS Well No. 2 (Standby) - Raw	B04-20572-2	23-Aug-04	--	--				
Finch WTP - Treated	B04-20572-3	23-Aug-04	< 2 ✓	1.77				
Water Tower	B04-20572-4	23-Aug-04	< 2 ✓	1.12				
St. Bernard's School	B04-20572-5	23-Aug-04	--	0.87				

Chlorine results provided by client
M.D.L. = Method Detection Limit

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.
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CERTIFICATE OF ANALYSIS

Final Report

C.O.C.: C-00847

REPORT No. B04-21225

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 30-Aug-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 01-Sep-04

P.O. NUMBER:

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	30-Aug-2004	30-Aug-2004	30-Aug-2004	30-Aug-2004	30-Aug-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 1 - Raw	B04-21225-1	30-Aug-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 2 (Standby) - Raw	B04-21225-2	30-Aug-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WTP - Treated	B04-21225-3	30-Aug-04	--	--	--	< 1 ✓	< 1 ✓
SPS # 1	B04-21225-4	30-Aug-04	--	--	--	< 1 ✓	< 1 ✓
MDA Lab Washroom	B04-21225-5	30-Aug-04	--	--	--	< 1 ✓	< 1 ✓

Dave
Sept
04

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.
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CERTIFICATE OF ANALYSIS

C.O.C.: C-00847

Final Report

REPORT No. B04-21225

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 30-Aug-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 01-Sep-04

P.O. NUMBER:

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

	Parameter Name:	Heterotrophic Plate Count	Free Chlorine				
	Units:	cts/1mL	mg/L				
	M.D.L.:	2	0.01				
	Reference Method:	MOE E3371	n/a				
	Date Analyzed:	30-Aug-2004	31-Aug-2004				
Client I.D.	Sample I.D.	Date Collected					
Finch WS Well No. 1 - Raw	B04-21225-1	30-Aug-04	--	--			
Finch WS Well No. 2 (Standby) - Raw	B04-21225-2	30-Aug-04	--	--			
Finch WTP - Treated	B04-21225-3	30-Aug-04	< 2 ✓	1.65			
SPS # 1	B04-21225-4	30-Aug-04	2	1.00			
MDA Lab Washroom	B04-21225-5	30-Aug-04	--	1.28			

Chlorine results provided by client

M.D.L. = Method Detection Limit

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



CERTIFICATE OF ANALYSIS

Final Report

C.O.C.: c-00848

REPORT No. B04-21933

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 07-Sep-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 09-Sep-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

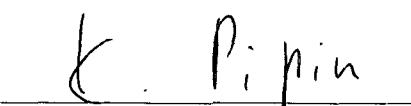
WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	07-Sep-2004	07-Sep-2004	07-Sep-2004	07-Sep-2004	07-Sep-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 1 - Raw	B04-21933-1	07-Sep-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 2 (Standby) - Raw	B04-21933-2	07-Sep-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WTP - Treated	B04-21933-3	07-Sep-04	--	--	--	< 1 ✓	< 1 ✓
Arena WR tap	B04-21933-4	07-Sep-04	--	--	--	< 1 ✓	< 1 ✓
McEwen Gas WR Tap	B04-21933-5	07-Sep-04	--	--	--	< 1 ✓	< 1 ✓

Chlorine results provided by client

M.D.L. = Method Detection Limit


Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



CERTIFICATE OF ANALYSIS

Final Report

C.O.C.: c-00848

REPORT No. B04-21933

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Cheserville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 07-Sep-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 09-Sep-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

	Parameter Name:	Heterotrophic Plate Count	Free Chlorine				
	Units:	cts/1mL	mg/L				
	M.D.L.:	2	0.01				
	Reference Method:	MOE E3371	n/a				
	Date Analyzed:	07-Sep-2004	07-Sep-2004				
Client I.D.	Sample I.D.	Date Collected					
Finch WS Well No. 1 - Raw	B04-21933-1	07-Sep-04	--	--			
Finch WS Well No. 2 (Standby) - Raw	B04-21933-2	07-Sep-04	--	--			
Finch WTP - Treated	B04-21933-3	07-Sep-04	< 2 ✓	1.41			
Arena WR tap	B04-21933-4	07-Sep-04	< 2 ✓	1.52			
McEwen Gas WR Tap	B04-21933-5	07-Sep-04	--	1.00			

Chlorine results provided by client

M.D.L. = Method Detection Limit

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00849

REPORT No. B04-22535

Report To:

Ontario Clean Water Agency - Finch
5 Industrial Dr
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 13-Sep-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 15-Sep-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	13-Sep-2004	13-Sep-2004	13-Sep-2004	13-Sep-2004	13-Sep-2004

Client I.D.	Sample I.D.	Date Collected	< 1 ✓	< 1 ✓	3 ✓	--	--
Finch WS Well No. 1 - Raw	B04-22535-1	13-Sep-04	< 1 ✓	< 1 ✓	3 ✓	--	--
Finch WS Well No. 2 (Standby) - Raw	B04-22535-2	13-Sep-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WTP - Treated	B04-22535-3	13-Sep-04	--	--	--	< 1 ✓	< 1 ✓
Bernard's W.R Tap	B04-22535-4	13-Sep-04	--	--	--	< 1 ✓	< 1 ✓
Ewen Gas W.R Tap	B04-22535-5	13-Sep-04	--	--	--	< 1 ✓	< 1 ✓

Dave
Sep 16/04

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

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C A D U C E O N™



ENVIRONMENTAL LABORATORIES

C.O.C.: C-00849

CERTIFICATE OF ANALYSIS

Final Report

REPORT No. B04-22535

Report To:

Ontario Clean Water Agency - Finch
 5 Industrial Dr
 Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
 2378 Holly Lane
 Ottawa Ontario K1V 7P1
 Tel: 613-526-0123
 Fax 613-526-1244

DATE RECEIVED: 13-Sep-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 15-Sep-04

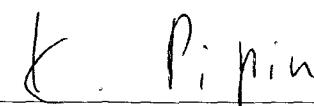
P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Heterotrophic Plate Count	Free Chlorine				
Units:	cts/1mL	mg/L				
M.D.L.:	2	0.01				
Reference Method:	MOE E3371	n/a				
Date Analyzed:	13-Sep-2004	13-Sep-2004				
Client I.D.	Sample I.D.	Date Collected				
Finch WS Well No. 1 - Raw	B04-22535-1	13-Sep-04	--	--		
Finch WS Well No. 2 (Standby) - Raw	B04-22535-2	13-Sep-04	--	--		
Finch WTP - Treated	B04-22535-3	13-Sep-04	< 2 ✓	1.44		
Bernard's W.R Tap	B04-22535-4	13-Sep-04	< 2 ✓	1.29		
Ewen Gas W.R Tap	B04-22535-5	13-Sep-04	--	1.14		

Chlorine results provided by client
 M.D.L. = Method Detection Limit


 Krystyna Pipin, M. Sc.
 Lab Supervisor

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ENVIRONMENTAL LABORATORIES

CERTIFICATE OF ANALYSIS

Final Report

C.O.C.: C-00850

REPORT No. B04-23256

Report To:**Ontario Clean Water Agency - Finch**
5 Industrial Dr

Chesterville ON K0C 1H0

Attention: Dave Markell**Caduceon Environmental Laboratories**2378 Holly Lane
Ottawa Ontario K1V 7P1

Tel: 613-526-0123

Fax 613-526-1244

DATE RECEIVED: 22-Sep-04

JOB/PROJECT: Finch WTP

DATE REPORTED: 22-Sep-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli		
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL		
M.D.L.:	1	1	1	1	1		
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407		
Date Analyzed:	20-Sep-2004	20-Sep-2004	20-Sep-2004	20-Sep-2004	20-Sep-2004		
Client I.D.	Sample I.D.	Date Collected					
Finch WS Well No. 1 - Raw	B04-23256-1	20-Sep-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WS Well No. 2 (Standby) - Raw	B04-23256-2	20-Sep-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Finch WTP - Treated	B04-23256-3	20-Sep-04	--	--	--	< 1 ✓	< 1 ✓
Smith's Garage O.S Tap	B04-23256-4	20-Sep-04	--	--	--	< 1 ✓	< 1 ✓
Maq Labs W.R Tap	B04-23256-5	20-Sep-04	--	--	--	< 1 ✓	< 1 ✓

Sept 23/04
BH

K. Pipin

Krystyna Pipin, M. Sc.

Lab Supervisor

Chlorine results provided by client

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.



CERTIFICATE OF ANALYSIS

ENVIRONMENTAL LABORATORIES

Final Report

C.O.C.: C-00850

REPORT No. B04-23256

Report To:**Ontario Clean Water Agency - Finch**
5 Industrial Dr

Chesterville ON K0C 1H0

Attention: Dave Markell**Caduceon Environmental Laboratories**
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 20-Sep-04

JOB/PROJECT NO.: Finch WTP

DATE REPORTED: 22-Sep-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210003912

	Parameter Name:	Heterotrophic Plate Count	Free Chlorine				
	Units:	cts/1mL	mg/L				
	M.D.L.:	2	0.01				
	Reference Method:	MOE E3371	n/a				
	Date Analyzed:	20-Sep-2004	20-Sep-2004				
Client I.D.	Sample I.D.	Date Collected					
Finch WS Well No. 1 - Raw	B04-23256-1	20-Sep-04	--	--			
Finch WS Well No. 2 (Standby) - Raw	B04-23256-2	20-Sep-04	--	--			
Finch WTP - Treated	B04-23256-3	20-Sep-04	< 2 ✓	1.53			
Smith's Garage O.S Tap	B04-23256-4	20-Sep-04	26 ✓	1.44			
Maq Labs W.R Tap	B04-23256-5	20-Sep-04	--	1.56			

Chlorine results provided by client
M.D.L. = Method Detection Limit
Krystyna Pipin, M. Sc.
Lab Supervisor

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SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Works #: 210003912
Project : P.O. No. 008503

OCWA-Chesterville (Finch WTP)

Friday, October 01, 2004

Attn : Dave Markell kbaker@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

Date Rec. : 28 September 2004
LR Report: CA18321-SEP04

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Copy: #1

Phone: 613-448-3098
Fax:pdf

CERTIFICATE OF ANALYSIS
Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	28-Sep-04	28-Sep-04	28-Sep-04
2: *Approved Time		--	--	16:20	16:20	16:20
3: MAC		--	--	0	0	200
4: RW Well NO. 1 Raw FW-01	27-Sep-04 08:50	19.2	---	0	0	0
5: RW Well NO. 2 Raw FW-02	27-Sep-04 08:55	19.2	---	0	0	0
6: TW WTP Treated- 20 William Street Finch FW-03	27-Sep-04 08:40	19.2	1.46	0	0	0
7: DW FW-04 St. Bernard's W.R. Tap	27-Sep-04 08:20	19.2	1.06	0	0	0
8: DW FW-05 SPS S. Tap	27-Sep-04 09:25	19.2	0.69	0	0	--

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Dave
Oct. 1/04

Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical



SGS Lakefield Research Limited
 P.O. Box 4300 - 185 Concession St.
 Lakefield - Ontario - K0L 2H0
 Phone: 705-652-2038 FAX: 705-652-6441

Finch
Works #: 210003912
Project : P.O. No. 008503

OCWA-Chesterville (Finch WTP)

Attn : Dave Markell kbaker@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
 Chesterville, ON, K0C 1H0

