

CENTRAL ONTARIO ANALYTICAL LABORATORY



4260 Burnside Line, R.R. #4
 Orillia, ON L3V 6H4
 Tel: (705) 326-8285 Fax: (705) 326-9316
www.coalab.ca

Release Copy - Microbiological Analysis of Recreational Water

Date & Time Received:	Temp. Rec'd. (°C):	Receiver:	Date & Time Incubated:	2011-09-15 12:00
2011-09-15 10:50	16.7	AB	FS Date & Time Incubated:	

Date Sampled: 2011-09-15
 Collected By: Doug Roberts
 Source of Sample: Tea Lake

Twp/Town	Peck
Health Unit	RCDHU
Total # of pages sent	2
# of samples sent	11
# of samples received	11

Report To: **Tea Lake Property Owners - Attn: Doug Roberts**

Address: Tea Lake Severn Township

Telephone: 705 756-3146 Ext: Fax: scan & email

Email Address: dougrobe@hotmail.com

Comments/Conditions: Paid \$116.59 Chq # 189

Time Sampled	Identification of Collection Site	Laboratory Number	E. coli CFU/100 mL	Faecal Strep. CFU/100mL	Water Temp. (°C)	Rain Fall				Sunlight			Wind Direction				Water Fowl Affecting Sample site? (Y / N)	Bather Intensity Light (L), Medium (M) or Heavy (H)	Water Clarity < or > 100cm (39 inches)	Algae Present? (Y/N)	Wave Action Light (L) or Medium (M)
						Before	During	Within 24 Hours	Within 48 Hours	Bright	Intermediate	Dull	Away from Shore	Toward Shore	Parallel to Shore	No Wind					
07:45	#1	R-10453	<10		20	0	0	0	0	✓						0	Y	L	3-4'	N	L
	#10	R-10454	10																		
	#20	R-10455	<10																		
	#30	R-10456	<10																		
	#40	R-10457	10																		
	#50	R-10458	<10																		
	#60	R-10459	<10																		
	#70	R-10460	<10																		
	#80	R-10461	<10																		
	#90	R-10462	<10		↓					↓					↓	↓	↓	↓	↓	↓	↓
07:45	#100	R-10463	<10		20	0	0	0	0	✓					0	Y	L	3-4'	N	L	

All times are transcribed in the 24-hour clock. Analysis performed by qualified analysts. Results relate only to the samples submitted. COAL is accredited in these specific microbiological parameters by SCC and licensed by MOE. C.O.A.L. accepts no responsibility for parameters selected, this is the responsibility of the submitting agency. FS & Faecal Strep. = Faecal Streptococcus HPM = Heavy Particulate Matter N/R = Not Received N/A = Not Applicable Rec. (L)

Analysis Date & Time: 2011-09-16 11:00 Enumerated By: KB Audited By: AV Methodology: M/F CFU/100ml
 Analysis Date & Time: Enumerated By: Audited By: FS Methodology: M/F CFU/100ml
 Transcribed By: AB Authorized & Rechecked By: TJ/JT Fax Copy Released By: KN/AV/Scan & Email 2011-09-16

Recreation Samples that exceed guidelines _____ Reported to Submitting Agency @ _____ H.U. @ _____ By: _____ Date: _____

E. coli	EC-1	Detection Limit	0 - 60	Reportable Limit:	1	Performed by Membrane Filtration	Methodology:	M/F CFU/100 ml
Faecal Streptococcus	FS-1	Detection Limit	4 - 320	Reportable Limit:	4	Performed by Membrane Filtration	Methodology:	M/F CFU/100 ml
Recreational E. coli Guidelines		Detection Limit	10 - 600	Reportable Limit:	>100	Performed by Membrane Filtration	Methodology:	M/F CFU/100 ml