

Report Transmission Cover Page

Bill To: Aaron Service 4703 Marine Avenue Powell River, BC, Canada V8A 2L2	Project ID: Project Name: SSID Project Location: 2785 Vancouver Blvd LSD: Savary Island P.O.: 408168 Proj. Acct. code:	Lot ID: 1727338 Control Number: Date Received: Apr 24, 2024 Date Reported: Apr 30, 2024 Report Number: 2996851 Report Type: Final Report
Attn: Coranne Anderson Sampled By: Janine Reimer Company:		

Contact	Company	Address
Accounts Payable	Aaron Service	4703 Marine Avenue Powell River, BC V8A 2L2 Phone: (604) 485-5611 Fax: (604) 485-6858 Email: sales@aaronservice.com
<u>Delivery</u>	<u>Format</u>	<u>Deliverables</u>
Email - Merge	PDF	COC / Test Report
Email - Merge	PDF	Invoice
Coranne Anderson	Aaron Service	4703 Marine Avenue Powell River, BC V8A 2L2 Phone: (604) 485-5611 Fax: (604) 485-6858 Email: coranne@aaronservice.com
<u>Delivery</u>	<u>Format</u>	<u>Deliverables</u>
Email	PDF	COA
Email - Merge	PDF	COC / Test Report
Email - Merge	PDF	Invoice
Ryan Anderson	Aaron Service	4703 Marine Avenue Powell River, BC V8A 2L2 Phone: (604) 485-5611 Fax: (604) 485-6858 Email: ryan@aaronservice.com,ryan.aaronservice@gmail.com
<u>Delivery</u>	<u>Format</u>	<u>Deliverables</u>
Email - Merge	PDF	COC / Test Report
Trevor Anderson	Aaron Service	4703 Marine Avenue Powell River, BC V8A 2L2 Phone: (604) 485-5611 Fax: (604) 485-6858 Email: trevor@aaronservice.com
<u>Delivery</u>	<u>Format</u>	<u>Deliverables</u>
Email - Merge	PDF	COC / Test Report

Notes To Clients:

The information contained on this and all other pages transmitted, is intended for the addressee only and is considered confidential. If the reader is not the intended recipient, you are hereby notified that any use, dissemination, distribution or copy of this transmission is strictly prohibited. If you receive this transmission by error, or if this transmission is not satisfactory, please notify us by telephone.

Analytical Report

Bill To: Aaron Service 4703 Marine Avenue Powell River, BC, Canada V8A 2L2	Project ID: Project Name: SSID Project Location: 2785 Vancouver Blvd LSD: Savary Island P.O.: 408168 Proj. Acct. code:	Lot ID: 1727338 Control Number: Date Received: Apr 24, 2024 Date Reported: Apr 30, 2024 Report Number: 2996851 Report Type: Final Report
Attn: Coranne Anderson Sampled By: Janine Reimer Company:		

Reference Number	1727338-2
Sample Date	April 23, 2024
Sample Time	10:33
Sample Location	
Sample Description	Well Head # 2 / 8.5 °C
Sample Matrix	Drinking Water


Analyte	Units	Result	Nominal Detection Limit	Guideline Limit	Guideline Comments
Aggregate Organic Constituents					
UV Transmittance	%/cm	99.3	0.1		
Inorganic Nonmetallic Parameters					
Tannin & Lignin	as Tannic Acid	mg/L	<0.1	0.1	
Metals Extractable					
Aluminum	Extractable	mg/L	<0.001	0.001	0.1 OG; 2.9 MAC
Antimony	Extractable	mg/L	<0.00002	0.00002	0.006
Arsenic	Extractable	mg/L	0.0001	0.0001	0.010
Barium	Extractable	mg/L	0.0082	0.0001	2.0
Boron	Extractable	mg/L	0.018	0.002	5
Cadmium	Extractable	mg/L	<0.00001	0.00001	0.007
Chromium	Extractable	mg/L	0.00020	0.00005	0.05
Copper	Extractable	mg/L	0.0028	0.0005	1 AO; 2 MAC
Lead	Extractable	mg/L	0.00006	0.00001	0.005
Selenium	Extractable	mg/L	<0.0002	0.0002	0.05
Strontium	Extractable	mg/L	0.13	0.0001	7.0
Uranium	Extractable	mg/L	0.00022	0.00001	0.02
Vanadium	Extractable	mg/L	0.0011	0.00005	
Zinc	Extractable	mg/L	0.0032	0.0005	5.0
Microbiological Analysis					
Total Coliforms	Enzyme Substrate Test	MPN/100 mL	<1.0	1.0	0 per 100 mL
Escherichia coli	Enzyme Substrate Test	MPN/100 mL	<1.0	1.0	0 per 100 mL
Physical and Aggregate Properties					
Colour	True	Colour units	<5	5	
Turbidity		NTU	<0.10	0.1	0.1/0.3/1.0 OG
Routine Water					
pH			7.11	0.01	7.0-10.5
pH - Holding Time			Exceeded		
Temp. of observed pH		°C	<0.1		
Electrical Conductivity	at 25 °C	µS/cm	234	1	
Calcium	Extractable	mg/L	14	0.01	
Iron	Extractable	mg/L	0.007	0.004	0.3
Magnesium	Extractable	mg/L	5.6	0.02	
Manganese	Extractable	mg/L	<0.001	0.001	0.02 AO; 0.12 MAC
Potassium	Extractable	mg/L	1.9	0.04	
Silicon	Extractable	mg/L	13	0.005	
Sodium	Extractable	mg/L	18	0.1	200