Thursday, October 07, 2004

Date Rec. : 05 October 2004

LR Report: CA17076-OCT04

Copy: #1

Phone: 613-448-3098
 Fax:pdf

CERTIFICATE OF ANALYSIS
Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	05-Oct-04	05-Oct-04	05-Oct-04
2: *Approved Time		--	--	11:25	11:25	11:25
3: MAC		--	--	0	0	200
4: RW Well No 1 Raw FW-01	04-Oct-04 08:05	8.6	---	0 ✓	0 ✓	1 ✓
5: RW Well No 2 Raw FW-02	04-Oct-04 08:10	8.6	---	0 ✓	0 ✓	0 ✓
6: TW WTP Treated 20 William Street Finch FW-03	04-Oct-04 08:15	8.6	1.45 ✓	0 ✓	0 ✓	0 ✓
7: DW FW-04 McEwan Gas WR Tap	04-Oct-04 07:30	8.6	0.72 ✓	0 ✓	0 ✓	0 ✓
8: DW FW-05 Arena WR Tap	04-Oct-04 07:45	8.6	1.12 ✓	0 ✓	0 ✓	--

Total and / or Free Residual chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Dave
 Oct. 7/04

Carrie Greenlaw
 Project Coordinator
 Environmental Services, Analytical



SGS Lakefield Research Limited
 P.O. Box 4300 - 185 Concession St.
 Lakefield - Ontario - K0L 2H0
 Phone: 705-652-2038 FAX: 705-652-6441

Finch WTP
Works #: 210003912

Project : P.O. No. 008503

OCWA-Chesterville (Finch WTP)

Thursday, October 14, 2004

Attn : Dave Markell kbaker@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
 Chesterville, ON, K0C 1H0

Date Rec. : 13 October 2004

LR Report: CA17452-OCT04

Copy: #1

Phone: 613-448-3098

Fax:pdf

CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	13-Oct-04	13-Oct-04	13-Oct-04
2: *Approved Time		--	--	11:20	11:20	11:20
3: MAC		--	--	0	0	200
4: RW Well No 1 Raw FW-01	12-Oct-04 07:50	14.6	---	0✓	0✓	0✓
5: RW Well No 2 Raw FW-02	12-Oct-04 08:00	14.6	---	0✓	0✓	0✓
6: TW WTP Treated 20 William Street Finch FW-03	12-Oct-04 08:05	14.6	1.5✓	0✓	0✓	0✓
7: DW FW-04 St Bernards WR Tap	12-Oct-04 07:20	14.6	1.1✓	0✓	0✓	7✓
8: DW FW-05 MQA Labs WR Tap	12-Oct-04 07:30	14.6	1.36✓	0✓	0✓	--

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Carrie Greenlaw
 Project Coordinator
 Environmental Services, Analytical

*Dave
Oct. 14/04*



SGS Lakefield Research Limited
 P.O. Box 4300 - 185 Concession St.
 Lakefield - Ontario - K0L 2H0
 Phone: 705-652-2038 FAX: 705-652-6441

Finch WTP
Works #: 210003912
Project : P.O. No. 008503

OCWA-Chesterville (Finch WTP)

Attn : Dave Markell kbaker@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
 Chesterville, ON, K0C 1H0

Thursday, October 21, 2004

Date Rec. : 19 October 2004

LR Report: CA17814-OCT04

Copy: #1

Phone: 613-448-3098

Fax:pdf

CERTIFICATE OF ANALYSIS
Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date	--	--	19-Oct-04	19-Oct-04	19-Oct-04	
2: *Approved Time	--	--	12:55	12:55	12:55	
3: MAC	--	--	0	0	0	200
4: RW Well No 1 Raw FW-01	18-Oct-04 07:30	11.8	—	0 ✓	0 ✓	0 ✓
5: RW Well No 2 Raw FW-02	18-Oct-04 07:35	11.8	—	0 ✓	0 ✓	0 ✓
6: TW WTP Treated 20 William Street Finch FW-03	18-Oct-04 07:40	11.8	1.53 ✓	0 ✓	0 ✓	0 ✓
7: DW FW-04 SPS S Tap	18-Oct-04 08:30	11.8	0.66 ✓	0 ✓	0 ✓	0 ✓
8: DW FW-05 McEwen Gas WR Tap	18-Oct-04 08:15	11.8	0.90 ✓	0 ✓	0 ✓	--

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Carrie Greenlaw
 Project Coordinator
 Environmental Services, Analytical

*Dave
Oct. 21/04*



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Works #: 210003912
Project : P.O. No. 008503

OCWA-Chesterville (Finch WTP)

Attn : Dave Markell kbaker@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Wednesday, October 27, 2004

Date Rec. : 26 October 2004

LR Report: CA18152-OCT04

Copy: #1

Phone: 613-448-3098

Fax:pdf

CERTIFICATE OF ANALYSIS Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	26-Oct-04	26-Oct-04	26-Oct-04
2: *Approved Time		--	--	11:30	11:30	11:30
3: MAC		--	--	0	0	200
4: RW Well No.1 Raw FW-01	25-Oct-04 09:00	15.4	--	0✓	0✓	0✓
5: RW Well No.2 Raw FW-02	25-Oct-04 09:15	15.4	--	0✓	0✓	0✓
6: TW WTP Treated-20 William Street Finch FW-03	25-Oct-04 09:20	15.4	1.66	0✓	0✓	0✓
7: DW FW-04 Smith Cartage O.S. Tap	25-Oct-04 08:35	15.4	1.27	0✓	0✓	0✓
8: DW FW-05 Arena W.R. Tap	25-Oct-04 08:45	15.4	1.36	0✓	0✓	--

Total and / or Free Residual chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time". as required under the SDWA, 2002.

Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical

Dave
Oct. 27/04



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Works #: 210003912
Project : P.O. No. 008503

OCWA-Chesterville (Finch WTP)

Attn : Dave Markell kbaker@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Thursday, November 04, 2004

Date Rec. : 02 November 2004
LR Report: CA17047-NOV04

Copy: #1

Phone: 613-448-3098
Fax:pdf

CERTIFICATE OF ANALYSIS Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	02-Nov-04	02-Nov-04	02-Nov-04
2: *Approved Time		--	--	11:15	11:15	11:15
3: MAC		--	--	0	0	200
4: RW Well No. 1 Raw FW-01	01-Nov-04 07:35	13.4	---	0 ✓	0 ✓	0 ✓
5: RW Well No. 2 Raw FW-02	01-Nov-04 07:30	13.4	---	0 ✓	0 ✓	0 ✓
6: TW WTP Treated-20 William Street Finch FW-03	01-Nov-04 07:45	13.4	1.45 ✓	0 ✓	0 ✓	0 ✓
7: DW FW-04 MQA Labs WR Tap	01-Nov-04 08:05	13.4	1.48 ✓	0 ✓	0 ✓	0 ✓
8: DW FW-05 McEwen Gas WR Tap	01-Nov-04 08:15	13.4	1.05 ✓	0 ✓	0 ✓	---

Total and / or Free Residual chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Dave
Nov 4/04

Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Finch
Works #: 210003912
Project : P.O. No. 008503

OCWA-Chesterville (Finch WTP)

Attn : Dave Markell kbaker@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Wednesday, November 10, 2004

Date Rec. : 09 November 2004
LR Report: CA17426-NOV04

Copy: #1

Phone: 613-448-3098
Fax:pdf

CERTIFICATE OF ANALYSIS Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	09-Nov-04	09-Nov-04	09-Nov-04
2: *Approved Time		--	--	12:10	12:10	12:10
3: MAC		--	--	0	0	200
4: RW Well No 1 Raw FW-01	08-Nov-04 07:35	8.8	--	0 ✓	0 ✓	0 ✓
5: RW Well No 2 Raw FW-02	08-Nov-04 07:40	8.8	--	0 ✓	0 ✓	0 ✓
6: TW WTP Treated 20 William Street Finch FW-03	08-Nov-04 07:45	8.8	1.52 ✓	0 ✓	0 ✓	0 ✓
7: DW FW-04 St Bernards WR Tap	08-Nov-04 08:10	8.8	0.96 ✓	0 ✓	0 ✓	0 ✓
8: DW FW-05 SPS #1 S Tap	08-Nov-04 08:25	8.8	1.09 ✓	0 ✓	0 ✓	--

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time". as required under the SDWA, 2002.


Carrie Greentlaw
Project Coordinator
Environmental Services, Analytical

Nov
Nov 10



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Finch WTP
Works #: 210003912
Project : P.O. No. 008503

OCWA-Chesterville (Finch WTP)

Attn : Dave Markell kbaker@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Thursday, November 18, 2004

Date Rec. : 16 November 2004
LR Report: CA17751-NOV04

Copy: #1

Phone: 613-448-3098
Fax:pdf

CERTIFICATE OF ANALYSIS Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	16-Nov-04	16-Nov-04	16-Nov-04
2: *Approved Time		--	--	11:00	11:00	11:00
3: MAC		--	--	0	0	200
4: RW Well No. 1 Raw FW-01	15-Nov-04 08:00	12.2	---	0 ✓	0 ✓	0 ✓
5: RW Well No. 2 Raw FW-02	15-Nov-04 08:05	12.2	---	0 ✓	0 ✓	0 ✓
6: TW WTP Treated - 20 William Street Finch FW-03	15-Nov-04 08:10	12.2	1.63 ✓	0 ✓	0 ✓	0 ✓
7: DW FW-04 St. Bernards W.R. Tap	15-Nov-04 07:40	12.2	0.92 ✓	0 ✓	0 ✓	0 ✓
8: DW FW-05 MAQ Labs W.R. Tap	15-Nov-04 07:45	12.2	1.64 ✓	0 ✓	0 ✓	---

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time". as required under the SDWA, 2002.

Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical

Dave
Nov 18/04



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Finch WTP
Works #: 210003912
Project : P.O. No. 008503

OCWA-Chesterville (Finch WTP)

November 25, 2004

Attn : Dave Markell kball@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

Date Rec. : 23 November 2004

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

LR Report: CA18097-NOV04

Copy: #1

Phone: 613-448-3098
Fax:pdf

CERTIFICATE OF ANALYSIS
Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	23-Nov-04	23-Nov-04	23-Nov-04
2: *Approved Time		--	--	11:20	11:20	11:20
3: MAC		--	--	0	0	200
4: RW Well No. 1 Raw FW-01	22-Nov-04 07:40	12.6	---	0✓	0✓	0✓
5: RW Well No. 2 Raw FW-02	22-Nov-04 07:45	12.6	---	0✓	0✓	0✓
6: TW WTP Treated - 20 William Street Finch FW-03	22-Nov-04 07:50	12.6	1.36	0✓	0✓	0✓
7: DW FW04 Smith Cartage OS Tap	22-Nov-04 08:00	12.6	0.90	0✓	0✓	0✓
8: DW FW05 Arena WR Tap	22-Nov-04 08:40	12.6	1.05	0✓	0✓	---

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Dave
Nov 26/04

Kimberley Didsbury,
Project Coordinator
Environmental Services, Analytical

ACCHUTEST LABORATORIES LTD

REPORT OF ANALYSIS

Client: OCWA Chesterville
5 Industrial Drive
Chesterville, ON
K0C 1H0
Attention: Dave

Report Number: 2423113
Date: 2004-11-30
Date Submitted: 2004-11-29

Project: Finch Wells

		P.O. Number:		Water	
		Matrix:		GUIDELINE	
				MOE REG 170/03	
PARAMETER		UNITS	MDL	TYPE	LIMIT
Total Coliforms	LAB ID: 358460	cf/100mL	0	MAC	0
Escherichia Coli	Sample Date: 2004-11-29	cf/100mL	0	MAC	0
Background Colonies	Sample ID: FW-003 Tower Contents	cf/100mL	0	MAC	200

