

# SUBURBAN LABORATORIES, Inc.



1950 S. Batavia Ave., Suite 150 Geneva, Illinois 60134  
Tel. (708) 544-3260 • Toll Free (800) 783-LABS  
Fax (708) 544-8587  
www.suburbanlabs.com

April 05, 2017

Roger Genschoreck  
Wight & Company  
2500 N. Frontage Rd.  
Darien, IL 60561

**Workorder: 1703K06**

TEL: (630) 739-6988

FAX:

RE: 05-4883-27 James Hart Drinking Water Lead Analysis

Dear Roger Genschoreck:

Suburban Laboratories, Inc. received 32 sample(s) on 3/30/2017 for the analyses presented in the following report.

Customer has provided 250 mL volume sample bottles for all samples collected. Please note, all sample results that exceed 5.00 ug/L should be promptly reported to parents or guardians of all enrolled students. Results that are below 5.00 ug/L should be reported on the school website. Please refer to Public Act 099-0922 or the Illinois Department of Public Health for specific reporting requirements. Suburban Laboratories will forward all results to the IDPH within seven (7) business days from the date of this report.

This report may not be reproduced, except in full, without the prior written approval of Suburban Laboratories, Inc. If you have any questions regarding these test results, please call me at (708) 544-3260.

Sincerely,

Pat Rodriguez  
Project Manager  
708-544-3260 ext 214  
pat@suburbanlabs.com



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**Client ID:** Wight & Company

**Report Date:** April 05, 2017

**Project Name:** 05-4883-27 James Hart Drinking Water Lead Analysis

**Workorder:** 1703K06

**Analyte:** Lead

**Matrix:** Drinking Water

Sample ID	Client Sample ID	Result	MRL	Units	Date & Time Water System Last Used	Date Collected	Date Analyzed
1703K06-001A	JH-01A	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-002A	JH-01B	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-003A	JH-02A	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-004A	JH-02B	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-005A	JH-03A	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-006A	JH-03B	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-007A	JH-04A	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-008A	JH-04B	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-009A	JH-05A	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-010A	JH-05B	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-011A	JH-06A	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-012A	JH-06B	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-013A	JH-07A	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-014A	JH-07B	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-015A	JH-08A	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-016A	JH-08B	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-017A	JH-09A	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-018A	JH-09B	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-019A	JH-10-A	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-020A	JH-10-B	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-021A	JH-11A	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-022A	JH-11B	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-023A	JH-12A	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-024A	JH-12B	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-025A	JH-13A	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-026A	JH-13B	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-027A	JH-14A	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-028A	JH-14B	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-029A	JH-15A	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-030A	JH-15B	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-031A	JH-16A	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017
1703K06-032A	JH-16B	ND	2.00	µg/L	03/28/17 16:30	3/29/2017	4/5/2017

ND - Not Detected Down to the Laboratory Minimum Reporting Limit (MRL)



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## CHAIN OF CUSTODY RECORD

# 141114

<b>Company Name</b> Wight & Company 2500 North Frontage Road Darien, IL 60561 630-969-7000 Fax 630-969-7979 rgenschoreck@wightco.com		<b>TURNAROUND TIME REQUESTED</b> <input checked="" type="checkbox"/> Normal <input type="checkbox"/> RUSH* *Additional Rush Charges Approved. *Date & Time Needed: _____ Normal TAT is specified on the price quotation or fee schedule. Rush work must be pre-approved and additional charges apply.		<b>ANALYSIS &amp; METHOD REQUESTED</b> Enter an "X" in box below for request		<b>Page</b> 1 of 3 <b>PO No.</b> 05-4883-27
<b>Project ID / Location</b> 05-4883-27 JAMES HART		<input type="checkbox"/> Fax Report <input type="checkbox"/> Final Report will be emailed		Specify Regulatory Program: <input type="checkbox"/> None/Info Only (Required) <input type="checkbox"/> LUST <input type="checkbox"/> SRP <input checked="" type="checkbox"/> SDWA <input type="checkbox"/> 503 Sludge <input type="checkbox"/> NPDES <input type="checkbox"/> MWRDGC <input type="checkbox"/> Disposal <input type="checkbox"/> Other* *Please specify in comment section below.		<b>Shipping Method</b> Reporting Level (at additional charge)    1    2    3    4 <b>LAB USE ONLY</b> <b>SLI ORDER No.</b> 1703K06 Sample containers supplied by customer? <input type="checkbox"/> Yes Temperature of Received Samples    18 °C Samples received the same day as collection? <input type="checkbox"/> Yes
<b>Project Manager (Report to)</b> R. GENSCHORECK		<b>Sample Collector(s) Name</b> R GENSCHORECK		200.8		<b>R</b> <b>Condition</b> <b>Split</b> <b>LAB #</b>

