

Lab/Cor, Inc.

A Professional Service Corporation in the Northwest

ASBESTOS TEST PANEL (Asbestos by EPA Methods 100.1 or 100.2) Report of Analysis

Date Collected: (MM/DD/YY) 06/23/17	System Group Type: (circle one) A B Other:
Water System ID Number: 47660W	System Name: Lxloman Subdivision
LAB USE - Sample #: 112-20342	County: King
Sample Location: 28641 SE 225m	Source Number(s): (list sources if blended or composited)
Sample Purpose: (check appropriate box) <input type="checkbox"/> RC - Routine/Compliance (satisfies monitoring requirements) <input type="checkbox"/> C - Confirmation (confirmation of chemical result) <input type="checkbox"/> I - Investigative (does not satisfy monitoring requirements) <input type="checkbox"/> O - Other (specify - does not satisfy monitoring requirements)	LAB USE ONLY: Date Received: (MM/DD/YY) 06/23/17 Date Analyzed: (MM/DD/YY) 06/29/17 Date Reported: (MM/DD/YY) 06/29/17 Comments: Revised report generated 07/12/17 to include system ID.
Sample Composition: (check appropriate box) <input type="checkbox"/> S - Single Source <input type="checkbox"/> B - Blended (list sources in 'Source Number(s)' field) <input type="checkbox"/> C - Composite (list sources in 'Source Number(s)' field) <input type="checkbox"/> D - Distribution sample	Sample Type: (check one) <input checked="" type="checkbox"/> Untreated (raw) <input type="checkbox"/> Treated <input type="checkbox"/> Unknown
Send Report to:	Sample Collected by: (name) _____ Phone Number: _____ Bill to: (client name) _____ _____
Phone: _____	Email: (Required) _____

EPA REGULATED AND STATE REGULATED OR REQUIRED

DOH #	ANALYTE	RESULTS	UNITS	SRL	TRIGGER	MCL	MCL Exceeded? (Check only if YES)	METHOD/Analyst initials
0115	Asbestos	<0.11	MFL	0.2	-	7	NO	EPA WD 2 SH

NOTES:

*Confirmation: Include the original lab number, sample number, and collection date of original sample in either lab or sampler comments section.

SRL (State Reporting Level): The minimum reporting level established by the Washington State Department of Health (DOH).

Trigger Level: DOH drinking water response level. Systems with compounds detected at concentrations in excess of this level may be required to take additional samples or monitor more frequently.

MCL (maximum contaminant level): If the contaminant amount exceeds the MCL, please contact your regional DOH office to determine follow-up actions.

NA (Not Analyzed): In the results column, indicates this compound was not included in the current analysis.

ND (Not Detected): In the results column, indicates this compound was analyzed and not detected at a level greater than or equal to the SRL.

< (0.00X): The compound was not detected in the sample at or above the concentration indicated (usually the lab method reporting limit).

--: no trigger value exists.

Comments:			
Sample Relinquished By:		Date/Time:	Condition on Receipt: Good
Sample Received By: Ce Longe		Date/Time: 6/23/17	Temp on Receipt: 9.4°C

EPA 100.2 - Potable Water Summary Data

Job Number: 170614 SEA

Client: AmTest

Report Number: 170614R02

Date Received: 6/23/2017

Project Name: Locloman Subdivision

Lab/Cor Sample No.: S1

Client Sample No.: 9512

Description: 28641 SE 225th, WA Water ID#: 11920342

Filter Fraction: 1

Aliquot Dilution: 1

Begin Volume: 40 ml

Final Dilution: 1

Volume Taken: 40 ml

Sample Area/Mass/Volume (ml) : 800

Lab Filter Area (mm2) : 193

Grid Openings Analyzed : 4

Average Grid Opening Area : 0.0109

Area Analyzed (mm2) : 0.0436


Analytical Sens. (struc/MFL>10-um) : 0.111

Detection Limit. (struc/MFL>10-um) : 0.331

Analyst(s) Analysis Date Microscope Magnification
SH 6/29/2017 Philips 410 10000

Structure Type	Concentration MFL>10-um	95% Confidence Interval MFL>10-um	Structure Count' Prim/Total
TEM Water Amphibole	< 0.111	0 - 0.408 - Poisson	0
TEM Water Chrysotile	< 0.111	0 - 0.408 - Poisson	0
TEM Water Total	< 0.111	0 - 0.408 - Poisson	0

Reviewed by:

x 

Sierra Hinkle

Technician/Analyst