Tower Content 1000
Tower D100
Dec 1/04

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration Comment:



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Works #: 210003912
Project : P.O. No. 008503

OCWA-Chesterville (Finch WTP)

Attn : Dave Markell kball@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Phone: 613-448-3098
Fax:pdf

Wednesday, December 01, 2004

Date Rec. : 30 November 2004
LR Report: CA18469-NOV04

Copy: #1

CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	30-Nov-04	30-Nov-04	30-Nov-04
2: *Approved Time		--	--	13:10	13:10	13:10
3: MAC		--	--	0	0	200
4: RW Well No. 1 Raw FW-01	29-Nov-04 08:25	11.2	---	1 ✓	0 ✓	0 ✓
5: RW Well No. 2 Raw FW-02	29-Nov-04 08:10	11.2	---	1 ✓	0 ✓	0 ✓
6: TW WTP Treated-20 William Street Finch FW-03	29-Nov-04 08:20	11.2	1.51 ✓	0 ✓	0 ✓	0 ✓
7: DW FW-04 McEwen Gas WR Tap	29-Nov-04 07:30	11.2	0.85 ✓	0 ✓	0 ✓	0 ✓
8: DW FW-05 SPS S Tap	29-Nov-04 07:55	11.2	0.47 ✓	0 ✓	0 ✓	--

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Dave
Dec 2/04

Carrie Greenlaw
Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Works #: 210003912
Project : P.O. No. 008503

OCWA-Chesterville (Finch WTP)

Attn : Dave Markell kball@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Phone: 613-448-3098
Fax: pdf

Wednesday, December 08, 2004

Date Rec. : 07 December 2004
LR Report: CA17134-DEC04

Copy: #1

CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	07-Dec-04	07-Dec-04	07-Dec-04
2: *Approved Time		--	--	10:45	10:45	10:45
3: MAC		--	--	0	0	200
4: RW Well No. 1 Raw FW-01	06-Dec-04 07:50	9.6	--	11	0	1
5: RW Well No. 2 Raw FW-02	06-Dec-04 07:55	9.6	--	0	0	0
6: TW WTP Treated-20 William Street Finch FW-03	06-Dec-04 08:00	9.6	1.56	0	0	0
7: DW FW-04 St. Bernard's W.R. Tap	06-Dec-04 08:25	9.6	1.09	0	0	0
8: DW FW-05 McEwen Gas W.R. Tap	06-Dec-04 08:35	9.6	0.83	0	0	--

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.
*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Dave
Dec 8/04

Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Works #: 210003912
Project : P.O. No. 008503

OCWA-Chesterville (TW-TP)

Thursday, December 16, 2004

Attn : Dave Markell kball@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

Date Rec. : 14-Dec-04

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

LR Report: CA17450-DEC04

Copy: #1

Phone: 613-448-3098
Fax:pdf

CERTIFICATE OF ANALYSIS Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	14-Dec-04	14-Dec-04	14-Dec-04
2: *Approved Time		--	--	11:15	11:15	11:15
3: MAC		--	--	0	0	200
4: RW Well No. 1 Raw FW-01	13-Dec-04 08:25	6.4	---	0 ✓	0 ✓	0 ✓
5: RW Well No. 2 Raw FW-02	13-Dec-04 08:10	6.4	---	0 ✓	0 ✓	0 ✓
6: TW WTP Treated-20 William Street Finch FW-03	13-Dec-04 08:35	6.4	---	0 ✓	0 ✓	0 ✓
7: DW FW-04 Maq Labs W.R Tap	13-Dec-04 07:50	6.4	---	0 ✓	0 ✓	0 ✓
8: DW FW-05 Arena W.R. Tap	13-Dec-04 08:00	6.4	---	0 ✓	0 ✓	0 ✓

Total and / or Free Residual chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Dave
Dec 17

Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Works #: 210003912
Project : P.O. No. 008503

OCWA-Chesterville [REDACTED]

Wednesday, December 22, 2004

Attn : Dave Markell kball@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Date Rec. : 21 December 2004
LR Report: CAWWRD-0,EC04

Copy: #1

Phone: 613-448-3098
Fax:pdf

CERTIFICATE OF ANALYSIS Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	21-Dec-04	21-Dec-04	21-Dec-04
2: *Approved Time		--	--	11:10	11:10	11:10
3: MAC		--	--	0	0	200
4: RW Well No. 1 Raw FW-01	20-Dec-04 07:00	4.8	---	0	0	0
5: RW Well No. 2 Raw FW-02	20-Dec-04 07:05	4.8	---	0	0	0
6: TW WTP Treated-20 William Street Finch FW-03	20-Dec-04 07:10	4.8	---	0	0	0
7: DW FW-04 McEwen Gas WR Tap	20-Dec-04 07:30	4.8	---	0	0	0
8: DW FW-05 SPS #1 S Tap	20-Dec-04 08:05	4.8	---	0	0	0

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical

Dave
Dec 23/04



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Works #: 210003912
Project : P.O. No. 008503

OCWA-Chesterville (Finch WTP)

Friday, December 31, 2004

Attn : Dave Markell kball@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

Date Rec. : 30 December 2004

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

LR Report: CA18136-DEC04

Copy: #1

Phone: 613-448-3098

Fax:pdf

CERTIFICATE OF ANALYSIS
Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	30-Dec-04	30-Dec-04	30-Dec-04
2: *Approved Time		--	--	11:45	11:45	11:45
3: MAC		--	--	0	0	200
4: RW Well No. 1 Raw FW-01	29-Dec-04 07:40	9.0	---	0 ✓	0 ✓	0 ✓
5: RW Well No. 2 Raw FW-02	29-Dec-04 07:50	9.0	---	0 ✓	0 ✓	0 ✓
6: TW WTP Treated-20 William Street Finch FW-03	29-Dec-04 08:00	9.0	1.53 ✓	0 ✓	0 ✓	0 ✓
7: DW FW-04 Smiths Cartage OS Tap	29-Dec-04 08:20	9.0	1.24 ✓	0 ✓	0 ✓	0 ✓
8: DW FW-05 McEwen Gas WR Tap	29-Dec-04 08:30	9.0	0.96 ✓	0 ✓	0 ✓	---

Total and / or Free Residual chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Dave
12/31/04
M

Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical

TO		539357	
ADDRESS		DATE Feb 19 / 4	
SHIP TO		FOR	
QUANTITY	PLEASE SUPPLY	DATE REQUIRED	PRICE
1	TRANSFER of 8 CARBOYS		AMOUNT
2	Sodium Hypo from Finch		
3	WTP to Cressler WTP.		
4			
5	TRANSFER of 1 CARBOY		
6	Sodium Hypo from Finch		
7	WTP to MORNINGSIDE		
8			
9			

(NOT A PURCHASE ORDER)

REQUISITION

REF. NO. *Bil* ORDERED BY *F*

APPROVED BY *F*

Blueline DC 11



TRANSPORT GUILBAULT INC
1355 AVENUE SAINT-PIERRE OUEST
TEL: 416-681-0575 TÉLECOPIEUR: 416-681-9198
www.groupeguibault.com

CONSIGNATAIRE							N° CIE	N° FACTURE-PROBILL NO.
CONSIGNEE								
							01	50-B36581-9
							A PERCEVoir COLLECT	PORT PAYE PREPAID
DATE	CONNAISSEMENT - B/L	CUEILLETTE	TRANSFERT FACT.	TARIF.	ORIG.	DEST.	CATEG.	CONSOLIDATION
03022004	26285632	12151	SEC34 AP	06 09	LTL	-		PORT PAYE
EXPÉDITEUR ET ADRESSE - SHIPPER AND ADDRESS							CONSIGNATAIRE ET ADRESSE - CONSIGNEE AND ADDRESS	
BRENNTAG EX LACHINE WHSE 3000 JEAN BAPTISTE DESCHAMPS LACHINE MONTREAL							OCMA FINCH 20 WILLIAM ST. FINCH ONTARIO ON K0C1KO	
0108413								

FACTURER AUTRE QUE EXPÉDITEUR/CONSIGNATAIRE - BILL TO OTHER THAN SHIPPER/CONSIGNEE

JCT. ORIG.	TRANSPORTEUR D'ORIGINE - CONNECTING CARRIER	N° PRO	PORTION D'ORIGINE	VALEUR DÉCLARÉE	C.O.D.					
JCT. DEST.	TRANSPORTEUR DESTINATION - BEYOND CARRIER	N° PRO	PORTION DESTINATION	NOTRE PART						
QTE	DESCRIPTION	Poids-Weight	L-K	COMME-AS	L-K	CODE	TAUX-RATE	L-K	TOTAL	F/P
32	DELCAN HYPOCHLORITE BOL SUR 1 PLTE AUTRE Mat. danger. avec placard Hayon hydrauliq. /tapis de CL8 UN 1791 GR II URG TEL 514 861 1211 TAIL GATE PO 11136 COMM 1398450 TEL MICHEALS 613 448 3098 OU 613 223 0333 AVANT LIV	773K					FRT			
		Returned 32 Delcan's 1/2 left					MDP HHA CRB			
TOTAL QTE	REÇU EN BON ETAT PAR:	TOTAL Poids RÉEL	PORTÉ	UNITE D'ENVIRONNEMENT						
HRE ARRIVE	HRE DÉBUT	HRE FIN	DATE LIVRÉE 1704L		N° TPS / GST N° TVQ / PST	R-105358188 1000222522TGSS				
DÉCHARGÉ PAR	CHARGÉ PAR	LIVRÉ PAR	NB. MORCEAUX		TVH/HST	TOTAL				

AUCUNE RÉCLAMATION NE SERA ACCEPTÉE À MOINS D'AVISER AU MOMENT DE LA LIVRAISON - NO CLAIMS WILL BE ACCEPTED UNLESS NOTED AT TIME OF DELIVERY

Feb 6/04

TO	Kim - Dave		
ADDRESS	539355		
SHIP TO	DATE Apr/21/04		
QUANTITY	FOR		
DATE REQUIRED			
PLEASE SUPPLY			
1	TRANSFER ED 8 CBS		
2	OF Sodium Hypo		
3	FROM FINCH		
4	WTP'S		
5	→ CRYSTALS		
6			
7			
8			
9			
REF. NO.		ORDERED BY	
BILL			
NOT A PURCHASE ORDER			
REQUISITION			
BlueLine DC 11			

TO		DATE <u>13/05/04</u>	
ADDRESS		FOR	
SHIP TO		DATE REQUIRED	
QUANTITY	PLEASE SUPPLY	PRICE	AMOUNT
1	<i>1 Car Boley of</i>		
2	<i>Southern Htage</i>		
3	<i>To Moraine Side</i>		
4	<i>From Finch</i>		
5			
6			
7			
8			
9			
REF. NO. <u>Bul</u>		ORDERED BY	APPROVED BY

(NOT A PURCHASE ORDER)
REQUISITION

RECEIVED, SUBJECT TO THE CLASSIFICATIONS AND TARIFFS IN EFFECT ON THE DATE OF ISSUE OF THE ORIGINAL BILL OF LADING, SUBJECT TO THE RULES FOR THE CARRIAGE OF EXPRESS AND NON-CARLTON AIR MAIL, SUBJECT TO THE CONDITIONS OF CONTRACT OF TRANSPORTATION, WHICH COMPANY AGREES TO CARRY TO ITS USUAL PLACE OF DELIVERY AT SAID DESTINATION, IF ON ITS ROAD, OTHERWISE TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION.