SAMPLE IDENTIFICATION *Use One Line Per Preservation & Container Type*	COLLECTION		MATRIX	GRAB/COMP.	CONTAINERS		PRESERVATIVE
	DATE	TIME			Qty	SIZE & TYPE	
1 JH-01A DRINK FOUNTAIN	3/29/17	0710	WATER		1	250ML	NONE X
2 JH-01B	1/1	0710					
3 JH-02A	1/1	0712					
4 JH-02B	1/1	0712					
5 JH-03A	1/1	0713					
6 JH-03B	1/1	0713					
7 JH-04A	1/1	0714					
8 JH-04B	1/1	0714					
9 JH-05A	1/1	0720					
10 JH-05B	1/1	0720					
11 JH-06A	1/1	0722					
12 JH-06B	1/1	0722					

<b>MATRIX:</b> Drinking Water (DW), Soil (S), Waste Water (WW), Surface Water (SW), Ground Water (GW), Solid Waste (WA), Sludge (U), Wipe (P) <b>CONTAINER:</b> 2oz, 4oz, 8oz, 40ml Vial, 500ml, Liter (L), Tube, Glass (G), Plastic (P) <b>PRESERVATIVE:</b> H <sub>2</sub> SO <sub>4</sub> , HCl, HNO <sub>3</sub> , Methanol (MeOH), NaOH, Sodium Bisulfate (NaB), NaThio	<b>COMMENTS &amp; SPECIAL INSTRUCTIONS:</b> WATER LAST USED 3/28/17 4:30 PM NO PRESERVATIVE	<b>CONDITION CODES</b> 1. Improper/damaged container/cap 2. Improper preservation 3. Insufficient sample volume 4. Headspace/air bubbles for VOCs 5. Received past holding time 6. Received frozen 7. Label conflicts with COC
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1. Relinquished By R Genschoreck Date 3/30/17	2. Relinquished By _____ Date _____	3. Relinquished By _____ Date _____	4. Relinquished By _____ Date _____
Received By B. Genschoreck <input type="checkbox"/> Ice present Time 12:00	Received By _____ <input type="checkbox"/> Ice present Time _____	Received By _____ <input type="checkbox"/> Ice present Time _____	Received By _____ <input type="checkbox"/> Ice present Time _____



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## CHAIN OF CUSTODY RECORD

# 140400

Company Name: **Wight & Company**  
 2500 North Frontage Road  
 Darien, IL 60561  
 630-969-7000 Fax 630-969-7979  
 rgenschoreck@wightco.com

Zip: \_\_\_\_\_

TURNAROUND TIME REQUESTED  
 Normal     RUSH\* \*Additional Rush Charges Approved.  
 \*Date & Time Needed: \_\_\_\_\_

ANALYSIS & METHOD REQUESTED  
 Enter an "X" in box below for request

Page **2** of **3**  
 PO No. **05-4883-27**  
 Shipping Method \_\_\_\_\_  
 Reporting Level (at additional charge) **1 2 3 4**

Project ID / Location: **05-4883-27 JAMES HART**

Project Manager (Report to): **R. GENSCHORECK**

Sample Collector(s) Name: **R GENSCHORECK**

Specify Regulatory Program: (Required)  
 LUST     SRP     SDWA  
 503 Sludge     NPDES     MWRDGC  
 Disposal     Other\* \*Please specify in comment section below.

Final Report will be emailed  Fax Report

Temperature of Received Samples: **18** °C

Sample containers supplied by customer?  Yes

Samples received the same day as collection?  Yes

SAMPLE IDENTIFICATION *Use One Line Per Preservation & Container Type*	COLLECTION		MATRIX	GRAB/	CONTAINERS		PRESERVATIVE	R	Condition	Split	LAB #
	DATE	TIME		COMP.	Qty	SIZE & TYPE					
1 JH-07A D. FOUNTAIN	3/29/17	0726	WATER		1 250ml	NONE	X				
2 JH-07B	1/1	0726									
3 JH-08A	1/1	0730									
4 JH-08B	1/1	0730									
5 JH-09A	1/1	0734									
6 JH-09B	1/1	0734									
7 JH-10A	1/1	0736									
8 JH-10B	1/1	0736									
9 JH-11A	1/1	0740									
10 JH-11B	1/1	0740									
11 JH-12A SINK	1/1	0745									
12 JH-12B SINK	1/1	0745									

MATRIX: Drinking Water (DW), Soil (S), Waste Water (WW), Surface Water (SW), Ground Water (GW), Solid Waste (WA), Sludge (U), Wipe (P) CONTAINER: 2oz, 4oz, 8oz, 40ml Vial, 500ml, 1L (L), Tube, Glass (G), Plastic (P) PRESERVATIVE: H<sub>2</sub>SO<sub>4</sub>, HCl, HNO<sub>3</sub>, Methanol (MeOH), NaOH, Sodium Bisulfate (NaB), NaThio