Analytical Report

Bill To: Aaron Service 4703 Marine Avenue Powell River, BC, Canada V8A 2L2	Project ID: Project Name: SSID Project Location: 2785 Vancouver Blvd LSD: Savary Island P.O.: 408168 Proj. Acct. code:	Lot ID: 1727338 Control Number: Date Received: Apr 24, 2024 Date Reported: Apr 30, 2024 Report Number: 2996851 Report Type: Final Report
Attn: Coranne Anderson Sampled By: Janine Reimer Company:		

Reference Number	1727338-2
Sample Date	April 23, 2024
Sample Time	10:33
Sample Location	
Sample Description	Well Head # 2 / 8.5 °C
Sample Matrix	Drinking Water

Analyte	Units	Result	Nominal Detection Limit	Guideline Limit	Guideline Comments	
Routine Water - Continued						
T-Alkalinity	as CaCO3	mg/L	45	5		
Chloride	Dissolved	mg/L	28.0	0.05	250	Below AO
Fluoride	Dissolved	mg/L	<0.01	0.01	1.5	Below MAC
Nitrate - N	Dissolved	mg/L	3.95	0.01	10	Below MAC
Nitrite - N	Dissolved	mg/L	<0.01	0.01	1	Below MAC
Sulfate (SO4)	Dissolved	mg/L	5.3	0.1	500	Below AO
Hardness	as CaCO3 (extractable)	mg/L	59	1		
Total Dissolved Solids	Extractable	mg/L	154	1	500	Below AO

Approved by: 
 Max Hewitt
 Operations Manager

Methodology and Notes

Bill To: Aaron Service 4703 Marine Avenue Powell River, BC, Canada V8A 2L2	Project ID: Project Name: SSID Project Location: 2785 Vancouver Blvd LSD: Savary Island P.O.: 408168 Proj. Acct. code:	Lot ID: 1727338 Control Number: Date Received: Apr 24, 2024 Date Reported: Apr 30, 2024 Report Number: 2996851 Report Type: Final Report
Attn: Coranne Anderson Sampled By: Janine Reimer Company:		

Method of Analysis

Method Name	Reference	Method	Date Analysis Started	Location
Alk, pH, EC, Turb in water (BC)	APHA	* Alkalinity - Titration Method, 2320 B	Apr 25, 2024	Element Vancouver
Alk, pH, EC, Turb in water (BC)	APHA	* Alkalinity - Titration Method, 2320 B	Apr 27, 2024	Element Vancouver
Alk, pH, EC, Turb in water (BC)	APHA	* Conductivity, 2510 B	Apr 25, 2024	Element Vancouver
Alk, pH, EC, Turb in water (BC)	APHA	* Conductivity, 2510 B	Apr 27, 2024	Element Vancouver
Alk, pH, EC, Turb in water (BC)	APHA	* pH - Electrometric Method, 4500-H+ B	Apr 25, 2024	Element Vancouver
Alk, pH, EC, Turb in water (BC)	APHA	* pH - Electrometric Method, 4500-H+ B	Apr 27, 2024	Element Vancouver
Anions by IEC in water (VAN)	APHA	* Ion Chromatography with Chemical Suppression of Eluent Cond., 4110 B	Apr 25, 2024	Element Vancouver
Anions by IEC in water (VAN)	APHA	* Ion Chromatography with Chemical Suppression of Eluent Cond., 4110 B	Apr 29, 2024	Element Vancouver
Metals SemiTrace (Extractable) in water (VAN)	US EPA	* Metals & Trace Elements by ICP-AES, 6010C	Apr 25, 2024	Element Vancouver
Tannin and Lignin in water (VAN)	APHA	* Colorimetric Method, 5550 B	Apr 26, 2024	Element Vancouver
Total and E-Coli - Colilert - DW (VAN)	APHA	Enzyme Substrate Test, APHA 9223 B	Apr 24, 2024	Element Vancouver
Trace Metals (extractable) in Water (VAN)	US EPA	* Determination of Trace Elements in Waters and Wastes by ICP-MS, 200.8	Apr 25, 2024	Element Vancouver
True Color in water (VAN)	APHA	* Spectrophotometric - Single Wavelength Method, 2120 C	Apr 25, 2024	Element Vancouver
Turbidity - Water (VAN)	APHA	* Turbidity - Nephelometric Method, 2130 B	Apr 25, 2024	Element Vancouver
Ultraviolet Transmittance in Water	APHA	* Ultraviolet Absorption Method, 5910 B	Apr 26, 2024	Element Vancouver