REÇU SOUS RESERVE DES CLASSIFICATIONS ET TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONNAISSEMENT ORIGINAL, DU POIDS RESERVE DES RÈGLEMENTS RÉGISANT LE TRANSPORT DES MESSAGERIES ET MARCHANDISES DE DÉTACHESSES TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONTRAT DE TRANSPORT (CONNAISSEMENT), LES MARCHANDISES DÉSIGNÉES CI-DESSOUS, APPARENNENT EN BON ÉTAT, SAUF LES REMARQUES FAITES DANS LA PRÉSENTE (LE CONTENU ET L'ETAT DU CONTENU DES COLIS ÉTAIENT INCONNU), MAIS QUI SONT CONSIGNÉES TEL QUINIDIQUE CI-DESSOUS, ET QUE LA COMPAGNIE S'ENGAGE À TRANSPORTER À DESTINATION À BON LIEN HABITUEL DE LIVRAISON, POURVU QU'ELLE DESTINATION SOIT SUR SON PARCOURS, SINON À LES LIVRER À UN AUTRE TRANSPORTEUR FAISANT ROUTE VERS CETTE DESTINATION.

CONSIGNEE / DESTINATAIRE SHIPPER / EXPÉDITEUR	Lachine Warehouse Brenntag Canada Inc.
STREET ADDRESS / ADRESSE EN RUE / DESTINATION PROVINCE OR STATE / PROVINCE OU ÉTAT	3000 Jean Baptiste Deschamps Lachine, PQ H8T 1E2 Canada
POINT OF ORIGIN / POINT D'EXPÉDITION Lachine, QC, Canada	CUSTOMER ORDER NO. VERBAL
CARRIER NAME / NOM DU TRANSPORTEUR LE GROUPE GUILBAULT LTD.	ORDER NO. 1438889
TRANSPORTATION MODE / MODE DE TRANSPORT Less Than Truck Load	ITEM NUMBER CONSOLIDATED B/L NO. CONNAISSANCE CONS.
ROUTING / ITINÉRAIRE	DATE SHIPPED DATE EXPÉDIÉ LE 29.06.2004
NO. AND DESCRIPTION OF PACKS NBRE ET DESCRIPTION DE COLIS	VEHICLE T/C NO. / MARQUE DU WAGON 45328363
D.G.	PAGE NO. PAG. DE PAGE
DESCRIPTION OF ARTICLES AND SPECIAL MARKS DESCRIPTION DES ARTICLES ET INDICATIONS SPÉCIALES	
1.00 each	KILOGRAMS
32.00 DELCAN	KILOGRAMS
X Pallet Wooden Returnable	
X HYPOCHLORITE SOLUTIONS, CLASS 8. UN1791. PK GP II SODIUM HYPO10.8% (12% TR) DCN RET18.9L NSF	
TOTAL WEIGHT 773 KILOGRAMS	
Return 15 m T 15 . Fruct .	
***** CAMION AVEC TAIL GATE REQUIS *****	
***** COMMUNIQUE AVEC BILL MICHEALS AU 1-613-448-3098 OU LE 1-613-223-0333	
***** AVANT LA LIVRAISON	

E 1 Pallet	
ERAP 2-0985 AND 24 HOUR NUMBER: 514-861-1211	

GROSS BRUT	TOTAL NO. OF PIECES/PKGS. NBRE TOTAL DE COLIS	THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, MARKED AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION, ACCORDING TO THE APPLICABLE REGULATIONS OF THE TRANSPORTATION OF DANGEROUS GOODS ACT, 1992.
TARE	IF CHARGES ARE TO BE PREPAID WRITE OR STAMP HERE "TO BE PREPAID" INDIQUEZ IC SI L'ENVOI SE FAIT EN "PORT-PAYE"	
NET	PREPAID	LA PRÉSENTE CERTIFIE QUE LES MATIÈRES CI-DESSUS MENTIONNÉES SONT PROPREMMENT CLASSIFIÉES, DÉCRITES, IDENTIFIÉES ET ÉTIQUETÉES, ET QU'ELLES SONT EN BON ÉTAT POUR LE TRANSPORT CONFORMEMENT AUX RÈGLEMENTS ADOPTÉS EN VERTU DE LA LOI SUR LE TRANSPORT DES MARCHANDISES DANGEREUSES (1992).
		DECLARED VALUE OF SHIPMENT VALEUR DÉCLARÉE

FORWARD INVOICE FOR PREPAID FREIGHT
QUOTING OUR B/L NO. TO:
RE SUIVER FACTURE POUR EXPÉDITION PORT
EN RÉFÉRANT À NOTRE NUMÉRO DE
TVA:

BRENNAG CANADA INC.
2900 JEAN BAPTISTE DESCHAMPS
LACHINE, PQ H8T 1C8

MAXIMUM LIABILITY FOR LOSS OR DAMAGE:
\$2.00 PER POUND OR \$4.41 PER KILOGRAM
UNLESS DECLARED VALUE STATES OTHERWISE.

RESPONSABILITY MAXIMALE POUR Perte OU DOMMAGE:
2 \$ LA LIVRE OU 4.41 \$ LE KILO, SAUF STIPULATION AU CONTRAIRE PAR LA VALEUR DÉCLARÉE.

SHIPPER / EXPÉDITEUR
Brenntag Canada Inc.

AGENT

DESTINATAIRE/CONSIGNEE

PER
PAR

PER
PAR

4 MEMORANDUM
MÉMORANDUM

THESE PRODUCTS ARE SOLD AND SHIPPED IN
ACCORDANCE WITH THE CONDITIONS ON THE
REVERSE SIDE OF THIS DOCUMENT

CES PRODUITS SONT VENDUS ET
EXPÉDIÉS CONFORMEMENT AUX CONDITIONS
APPARAÎSSANT AU VERSO DE LA PRÉSENTE

REQUISITION
(NOT A PURCHASE ORDER)

539362

TO

Elkay

DATE

June 9/04

ADDRESS

FOR

SHIP TO

DATE REQUIRED

QUANTITY

PLEASE SUPPLY

PRICE

AMOUNT

1	1	Sodium Hypo 20L	10		
2	1	Sodium Hypo 20L	10		
3	1	Sodium Hypo 20L	10		
4					
5					
6					
7					
8					
9					
REF. NO.	ORDERED BY	APPROVED BY			

539364

June 25/04

Whom it may concern

FOR

DATE REQUIRED

AMOUNT

PRICE

PLEASE SUPPLY

TO	SHIP TO	QUANTITY	DESCRIPTION	PRICE	AMOUNT
		1	6 → CRYSLER		
		2	1 → MC		
		3			
		4			
		5			
		6			
		7			
		8			
		9			

REQUISITION
(NOT A PURCHASE ORDER)

APPROVED BY

John Smith
ORDERED BY

REF. NO.

Blueline DC 11

TO		Morningside		DATE	July 28/64	
ADDRESS				FOR		
SHIP TO				DATE REQUIRED		
QUANTITY	PLEASE SUPPLY		PRICE	AMOUNT		
1	Moved	1	Deliver from			
2	Finch	→	Morningside			
3	Sodium	Hypo				
4						
5						
6						
7						
8						
9						
REF. NO.	ORDERED BY		APPROVED BY			
	John					

(NOT A PURCHASE ORDER)

REQUISITION

© BlueLine DC 11

248903

DATE July 28/04

Lancaster ORC

TO
ADDRESS

SHIP TO
FOR
DATE REQUIRED

PRICE
AMOUNT

PLEASE SUPPLY

QUANTITY	ITEM	DESCRIPTION	PRICE	AMOUNT
1	1	Decan from Finch		
2		→ Lancaster Sodium Hypo.		
3				
4				
5				
6				
7				
8				
9				

APPROVED BY

John

REF. NO.

Blueline® DC 11

248903

TO Lancaster ORC

DATE July 28/04

ADDRESS

SHIP TO

FOR

DATE REQUIRED

(NOT A PURCHASE ORDER)

QUANTITY	PLEASE SUPPLY	PRICE	AMOUNT
1	Moved 1 Delcan from Finch → Lancaster	\$ 25.12	<u><u> </u></u>
2			
3			
4			
5			
6			
7			
8			
9			

TO Lancaster ORC

248908

ADDRESS

DATE Sept 23/04

SHIP TO

FOR

(NOT A PURCHASE ORDER)

QUANTITY	PLEASE SUPPLY	PRICE	AMOUNT
1	Moved 1 Delcan of Sodium Hypo to Lancaster from Finch	\$ 25.12	<u><u> </u></u>
2			
3			
4			
5			
6			
7			
8			
9			

TO Lancaster ORC

248906

ADDRESS

DATE Aug 30/04

SHIP TO

FOR

(NOT A PURCHASE ORDER)

QUANTITY	PLEASE SUPPLY	PRICE	AMOUNT
1	Moved 1 Delcan of Sodium Hypo from Finch.	\$ 25.12	
2			
3			
4			
5			
6			
7			
8			
9			

REF. NO.

Tom

ORDERED BY

APPROVED BY

248904

TO	Morningside		
ADDRESS			
SHIP TO			
DATE REQUIRED			
QUANTITY	PLEASE SUPPLY	PRICE	AMOUNT
1	Moved 1 Delcon from Finch → Morningside i Sodium Hypo		25.12
2			
3			
4			
5			
6			
7			
8			
9			
REF. NO.	ORDERED BY	APPROVED BY	
<i>Jon</i>			

 Blueline DC 11

248907

TO	Morningside		
ADDRESS			
SHIP TO			
DATE REQUIRED			
QUANTITY	PLEASE SUPPLY	PRICE	AMOUNT
1	Moved 1 Delcon of Sodium Hypo to Morningside from Finch -		25.12
2			
3			
4			
5			
6			
7			
8			
9			
REF. NO.	ORDERED BY	APPROVED BY	
<i>Jon</i>			

 Blueline DC 11

RECEIVED, SUBJECT TO THE CLASSIFICATIONS AND TARIFFS IN EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL BILL OF LADING, OR RECEIVED, SUBJECT TO THE RULES FOR THE CARRIER, WHICH HAVE AN EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL SHIPPING CONTRACT (BILL OF LADING), GOODS DESCRIBED BELOW, IN APPARENT GOOD ORDER, EXCEPT AS NOTED (CONTENTS AND CONDITIONS OF PACKAGES), AND DESTINED AS INDICATED BELOW, WHICH SAID COMPANY AGREES TO CARRY TO ITS USUAL PLACE OF DELIVERY AT SAID DESTINATION, IF ON ITS ROAD, OTHERWISE TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION.

REÇU SOUS RÉSERVE DES DÉCLASSIFICATIONS ET TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONNAISSANCEMENT ORIGINAL, OU SOUS RÉSERVE DES RÈGLEMENTS RÉGISANT LE TRANSPORT DES MESSAGERIES ET MARCHANDISES, DÉCLASSEES, APPAREMENT EN BON ÉTAT, SAUF LES REMARQUES FAITES DANS LA PRÉSENTE DOCUMENTATION, ET DESTINÉES À SAUSSEZ, MARQUÉES ET CONSIGNÉES TEL QU'INDIQÜÉ CI-DESSOUS, ET QUE LA COMPAGNIE S'ENGAGE À TRANSPORTER À DESTINATION À SON LIEU HABITUEL DE LIVRAISON, POURvu que celle-ci soit dans le cas où la compagnie n'aurait pas à la livrer à un autre transporteur faisant route vers cette destination.