COMMENTS & SPECIAL INSTRUCTIONS:  
**WATER LAST USED 4:30 PM**

CONDITION CODES:  
 1. Improper/damaged container/cap  
 2. Improper preservation  
 3. Insufficient sample volume  
 4. Headspace/air bubbles for VOCs  
 5. Received past holding time  
 6. Received frozen  
 7. Label conflicts with COC

1. Relinquished By: <i>R. Genschoreck</i>	Date: <b>3/30/17</b>	2. Relinquished By: _____	Date: _____	3. Relinquished By: _____	Date: _____	4. Relinquished By: _____	Date: _____
Received By: <i>Bill Johnson</i>	Time: <b>12:03</b>	Received By: _____	Time: _____	Received By: _____	Time: _____	Received By: _____	Time: _____



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**CHAIN OF CUSTODY RECORD**

# 140399

Wight & Company 2500 North Frontage Road Darien, IL 60561 630-969-7000 Fax 630-969-7979 rgenschoreck@wightco.com Email Address	Zip _____ <input type="checkbox"/> Fax Report Final Report will be emailed	<p style="text-align: center;"><b>TURNAROUND TIME REQUESTED</b></p> <input checked="" type="checkbox"/> Normal <input type="checkbox"/> RUSH* *Additional Rush Charges Approved. *Date & Time Needed: _____ Normal TAT is specified on the price quotation or fee schedule. Rush work must be pre-approved and additional charges apply.	<p style="text-align: center;"><b>ANALYSIS &amp; METHOD REQUESTED</b></p> Enter an "X" in box below for request	Page <b>3</b> of <b>3</b> PO No. <b>05-4883-27</b> Shipping Method _____ Reporting Level (at additional charge)    1    2    3    4
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Project ID / Location <b>05-4883-27 JAMES HART</b>	Specify Regulatory Program: <input type="checkbox"/> None/Info Only (Required)	<p style="text-align: center;"><b>LAB USE ONLY</b></p> SLI ORDER No. <b>1703K06</b> Sample containers supplied by customer? <input type="checkbox"/> Yes Temperature of Received Samples <b>18</b> °C Samples received the same day as collection? <input type="checkbox"/> Yes
Project Manager (Report to) <b>R GENSCHORECK</b>	<input type="checkbox"/> LUST <input type="checkbox"/> SRP <input checked="" type="checkbox"/> SDWA	8.002
Sample Collector(s) Name <b>R GENSCHORECK</b>	<input type="checkbox"/> 503 Sludge <input type="checkbox"/> NPDES <input type="checkbox"/> MWRDGC <input type="checkbox"/> Disposal <input type="checkbox"/> Other* *Please specify in comment section below.	

SAMPLE IDENTIFICATION *Use One Line Per Preservation & Container Type*		COLLECTION		MATRIX	GRAB/COMP.	CONTAINERS		PRESERVATIVE
		DATE	TIME			Qty	SIZE & TYPE	
1	JH-13A SINK	3/29/17	0747	WATER		1	250ML	NONE X
2	JH-13B SINK	1/1	0747					
3	JH-14A W. FOUNTAIN	1/1	0750					
4	JH-14B	1/1	0750					
5	JH-15A	1/1	0755					
6	JH-15B	1/1	0755					
7	JH-16A	1/1	0800					
8	JH-16B	1/1	0800					
9		X/1						
10		1/1						
11		1/1						
12		1/1						

<b>MATRIX:</b> Drinking Water (DW), Soil (S), Waste Water (WW), Surface Water (SW), Ground Water (GW), Solid Waste (WA), Sludge (U), Wipe (P) <b>CONTAINER:</b> 2oz, 4oz, 8oz, 40ml Vial, 500ml, Liter (L), Tube, Glass (G), Plastic (P) <b>PRESERVATIVE:</b> H <sub>2</sub> SO <sub>4</sub> , HCl, HNO <sub>3</sub> , Methanol (MeOH), NaOH, Sodium Bisulfate (NaB), NaThio	<p style="text-align: center;"><b>COMMENTS &amp; SPECIAL INSTRUCTIONS:</b></p> <p style="text-align: center; font-size: 1.2em;">WATER LAST USED 3/28/17 4:30PM</p>	<p style="text-align: center;"><b>CONDITION CODES</b></p> 1. Improper/damaged container/cap 2. Improper preservation 3. Insufficient sample volume 4. Headspace/air bubbles for VOCs 5. Received past holding time 6. Received frozen 7. Label conflicts with COC
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1. Relinquished By <i>R M... Chow</i>	Date <b>3/30/17</b>	2. Relinquished By _____	Date _____	3. Relinquished By _____	Date _____	4. Relinquished By _____	Date _____
Received By <i>B...</i>	<input type="checkbox"/> Ice present Time <b>12:33</b>	Received By _____	<input type="checkbox"/> Ice present Time _____	Received By _____	<input type="checkbox"/> Ice present Time _____	Received By _____	<input type="checkbox"/> Ice present Time _____