* Reference Method Modified

References

APHA	Standard Methods for the Examination of Water and Wastewater
US EPA	US Environmental Protection Agency Test Methods

Guidelines

Guideline Description	Health Canada GCDWQ
Guideline Source	Guidelines for Canadian Drinking Water Quality, Health Canada, Sept 2020
Guideline Comments	MAC = Maximum Acceptable Concentration AO = Aesthetic Objective OG = Operational Guideline for Water Treatment Plants (does not apply to private groundwater wells). Refer to Health Canada for complete guidelines at www.hc-sc.gc.ca

The comparison of test results to guideline limits is provided for information purposes only. This is not to be taken as a statement of conformance / nonconformance to any guideline, regulation or limit. The data user is responsible for all conclusions drawn with respect to the data and is advised to consult official regulatory references when evaluating compliance.

Please direct any inquiries regarding this report to our Client Services group.
Results relate only to samples as submitted.

The test report shall not be reproduced except in full, without the written approval of the laboratory.

Invoice To:
 Company Aaron Service
 Address 4703 Marine Avenue
Powell River, BC V8A 2L2
 Attention Coranne Anderson
 Phone 604-485-5611
 Cell _____
 Fax _____
 E-mail coranne@aaronservice.com
 Agreement ID 66993
 Copy of Report _____

Report To:
 Company Aaron Service
 Address 4703 Marine Avenue
Powell River, BC V8A 2L2
 Attention Coranne Anderson
 Phone 604-485-5611
 Cell _____
 Fax _____
 E-mail 1 coranne@aaronservice.com
 E-mail 2 sales@aaronservice.com
 Copy of Invoice _____

Report Results
 E-Mail X
 Mail _____
 Online _____
 Fax _____
 PDF _____
 Excel _____
 QA/QC _____

Regulatory Requirement
 HCDWQG
 Ab Tier 1
 SPIGEC
 BCCSR
 Other (list below) _____

Project Information
 Project ID _____
 Project Name SSID
 Project Location 2785 Vancouver
 Legal Location Savary Island Blvd
 PO/AFE# 409169
 Proj. Acct. Code _____
 Quote # _____

Sample Custody (please print)
 Sampled by: Janine Reimer
 Company: _____
 I authorize Exova to proceed with the work indicated on this form:
 Date: _____ Initial: _____
This section for Lab use
 Date/Time stamp: _____

RUSH Priority

- Emergency (contact lab for turnaround and pricing)
- Priority 1-2 working days (100% surcharge)
- Urgent 2-3 working days (50% surcharge)

When "ASAP" is requested, turn around will default to a 100% RUSH priority, with pricing and turn around time to match. Please contact the lab prior to submitting RUSH samples. If not all samples require RUSH, please indicate in the special instructions.

Date Required _____ Signature _____
 Special Instructions/Comments (please include contact information including ph. # if different from above).
CUSTOMER PHONE NUMBER: (604) 223-1959.
CUSTOMER EMAIL: administrator@savaryshoreswater.ca

Number of Containers	W99	DW20	T/L	UVT	TOC	M99R (repeat total & e'coli)	M99S (includes HPC)

Site I.D.	Sample description	Depth		Date/Time sampled	Matrix	Sampling method	Enter tests above (√ relevant samples below)									
		start in cm	end in cm				W99	DW20	T/L	UVT	TOC	M99R	M99S			
1																
2	<u>2785 Vancouver Blvd.</u>			<u>Apr. 23/24</u>												
3	<u>Savary Island, BC</u>															
4																
5	<u>Well Head #1</u>			<u>10:17am</u>			X	X	X							
6																
7	<u>Well Head #2</u>			<u>10:33am</u>			X	X	X							
8																
9																
10																
11																
12																
13																
14																
15																

- Indicate in the space allotted any deficiencies by the corresponding number.
1. Indicate any samples that were not packaged well
 2. Indicate any samples not received in Exova supplies
 3. Indicate any samples that were not clearly labeled
 4. Indicate any samples not received within the required hold time or temp.
 5. Indicate any missing or extra samples
 6. Indicate any samples that were received broken
 7. Indicate any samples where sufficient volume was not received
 8. Indicate any samples received in an inappropriate container

Environmental Sample Information Sheet
 Note: Proper completion of this form is required in order to proceed with analysis
Please indicate any potentially hazardous samples
 Page _____ of _____ Control # _____

Indicate lot # or affix barcode here _____

Shipping: COD Y/N
 # and size of coolers _____
 Temp. received: _____ Delivery Method: _____
 Waybill: _____
 Received by: _____