CONSIGNEE DESTINATAIRE FINCH WTP	SHIPPER / EXPÉDITEUR Brenntag Canada Inc.
STREET ADDRESS ADRESSE (C/RUE) 20 WILLIAM STREET FINCH, ON K0C 1K0 Canada	STREET ADDRESS ADRESSE (C/RUE) 19300 Jean Baptiste Deschamps Lachine, PQ H8T 1E2 Canada
POINT OF ORIGIN / POINT D'EXPÉDITION Lachine, PQ	CUSTOMER ORDER NO. N° DE COMMANDE DU CLIENT 1411136
CARRIER NAME / NOM DU TRANSPORTEUR LE GROUPE GUILBAULT LTD.	REQUIRED / DEMANDEE 11:51 1 JAP 2014 DISO
TRANSPORTATION MODE / MODE DE TRANSPORT Less Than Truck Load	DATE SHIPPED 11:51 1 JAP 2014 DISO
ROUTING / ITINÉRAIRE	INVOICE TO/BUYER/FACTURE À / ACHETEUR OCWA
NO. AND DESCRIPTION OF PACKS NOMBRE ET DESCRIPTION DE COLIS D.G.	DESCRIPTION OF ARTICLES AND SPECIAL MARKS DESCRIPTION DES ARTICLES ET INDICATIONS SPÉCIALES
32.00 DELCAN	X HYPOCHLORITE SOLUTIONS. CLASS 8. UN1791. PK GP I SODIUM HYPO10.8% (12% TR) DCN RET18.9L NSF
TOTAL WEIGHT 87183.1 KG 87183.1 KILOGRAMS	
***** * *** CAMION AVEC TAIL GATE REQUIS * 87183 COMMUNIQUE AVEC BILL MICHEALS AU 1-613-448-3098 OU LE 1-613-223-0333 * AVANT LA LIVRAISON *****	
ERAP 2-0985 AND 24 HOUR NUMBER: 514-861-1211	

GROSS BRUT	TOTAL NO. OF PIECES/PKGS. NOMBRE TOTAL DE COLIS	THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, MARKED AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION, ACCORDING TO THE APPLICABLE REGULATIONS OF THE TRANSPORTATION OF DANGEROUS GOODS ACT, 1992.
TARE	IF CHARGES ARE TO BE PREPAID WRITE OR STAMP HERE "TO BE PREPAID" INDIQUER ICI SI L'ENVOI SE FAIT EN "PORT-PAYÉ"	
NET	PREPAID	LA PRÉSENTE CERTIFIE QUE LES MATIÈRES CI-DESSUS MENTIONNÉES SONT PROPREMMENT CLASSIFIÉES, DÉCRITES, IDENTIFIÉES ET ÉTIQUETÉES, ET QU'ELLES SONT EN BON ÉTAT POUR LE TRANSPORT CONFORMÉMENT AUX RÈGLEMENTS ADOPTÉS EN VERTU DE LA LOI SUR LE TRANSPORT DES MARCHANDISES DANGEREUSES (1992).
		DECLARED VALUE OF SHIPMENT Valeur déclarée

REV. (22/00)
FORWARD INVOICE FOR PREPAID FREIGHT
QUOTING OUR B/L NO. TO:
SUIVEZ LA FACTURE POUR EXPÉDITION PORT
EN RÉFÉRANT À NOTRE NUMÉRO DE

BRENNAG CANADA INC.
2900 JEAN BAPTISTE DESCHAMPS
LACHINE, PQ H8T 1E2

MAXIMUM LIABILITY FOR LOSS OR DAMAGE:
\$2.00 PER POUND OR \$4.41 PER KILOGRAM
UNLESS DECLARED VALUE STATES OTHERWISE.

RESPONSABILITY MAXIMALE POUR Perte OU DOMMAGE:
2 \$ LA LIVRE OU 4.41 \$ LE KILO, SAUF STIPULATION AU CONTRAIRE PAR LA VALEUR DÉCLARÉE.

SHIPPER / EXPÉDITEUR Brenntag Canada Inc.	AGENT <i>J. Herde</i>	DESTINATAIRE/CONSIGNEE
PER PAR <i>Herde</i>	PER PAR	PER PAR

RECEIVED, SUBJECT TO THE CLASSIFICATIONS AND TARIFFS IN EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL BILL OF LADING, OR, RECEIVED, SUBJECT TO THE RULES FOR THE CARRIAGE OF EXPRESS AND NON-CARLOAD FREIGHT TRAFFIC AND TARIFFS IN EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL SHIPPING CONTRACT (BILL OF LADING), GOODS DESCRIBED BELOW, IN APPARENT GOOD ORDER, EXCEPT AS NOTED (CONTENTS AND CONDITIONS OF CONTENTS OF PACKAGES UNKNOWN), MARKED, CONSIGNIED AND DESTINED AS INDICATED BELOW, WHICH SAID COMPANY AGREES TO CARRY TO ITS USUAL PLACE OF DELIVERY AT SAID DESTINATION, IF ON ITS ROAD, OTHERWISE TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION.

REÇU SOUS RÉSERVE DES CLASSIFICATIONS ET TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONNAISSEMENT ORIGINAL, OU SOUS RÉSERVE DES RÈGLEMENTS RÉGISANT LE TRANSPORT DES MESSAGERIES ET MARCHANDISES DE DÉTAIL ET DES TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONTRAT DE TRANSPORT (CONNAISSEMENT), LES MARCHANDISES DÉSIGNÉES CI-DESSOUS, APPAREMMENT EN BON ÉTAT, SAUF LES REMARQUES FAITES DANS LA PRÉSENTE (LE CONTENU ET L'ÉTAT DU CONTENU DES COUPS ETANT INCONNUS), MARQUÉES ET CONSIGNÉES TEL QU'INDIQUE CI-DESSOUS, ET QUE LA COMPAGNIE S'ENGAGE À TRANSPORTER À DESTINATION À SON LIEU HABITUEL DE LIVRAISON, POURVU QUE TELLE DESTINATION SOIT SUR SON PARCOURS, SINON À LES LIVRER À UN AUTRE TRANSPORTEUR FAISANT ROUTE VERS CETTE DESTINATION.

CONSIGNEE DESTINATAIRE ADDRESS ADRESSE (N° RUE) DESTINATION PROVINCE OR STATE PROVINCE OU ÉTAT	OCWA FINCH WTP 20 WILLIAM STREET FINCH, ON K0C 1K0 Canada	SHIPPER EXPÉDITEUR STREET ADDRESS ADRESSE (N° RUE) DESTINATION PROVINCE OR STATE PROVINCE OU ÉTAT	Lachine Warehouse Brenntag Canada Inc. 3000 Jean Baptiste Deschamps Lachine, PQ H8T 1E2 Canada
POINT OF ORIGIN / POINT D'EXPÉDITION Lachine	PQ	CUSTOMER ORDER NO. N° DE COMMANDE DU CLIENT 13905	ORDER NO. N° DE COMMANDE 1427328
CARRIER NAME / NOM DU TRANSPORTEUR LE GROUPE GUILBAULT LTD.		REQUIRED / DEMANDÉE	DATE SHIPPED EXPÉDIÉ LE 26.05.2004
TRANSPORTATION MODE / MODE DE TRANSPORT Less Than Truck Load	INVOICE TO/BUYER-FACTURE / ACHETEUR OCWA	VEHICLE T/C NO. / MARQUE DU WAGON 45328363	
ROUTING / ITINÉRAIRE D.G	PAGE NO. N° DE PAGE 1		
NO. AND DESCRIPTION OF PACKS NOMBRE ET DESCRIPTION DE COLIS DESCRIPTION OF ARTICLES AND SPECIAL MARKS DESCRIPTION DES ARTICLES ET INDICATIONS SPÉCIALES ARTICLE WEIGHT Poids - Poids			
1.00 each	PALLET WOODEN RETURNABLE	0 KILOGRAMS	
32.00 DELCAN	X HYPOCHLORITE SOLUTIONS. CLASS 8. UN1791. PK GP II SODIUM HYPO10.8%(12% TR)DCN RET18.9L NSF	773 KILOGRAMS	
TOTAL WEIGHT 773 KILOGRAMS			
***** CAMION AVEC TAIL GATE REQUIS *****			
* COMMUNIQUE AVEC BILL MICHEALS AU 1-613-448-3098 OU LE 1-613-223-0333 * AVANT LA LIVRAISON			
***** 24 st to Finch 3 to Cryplex ERAP 2-0985 AND 24 HOUR NUMBER: 514-861-1211			
GROSS BRUT	TOTAL NO. OF PIECES/PKG'S. NBRE TOTAL DE COLIS	THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, MARKED AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION, ACCORDING TO THE APPLICABLE REGULATIONS OF THE TRANSPORTATION OF DANGEROUS GOODS ACT, 1992.	
TARE	IF CHARGES ARE TO BE PREPAID WRITE OR STAMP HERE "TO BE PREPAID" INDIQUER ICI SI L'ENVOI SE FAIT EN "PORT-PAYE"		
NET	PREPAID	LA PRÉSENTE CERTIFIE QUE LES MATIÈRES CI-DESSUS MENTIONNÉES SONT PROPREMMENT CLASSIFIÉES, DÉCRITES, IDENTIFIÉES ET ÉTIQUETÉES, ET QU'ELLES SONT EN BON ÉTAT POUR LE TRANSPORT CONFORMÉMENT AUX RÈGLEMENTS ADOPTÉS EN VERTU DE LA LOI SUR LE TRANSPORT DES MARCHANDISES DANGEREUSES (1992).	
FORWARD INVOICE FOR PREPAID FREIGHT QUOTING OUR B/L NO. TO: FAIRE SUIVER FACTURE POUR EXPÉDITION PORT RÉFÉRANT À NOTRE NUMÉRO DE		MAXIMUM LIABILITY FOR LOSS OR DAMAGE: \$2.00 PER POUND OR \$4.41 PER KILOGRAM UNLESS DECLARED VALUE STATES OTHERWISE. RESPONSABILITÉ MAXIMALE POUR Perte OU DOMMAGE: 2 \$ LA LIVRE OU 4,41 \$ LE KILO, SAUF STIPULATION AU CONTRAIRE PAR LA VALEUR DÉCLARÉE.	
BRENNTAG CANADA INC. 2900 JEAN BAPTISTE DESCHAMPS LACHINE, PQ H8T 1C8		DECLARED VALUE OF SHIPMENT VALEUR DÉCLARÉE \$	
EXPER EXPÉDITEUR	Brenntag Canada Inc.	AGENT	DESTINATAIRE/CONSIGNÉE
PER PAR	PER PAR	PER PAR	PER PAR

RECEIVED, SUBJECT TO THE CLASSIFICATIONS AND TARIFFS IN EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL BILL OF LADING, OR RECEIVED, SUBJECT TO THE RULES FOR THE CARRIAGE OF EXPRESS AND NON-CARLOAD FREIGHT, IN EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL SHIPPING CONTRACT (BILL OF LADING), GOODS DESCRIBED BELOW, IN APPARENT GOOD ORDER, EXCEPT AS NOTED (CONTENTS AND CONDITIONS OF CONTENTS OF PACKAGES UNKNOWN), AND DESTINED AS INDICATED BELOW, WHICH SAID COMPANY AGREES TO CARRY TO ITS USUAL PLACE OF DELIVERY AT SAID DESTINATION, IF ON ITS ROAD, OTHERWISE TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION.

REÇU SOUS RÉSERVE DES CLASSIFICATIONS ET TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONNAISSEMENT ORIGINAL, OU SOUS RÉSERVE DES RÈGLEMENTS PRÉGÉSSANT LE TRANSPORT DES MESSAGERIES ET MARCHANDESSES DE DETAIL, ET DES TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DU CONTRAT DE TRANSPORT (CONNAISSEMENT), LES MARCHANDESSES DÉSIGNÉES CI-DESSUS, APPAREMMENT EN BON ÉTAT, SAUF LES REMARQUES FAITES DANS LA PRÉSENTE (LE CONTENU ET L'ÉTAT PAR CONTENU DES COLIS ÉTANT INCONNUS), MARQUÉES ET CONSIGNÉES TEL QU'INDIQUÉ CI-DESSOUS, ET QUE LA COMPAGNIE S'ENGAGE À TRANSPORTER À DESTINATION À SON LIEU HABITUEL DE LIVRAISON, POURVU QUE TELLE DESTINATION SOIT SUR SON PARCOURS, SINON À LES LIVRER À UN AUTRE TRANSPORTEUR FAISANT ROUTE VERS CETTE DESTINATION.

CONSIGNEE DESTINATAIRE	OCWA FINCH WTP	SHIPPER EXPEDITEUR	Lachine Warehouse Brenntag Canada Inc.
STREET ADDRESS ADRESSE (N° RUE)	20 WILLIAM STREET	STREET ADDRESS ADRESSE (N° RUE)	3000 Jean Baptiste Deschamps
DESTINATION	FINCH, ON	DESTINATION	Lachine, PQ
PROVINCE OR STATE PROVINCE OU ÉTAT	KOC IKO Canada	PROVINCE OR STATE PROVINCE OU ÉTAT	H8T 1E2 Canada
POINT OF ORIGIN / POINT D'EXPÉDITION	Lachine	CUSTOMER ORDER NO. N° DE COMMANDE DU CLIENT	ORDER NO. N° DE COMMANDE
CARRIER NAME / NOM DU TRANSPORTEUR	LE GROUPE GUILBAULT LTD.	11136	26343251
TRANSPORTATION MODE / MODE DE TRANSPORT	Less Than Truck Load	INVOICE TO/BUYER FACTURE À / ACHETEUR	VEHICLE T/C NO. / MARQUE DU WAGON
ROUTING / ITINÉRAIRE			45328363
NO. AND DESCRIPTION OF PACKS NBRE ET DESCRIPTION DE COLIS	D.G.	DESCRIPTION OF ARTICLES AND SPECIAL MARKS DESCRIPTION DES ARTICLES ET INDICATIONS SPÉCIALES	ACTUAL WEIGHT POIDS REEL
1.00 each	PALLET WOODEN RETURNABLE		0 KILOGRAMS
32.00 DELCAN	X HYPOCHLORITE SOLUTIONS, CLASS 8, UN1791. PK GP II SODIUM HYPO10.8%(12% TR)DCN RET18.9L NSF		773 KILOGRAMS
	TOTAL WEIGHT		773 KILOGRAMS
<p>* * * CAMION AVEC TAIL GATE REQUIS *</p> <p>* * * COMMUNIQUE AVEC BILL MICHEALS AU 1-613-448-2098 OU LE 1-613-223-0333</p> <p>* AVANT LA LIVRAISON</p> <p>*****</p>			
		<p>Seaway Express</p> <p>(613) 933-8984 www.seawayexpress.ca</p>  <p>3130072</p>	
ERAP 2-0985 AND 24 HOUR NUMBER 514-861-1211			

GROSS BRUT	TOTAL NO. OF PIECES/PKGS. NBRE TOTAL DE COLIS	THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, MARKED AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION, ACCORDING TO THE APPLICABLE REGULATIONS OF THE TRANSPORTATION OF DANGEROUS GOODS ACT, 1992.	
TARE	IF CHARGES ARE TO BE PREPAID WRITE OR STAMP HERE "TO BE PREPAID" INDIQUER ICI SI L'ENVOI SE FAIT EN "PONT-PAYÉ"		
NET	PREPAID	LA PRÉSENTE CERTIFIE QUE LES MATIÈRES CI-DESSUS MENTIONNÉES SONT PROPREMMENT CLASSIFIÉES, DÉCRITES, IDENTIFIÉES ET ÉTIQUETÉES, ET QU'ELLES SONT EN BON ÉTAT POUR LE TRANSPORT CONFORMÉMENT AUX RÈGLEMENTS ADOPTÉS EN VERTU DE LA LOI SUR LE TRANSPORT DES MARCHANDESSES DANGEREUSES (1992).	
		DECLARED VALUE OF SHIPMENT VALEUR DÉCLARÉE	\$

FORWARD INVOICE FOR PREPAID FREIGHT QUOTING OUR B/L NO. TO: SUIVEZ LA SUITE POUR EXPÉDITION PORT EN RÉFÉRANT À NOTRE NUMÉRO DE NN à:	BRENTAG CANADA INC. 2900 JEAN BAPTISTE DESCHAMPS LACHINE, PQ H8T 1C8	MAXIMUM LIABILITY FOR LOSS OR DAMAGE: \$2.00 PER POUND OR \$4.41 PER KILOGRAM UNLESS DECLARED VALUE STATES OTHERWISE.
REV. (07/00)	AGENT	RESPONSABILITÉ MAXIMALE POUR Perte OU DOMMAGE: 2 \$ LA LIVRE OU 4,41 \$ LE KILO. SAUF STIPULATION AU CONTRAIRE PAR LA VALEUR DÉCLARÉE.
SHIPPER EXPEDITEUR	Brenntag Canada Inc.	DESTINATAIRE/CONSIGNÉE
PER PAR	PER PAR	PER PAR

REQUISITION
(NOT A PURCHASE ORDER)

TO

DAVE

DATE

539365
Sept 16/04

ADDRESS

FOR

SHIP TO

DATE REQUIRED

QUANTITY	PLEASE SUPPLY	PRICE	AMOUNT
1	4 C B's		
2	front		
3	WTP		
4	to me		
5	WTP		
6			
7			
8			
9			
REF. NO.	ORDERED BY	APPROVED BY	

Blueline DC 11

RECEIVED, SUBJECT TO THE CLASSIFICATIONS AND TARIFFS IN EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL BILL OF LADING, OR, RECEIVED, SUBJECT TO THE RULES FOR THE CARRIAGE OF EXPRESS AND NON-CARLOAD FREIGHT TRAFFIC AND TARIFFS IN EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL SHIPPING CONTRACT (BILL OF LADING). GOODS DESCRIBED BELOW, IN APPARENT GOOD ORDER, EXCEPT AS NOTED (CONTENTS AND CONDITIONS OF CONTENTS OF PACKAGES UNKNOWN), MARKED, CONSIGNIED AND DESTINED AS INDICATED BELOW, WHICH SAID COMPANY AGREES TO CARRY TO ITS USUAL PLACE OF DELIVERY AT SAID DESTINATION, IF ON ITS ROAD, OTHERWISE TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION.

REÇU SOUS RÉSERVE DES CLASSIFICATIONS ET TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONNAISSEMENT ORIGINAL, OU SOUS RÉSERVE DES RÈGLEMENTS PRÉGESSANT LE TRANSPORT DES MESSAGERIES ET MARCHANDISES DE DÉTAIL ET DES TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONTRAT DE TRANSPORT (CONNAISSEMENT), LES MARCHANDISES DÉSIGNÉES CI-DESSUS, APPAREMMENT EN BON ÉTAT, SAUF LES REMARQUES FAITES DANS LA PRÉSENTE (LE CONTENU ET LIÉTAT DU CONTENU DES COLIS ETANT INCONNUS), MARQUES ET CONSIGNÉES TEL QU'INDIQÜÉ CI-DESSOUS, ET QUE LA COMPAGNIE S'ENGAGE À TRANSPORTER À DESTINATION À SON LIEU HABITUEL DE LIVRAISON, POURVU QUE TELLE DESTINATION SOIT SUR SON PARCOURS, SINON A LES LIVRER À UN AUTRE TRANSPORTEUR SUAANT ROUTE VERS CETTE DESTINATION.

CONSIGNEE DESTINATAIRE	OCWA FINCH WTP	SHIPPER EXPÉDITEUR	Lachine Warehouse Brenntag Canada Inc.
ADDRESS (N° RUE) DESTINATION	20 WILLIAM STREET FINCH. ON K0C 1K0 Canada	STREET ADDRESS ADRESSE (N° RUE) DESTINATION	3000 Jean Baptiste Deschamps Lachine, PQ H8T 1E2 Canada
POINT OF ORIGIN / POINT D'EXPÉDITION	LACHINE PQ	CUSTOMER ORDER NO. N° DE COMMANDE DU CLIENT	ORDER NO. N° DE COMMANDE
LE GROUPE GUILBAULT LTD.		VERBAL	1462722 26356505
TRANSPORTATION MODE / MODE DE TRANSPORT	Less Than Truck Load	INVOICE TO/BUYER/FACTURE À / ACHETEUR	VEHICLE T/C NO. / MARQUE DU WAGON
ROUTING / ITINÉRAIRE	OCWA		45328363 PAGE NO. N° DE PAGE
NO. AND DESCRIPTION OF PACKS NBRE ET DESCRIPTION DE COLIS : D.G.	DESCRIPTION OF ARTICLES AND SPECIAL MARKS DESCRIPTION DES ARTICLES ET INDICATIONS SPÉCIALES		ACTUAL WEIGHT POIDS REEL
32.00 DELCAN	X	HYPPOCHLORITE SOLUTIONS, CLASS 8, UN1791, PK GP II SODIUM HYPO10.8%(12% TR)DCN RET18.9L NSF	773 KILOGRAMS
TOTAL WEIGHT		773 KILOGRAMS	
***** * *** CAMION AVEC TAIL GATE REQUIS *** *****			
***** * COMMUNIQUE AVEC BILL MICHEALS AU 1-613-448-3098 OU LE 1-613-223-0333 * AVANT LA LIVRAISON *****			
ERAP 2-0985 AND 24 HOUR NUMBER: 514-861-1211			
GROSS BRUT	TOTAL NO. OF PIECES/PKGS. NBRE TOTAL DE COLIS	THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, MARKED AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION, ACCORDING TO THE APPLICABLE REGULATIONS OF THE TRANSPORTATION OF DANGEROUS GOODS ACT, 1992.	
TARE	IF CHARGES ARE TO BE PREPAID WRITE OR STAMP HERE TO BE PREPAID INDIQUER ICI SI L'ENVOI SE FAIT EN PORT-PAYÉ		
NET	PREPAID	LA PRÉSENTE CERTIFIE QUE LES MATIÈRES CI-DESSUS MENTIONNÉES SONT PROPREMENT CLASSIFIÉES, DÉCRITES, IDENTIFIÉES ET ÉTIQUETÉES, ET QU'ELLES SONT EN BON ÉTAT POUR LE TRANSPORT CONFORMEMENT AUX RÈGLEMENTS ADOPTÉS EN VERTU DE LA LOI SUR LE TRANSPORT DES MARCHANDISES DANGEREUSES (1992).	DECLARED VALUE OF SHIPMENT VALEUR DÉCLARÉE \$
FORWARD INVOICE FOR PREPAID FREIGHT QUOTING OUR B/L NO. TO: FAIRE SUIVER FACTURE POUR EXPÉDITION PORT PAYER RÉFÉRANT À NOTRE NUMÉRO DE COMMANDE		MAXIMUM LIABILITY FOR LOSS OR DAMAGE: \$2.00 PER POUND OR \$4.41 PER KILOGRAM UNLESS DECLARED VALUE STATES OTHERWISE. RESPONSABILITÉ MAXIMALE POUR Perte OU DOMMAGE: 2 \$ LA LIVRE OU 4.41 \$ LE KILO, SAUF STIPULATION AU CONTRAIRE PAR LA VALEUR DÉCLARÉE..	
SHIPPER EXPÉDITEUR	Brenntag Canada Inc.	AGENT	DESTINATAIRE/CONSIGNÉE
PER PAR	PER PAR	PER PAR	PER PAR

BRENNTAG CANADA INC.
2900 JEAN BAPTISTE DESCHAMPS
LACHINE, PQ H8T 1C8

MAXIMUM LIABILITY FOR LOSS OR DAMAGE:
\$2.00 PER POUND OR \$4.41 PER KILOGRAM
UNLESS DECLARED VALUE STATES OTHERWISE.

RESPONSABILITÉ MAXIMALE POUR Perte OU DOMMAGE:
2 \$ LA LIVRE OU 4.41 \$ LE KILO, SAUF STIPULATION AU CONTRAIRE PAR LA VALEUR DÉCLARÉE..

4 MEMORANDUM
MÉMORANDUM

THESE PRODUCTS ARE SOLD AND SHIPPED IN
ACCORDANCE WITH THE CONDITIONS ON THE
REVERSE SIDE OF THIS DOCUMENT

CES PRODUITS SONT VENDUS ET
EXPÉDIÉS CONFORMEMENT AUX CONDITIONS
APPARAÎSSANT AU VERSO DE LA PRÉSENTE.

539366

REQUISITION (NOT A PURCHASE ORDER)	TO	Dave	DATE	Oct 15/04	
	ADDRESS		FOR		
SHIP TO				DATE REQUIRED	
QUANTITY	PLEASE SUPPLY			PRICE	AMOUNT
1	8 CB's of Cl ₂ from Finch				
2	WTP delivered to				
3	Crysler WTP				
4					
5					
6					
7					
8					
9					
REF. NO.	ORDERED BY			APPROVED BY	
	<i>Bill</i>				

Blueline DC 11

539357

REQUISITION (NOT A PURCHASE ORDER)	TO	Dave	DATE	FEB 19/04	
	ADDRESS		FOR		
SHIP TO				DATE REQUIRED	
QUANTITY	PLEASE SUPPLY			PRICE	AMOUNT
1	TRANSFER of 8 CARBOYS				
2	Sodium Hypo from FINCH				
3	WTP to Crysler WTP				
4					
5	TRANSFER of 1 st CARBOY				
6	Sodium Hypo from FINCH				
7	WTP to MORNING SIDE				
8					
9					
REF. NO.	ORDERED BY			APPROVED BY	
	<i>Bill</i>			<i>CTX clone AB</i>	

Blueline DC 11

TERMS AND CONDITIONS IN EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL BILL OF LADING, OR RECEIVED, SUBJECT TO THE RULES FOR THE CARRIAGE OF EXPRESS AND NON-CARLOAD FREIGHT TRAFFIC AND TARIFFS IN OUR ORIGINAL SHIPPING CONTRACT (BILL OF LADING), GOODS DESCRIBED BELOW, IN APPARENT GOOD ORDER, EXCEPT AS NOTED (CONTENTS AND CONDITIONS OF CONTENTS OF PACKAGES UNKNOWN), MARKED, CONSIGNIED AND WHICH SAID COMPANY AGREES TO CARRY TO ITS USUAL PLACE OF DELIVERY AT SAID DESTINATION, IF ON ITS ROAD, OTHERWISE TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION.

CLASSIFICATIONS ET TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONNAISSEMENT ORIGINAL, OU SOUS RÉSERVE DES RÈGLEMENTS RÉGISANT LE TRANSPORT DES MESSAGERIES ET MARCHANDESSES DE DÉTAIL ET DES TARIFS DE DÉLIVRANCE DE CE CONTRAT DE TRANSPORT (CONNAISSEMENT), LES MARCHANDESSES DÉSIGNÉES CI-DESSOUS, APPAREMMENT EN BON ÉTAT, SAUF LES REMARQUES FAITES DANS LA PRÉSENTE (LE CONTENU ET L'ÉTAT DU CONTENU DES ANNEXES), MARQUÉES ET CONSIGNÉES TEL QU'INDIQUE CI-DESSOUS. ET QUE LA COMPAGNIE S'ENGAGE À TRANSPORTER À DESTINATION À SON LIEU HABITUEL DE LIVRAISON, POURvu QUE TELLE DESTINATION SOIT SUR SON PARCOURS, SINON A UNE AUTRE TRANSPORTEUR FAISANT ROUTE VERS CETTE DESTINATION.

OCWA FINCH WTP		Lachine Warehouse Brenntag Canada Inc.	
ADDRESS (N° RUE) DESTINATION PROVINCE OR STATE PROVINCE OU ÉTAT	20 WILLIAM STREET FINCH, ON K0C 1K0 Canada	SHIPPER EXPÉDITEUR STREET ADDRESS ADRESSE (N° RUE) DESTINATION PROVINCE OR STATE PROVINCE OU ÉTAT	3000 Jean Baptiste Deschamps Lachine, PQ H8T 1E2 Canada
POINT OF ORIGIN / POINT D'EXPÉDITION Lachine	PQ	CUSTOMER ORDER NO. N° DE COMMANDE DU CLIENT VERBAL	ORDER NO. N° DE COMMANDE 1476487
CARRIER NAME / NOM DU TRANSPORTEUR LE GROUPE GUILBAULT LTD.		REQUIRED / DEMANDEE	DATE SHIPPED EXPÉDIÉ LE 08.11.2004
TRANSPORTATION MODE / MODE DE TRANSPORT Less Than Truck Load		INVOICE TO/BUYER-FACTURE À / ACHETEUR OCWA	VEHICLE T/C NO. / MARQUE DU WAGON 45328363
ROUTING / ITINÉRAIRE		PAGE NO. N° DE PAGE 1	
NO. AND DESCRIPTION OF PACKS NOMBRE ET DESCRIPTION DE COLIS D.G.		DESCRIPTION OF ARTICLES AND SPECIAL MARKS DESCRIPTION DES ARTICLES ET INDICATIONS SPÉCIALES	ACTUAL WEIGHT POIDS REEL
32.00 DELCAN	X HYPOCHLORITE SOLUTIONS, CLASS 8, UN1791, PK GP II SODIUM HYPO10.8% (12% TR) DCN RET18.9L NSF		773 KILOGRAMS
TOTAL WEIGHT 773 KILOGRAMS			
<p>***** CAMION AVEC TAIL GATE REQUIS *****</p> <p>** NE PAS EXPEDIER SUR PALETTE **</p> <p>* COMMUNIQUE AVEC BILL MICHEALS AU 1-613-448-3098 OU LE 1-613-223-0333</p> <p>* AVANT LA LIVRAISON</p> <p>*****</p>			
ERAP 2-0985 AND 24 HOUR NUMBER: 514-861-1211			
GROSS BRUT	TOTAL NO. OF PIECES/PKG'S. NBRE TOTAL DE COLIS	THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, MARKED AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION, ACCORDING TO THE APPLICABLE REGULATIONS OF THE TRANSPORTATION OF DANGEROUS GOODS ACT, 1992.	
TARE	IF CHARGES ARE TO BE PREPAID WRITE OR STAMP HERE "TO BE PREPAID" INDICER ICI SI L'ENVOI SE FAIT EN "PORT-PAYE"		
NET	PREPAID	LA PRÉSENTE CERTIFIE QUE LES MATIÈRES CI-DESSUS MENTIONNÉES SONT PROPREMMENT CLASSIFIÉES, DÉCRITES, IDENTIFIÉES ET ÉTIQUETÉES, ET QU'ELLES SONT EN BON ÉTAT POUR LE TRANSPORT CONFORMÉMENT AUX RÈGLEMENTS ADOPTÉS EN VERTU DE LA <u>LOI SUR LE TRANSPORT DES MARCHANDESSES DANGEREUSES (1992)</u> .	
		DECLARED VALUE OF SHIPMENT VALEUR DÉCLARÉE \$ _____	
FORWARD INVOICE FOR PREPAID FREIGHT QUOTING OUR B/L NO. TO: FAIRE SUIVER FACTURE POUR EXPÉDITION PORT PAYER RÉFÉRANT À NOTRE NUMÉRO DE		BRENNAG CANADA INC. 2900 JEAN BAPTISTE DESCHAMPS LACHINE, PQ H8T 1C8	
SHIPPER EXPÉDITEUR Brenntag Canada Inc.		AGENT	DESTINATAIRE/CONSIGNÉE
PER PAR		PER PAR	PER PAR

REQUISITION
(NOT A PURCHASE ORDER)

539369

DATE Nov 29/64

TO

ADDRESS

SHIP TO

FOR

DATE REQUIRED

PLEASE SUPPLY

PRICE

AMOUNT

1 -8 CBS'S from Flicker w/1P
2 to CRYSLER corp.

REF. NO.

APPROVED BY

1			
2			
3			
4			
5			
6			
7			
8			
9			

RECEIVED, SUBJECT TO THE CLASSIFICATIONS AND TARIFFS IN EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL BILL OF LADING AS RECEIVED, SUBJECT TO THE RULES FOR THE CARRIAGE OF EXPRESS AND NON-CARLOAD FREIGHT, AND TO THE CONDITIONS OF CONTRACT OF TRANSPORTATION, EFFECTIVE ON THE DATE OF ISSUE OF THIS ORIGINAL SHIPPING CONTRACT (BILL OF LADING), GOODS DESCRIBED BELOW, IN APPARENT GOOD ORDER, EXCEPT AS NOTED (CONTENTS AND CONDITIONS OF CONTENTS OF PACKAGES UNKNOWN, MARKED, CONSIGNATED AND DESTINED AS INDICATED BELOW, WHICH SAID COMPANY AGREED TO CARRY TO ITS USUAL PLACE OF DELIVERY AT SAID DESTINATION, OR, IF ON ITS ROAD, OTHERWISE TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION).

REÇU SOUS RÉSERVE DES CLASSIFICATIONS ET TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONNAISSANCEMENT ORIGINAL. SOUS RÉSERVE DES RÈGLEMENTS RÉGULANT LE TRANSPORT DES MESSAGERIES ET MARCHANDISES, DE DÉTAIL ET DES TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONTRAT DE TRANSPORT (CONNAISSANCEMENT), LES MARCHANDISES DÉSIGNÉES CI-DESSOUS, APPAREMMENT EN BON ÉTAT, SAUF LES REMARQUES FAITES DANS LA PRÉSENTE (LE CONTENU ET L'ÉTAT DU CONTENU DES COLIS ÉTANT INCONNUS), MARQUÉES ET CONSIGNÉES TEL QU'INDIQUÉ CI-DESSOUS, ET QUE LA COMPAGNIE S'ENGAGE À TRANSPORTER À DESTINATION À SON LIEU HABITUEL DE LIVRAISON, POURVU QUE TELLE DESTINATION SOIT SUR SON PARCOURS, SINON À LES LIVRER À UN AUTRE TRANSPORTEUR FAISANT ROUTE VERS CETTE DESTINATION.

CONSIGNEE DESTINATAIRE	OCWA FINCH WTP	SHIPPER EXPEDITEUR	Lachine Warehouse Brenntag Canada Inc.
ADDRESS N° RUE	20 WILLIAM STREET FINCH, ON	STREET ADDRESS ADRESSE N° RUE	3000 Jean Baptiste Deschamps Lachine, PQ
DEPARTMENT	KOC 1K0 Canada	DESTINATION	H8T 1E2 Canada
PROVINCE OR STATE PROVINCE OU ÉTAT		PROVINCE OR STATE PROVINCE OU ÉTAT	
POINT OF ORIGIN / POINT D'EXPÉDITION	Lachine	CUSTOMER ORDER NO. N° DE COMMANDE DU CLIENT	VERBAL
CARRIER NAME / NOM DU TRANSPORTEUR	LE GROUPE GUILBAULT LTD.	REQUIRED / DEMANDEE	DATE SHIPPED EXPÉDIE LE
TRANSPORTATION MODE / MODE DE TRANSPORT	Less Than Truck Load	INVOICE TO/BUYER FACTURE À ACHETEUR	VEHICLE/C NO. / MARQUE DU WAGON
ROUTING / ITINÉRAIRE		OCWA	PAGE NO. N° DE PAGE
NO. AND DESCRIPTION OF PACKS NOMBRE ET DESCRIPTION DE COLIS	D.G.	DESCRIPTION OF ARTICLES AND SPECIAL MARKS DESCRIPTION DES ARTICLES ET INDICATIONS SPÉCIALES	ACTUAL WEIGHT POIDS RÉEL

32.00 DELCAN	X HYPOCHLORITE SOLUTIONS, CLASS 8, UN1791, PK GP II SODIUM HYPO 10.8% (12% TR) DCN RET 18.9L NSF	773 KILOGRAMS
	TOTAL WEIGHT	773 KILOGRAMS
	***** CAMION AVEC TAIL GATE REQUIS *****	
	***** NE PAS EXPEDIER SUR PALETTE*****	
	COMMUNIQUE AVEC BILL MICHEALS AU 1-613-448-3098 OU LE 1-613-223-0333 AVANT LA LIVRAISON	
	LIVRAISON LE 9 DEC 2004	
	DELIVERY FOR DEC 9, 2004	
	ERAP 2-0985 AND 24 HOUR NUMBER 514-861-1211	

GROSS BRUT	TOTAL NO. OF PIECES/PKGs. NOMBRE TOTAL DE COLIS	THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, MARKED AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION, ACCORDING TO THE APPLICABLE REGULATIONS OF THE TRANSPORTATION OF DANGEROUS GOODS ACT, 1992.
TARE	IF CHARGES ARE TO BE PREPAID WRITE OR STAMP HERE TO BE PREPAID INDICER ICI SI L'ENVOI SE FAIT EN "PORT-PAYÉ"	LA PRÉSENTE CERTIFIE QUE LES MATERIES CI-DESSUS MENTIONNÉES SONT PROPREMENT CLASSIFIÉES, DÉCRITES, IDENTIFIÉES ET ÉTIQUETÉES, ET QUELLES SONT EN BON ÉTAT POUR LE TRANSPORT CONFORMÉMENT AUX RÈGLEMENTS ADOPTÉS EN VERTU DE LA LOI SUR LE TRANSPORT DES MARCHANDISES DANGEREUSES (1992).
NET	PREPAID	DECLARED VALUE OF SHIPMENT VALEUR DÉCLARÉE

FORWARD INVOICE FOR PREPAID FREIGHT
QUOTING OUR B/L NO. TO:
FAIRE SUIVER FACTURE POUR EXPÉDITION PORT
PAYÉ REFERANT À NOTRE NUMÉRO DE
LIVRAISON

BRENTAG CANADA INC.
2900 JEAN BAPTISTE DESCHAMPS
LACHINE, PQ H8T 1C8

MAXIMUM LIABILITY FOR LOSS OR DAMAGE:
\$2.00 PER POUND OR \$4.41 PER KILOGRAM
UNLESS DECLARED VALUE STATES OTHERWISE.

RESPONSABILITÉ MAXIMALE POUR Perte OU DOMMAGE:
2 \$ LA LIVRE OU 4.41 \$ LE KILO, SAUF STIPULATION AU CONTRAIRE PAR LA VALEUR DÉCLARÉE.

Brentag Canada Inc.

AGENT

DESTINATAIRE/CONSIGNÉE

PER
PAR

PER
PAR

PER
PAR

539371

TO <u>DAVE MARKELL</u>		DATE <u>Dec 22/04</u>			
ADDRESS		FOR			
SHIP TO		DATE REQUIRED			
REQUISITION (NOT A PURCHASE ORDER)	QUANTITY	PLEASE SUPPLY	PRICE	AMOUNT	
	1	10	CB's of Sodium Hypo from Finch delivered to Crysler		
	2				
	3				
	4				
	5				
	6				
	7				
	8				
	9				
REF. NO.	ORDERED BY	APPROVED BY <u>D. Frickels</u>			

Blueline DC 11

Flowmeter Verification Certificate

Customer _____
Order code PROMAG 50 DN100
Device type 5601DB16000
Serial number V1.04.00
Software Version Transmitter 10.06.2004
Verification date

Plant _____
Tag Description 1.1513/1.1513
K-Factor 5
Zero point V1.02.01
Software Version I/O-Module 12:24
Verification time

Verification result: Passed

Test item	Result	Applied Limits
Amplifier	Passed	0.5 %
Current Output 1	Passed	0.05 mA
Pulse Output 1	Passed	1 P
Test Sensor	Passed	

FieldCheck Details
103601
Serial number 1.01.00
Software Version 20.02.2004
Last Calibration Date

Simubox Details
85396
Serial number 1.00.00
Software Version 24.02.2004
Last Calibration Date

Date 10/06/04

Operator's Sign

Inspector's Sign

7/9

Endress+Hauser
The Power of Know How



FieldCheck - Result Tab

Customer	
Order code	
Device type	PROMAG 50 DN100
Serial number	5601DB16000
Software Version Transmitter	V1.04.00
Verification date	10.06.2004

Plant	
Tag Description	—
K-Factor	1.1513/1.1513
Zero point	5
Software Version I/O-Module	V1.02.01
Verification time	12:24

Verification Flow end value (100 %): 47.000 l/s

Passed/Failed	Test item	Simul. Signal	Limit Value	Deviation
	Test Transmitter			
✓	Amplifier	2.350 l/s (5%)	0.5 %	-0.00 %
✓		4.700 l/s (10.0%)	0.5 %	-0.10 %
✓		23.500 l/s (50.0%)	0.5 %	-0.06 %
✓		47.000 l/s (100%)	0.5 %	-0.04 %
	Current Output 1			
✓		4.000 mA (0%)	0.05 mA	0.004 mA
✓		4.800 mA (5%)	0.05 mA	0.003 mA
✓		5.600 mA (10.0%)	0.05 mA	0.002 mA
✓		12.000 mA (50.0%)	0.05 mA	-0.004 mA
✓		20.000 mA (100%)	0.05 mA	-0.015 mA
✓	Pulse Output 1	122 P	1 P	1 P
		Start value	Limits range	Measured value
	Test Sensor			
✓	Coil Curr. Rise	5.000 ms	0.000..10.250 ms	6.488 ms
✓	Coil Curr. Stability		—	—
✓	Electrode Integrity	mV	0.0..0.056 mV	0.003 mV

8/9

Flowmeter Verification Certificate

Customer

Order code

PROMAG 50 DN80

Device type

54018316000

Serial number

V1.04.00

Software Version Transmitter

22.06.2004

Verification date

Plant

Tag Description

0.91574/0.91574

K-Factor

17

Zero point

V1.02.01

Software Version I/O-Module

15:53

Verification time

Verification result: Passed

Test item	Result	Applied Limits
Amplifier	Passed	0.5 %
Current Output 1	Passed	0.05 mA
Test Sensor	Passed	

FieldCheck Details

103601

Serial number

1.01.00

Software Version

20.02.2004

Last Calibration Date

Date

Operator's Sign

1/9

Simubox Details

85396

Serial number

1.00.00

Software Version

24.02.2004

Last Calibration Date

Inspector's Sign

Endress+Hauser
The Power of Know How



FieldCheck - Result Tab

Customer	
Order code	
Device type	PROMAG 50 DN80
Serial number	54018316000
Software Version Transmitter	V1.04.00
Verification date	22.06.2004

Plant	
Tag Description	-----
K-Factor	0.91574/0.91574
Zero point	17
Software Version I/O-Module	V1.02.01
Verification time	15:53

Verification Flow end value (100 %): 30.000 l/s

Passed/Failed	Test item	Simul. Signal	Limit Value	Deviation
	Test Transmitter			
✓	Amplifier	1.500 l/s (5%)	0.5 %	0.03 %
✓		3.000 l/s (10.0%)	0.5 %	0.02 %
✓		15.000 l/s (50.0%)	0.5 %	0.06 %
✓		30.000 l/s (100%)	0.5 %	0.05 %
	Current Output 1			
✓		4.000 mA (0%)	0.05 mA	0.004 mA
✓		4.800 mA (5%)	0.05 mA	0.004 mA
✓		5.600 mA (10.0%)	0.05 mA	0.003 mA
✓		12.000 mA (50.0%)	0.05 mA	0.002 mA
✓		20.000 mA (100%)	0.05 mA	-0.003 mA
		Start value	Limits range	Measured value
	Test Sensor			
✓	Coil Curr. Rise	4.200 ms	0.000..9.250 ms	5.416 ms
✓	Coil Curr. Stability		—	—
✓	Electrode Integrity	mV	0.0..0.151 mV	0.020 mV

2/9

Flowmeter Verification Certificate

Customer _____
Order code PROMAG 50 DN80
Device type 5500D416000
Serial number V1.04.00
Software Version Transmitter 10.06.2004
Verification date

Plant _____
Tag Description 0.91584/0.91584
K-Factor 0
Zero point V1.02.01
Software Version I/O-Module 12.49
Verification time

Verification result: Passed

Test item	Result	Applied Limits
Amplifier	Passed	0.5 %
Current Output 1	Passed	0.05 mA
Test Sensor	Passed	

FieldCheck Details
103601
Serial number 1.01.00
Software Version 20.02.2004
Last Calibration Date

Simubox Details
85396
Serial number 1.00.00
Software Version 24.02.2004
Last Calibration Date

10/06/04
Date

Operator's Sign

Inspector's Sign

4/9

Endress+Hauser
The Power of Know How



FieldCheck - Result Tab

Customer	
Order code	
Device type	PROMAG 50 DN80
Serial number	5500D416000
Software Version Transmitter	V1.04.00
Verification date	10.06.2004

Plant	
Tag Description	-----
K-Factor	0.91584/0.91584
Zero point	0
Software Version I/O-Module	V1.02.01
Verification time	12:49

Verification Flow end value (100 %): 30.080 l/s

Passed/Failed	Test item	Simul. Signal	Limit Value	Deviation
Test Transmitter				
✓	Amplifier	1.504 l/s (5%)	0.5 %	0.07 %
✓		3.008 l/s (10.0%)	0.5 %	0.07 %
✓		15.040 l/s (50.0%)	0.5 %	0.03 %
✓		30.080 l/s (100%)	0.5 %	0.02 %
Test Sensor				
✓	Current Output 1	4.000 mA (0%)	0.05 mA	0.006 mA
✓		4.800 mA (5%)	0.05 mA	0.005 mA
✓		5.600 mA (10.0%)	0.05 mA	0.004 mA
✓		12.000 mA (50.0%)	0.05 mA	-0.000 mA
✓		20.000 mA (100%)	0.05 mA	-0.006 mA
		Start value	Limits range	Measured value
✓	Coil Curr. Rise	4.200 ms	0.000..9.250 ms	5.435 ms
✓	Coil Curr. Stability		--	--
✓	Electrode Integrity	mV	0.0..0.065 mV	0.002 mV

5/9