

CENTRAL ONTARIO ANALYTICAL LABORATORY INC.



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

Final Certificate - Microbiological Analysis of Recreational Water

Date & Time Received:	Temp. Rec'd. (°C):	Receiver:	Date & Time Incubated:
2015-09-28 10:30	9.6	AB	2015-09-28 11:30

Date Sampled:	2015-09-27	Twp/Town:	Severn
Collected By:	Doug Roberts	Health Unit:	SMDHU
Source of Samples:	Tea Lake	Total # of pages sent:	2
		# of samples sent:	12
		# of samples received:	12

Report To: **Tea Lake Property Owners ATTN: Doug Roberts**

Address: 4388 Graham Rd. Coldwater, ON. L0K 1E0

Telephone: 705 756-3146 Ext: Fax: Scan & Email

Email Address: dougrobe@hotmail.com

Comments/Conditions: Paid \$132 CHQ# 229

Time Sampled	Sample Identifier	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									
15:00	01	Lake	R-788	<10		20	✓															L	100cm	N	M	
	10	"	R-789	10																						
	20	"	R-790	<10																						
	30	"	R-791	<10																						
	40	"	R-792	10																						
	50	"	R-793	<10																						
	60	"	R-794	<10																						
	70	"	R-795	<10																						
	80	"	R-796	20																						
	90	"	R-797	20																						
15:00	100	Lake	R-798	10		20	✓				✓							✓				N	L	100cm	N	M
15:00	31	"	R-799	10		20	✓				✓							✓				N	L	100cm	N	M

All times are transcribed in the 24-hour clock. Analysis performed by qualified analysts. Results relate only to the aliquot submitted. COAL is accredited by SCC and licensed by MOE in these specific microbiological parameters. 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: 2015-09-29 10:30 Enumerated By: CS Audited By: GD Methodology: M/F CFU/100ml

Analysis Date & Time: Enumerated By: Audited By: FS Methodology: M/F CFU/100ml

Transcribed By: DL Authorized & Rechecked By: LJ/TJ/KN Copy Released By: GD/HM/AM

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

Recreational E. coli	COAL DC	Detection Limit	10 - 600	Reportable Limit:	>100	Performed by Membrane Filtration	M/F CFU/100 ml
Faecal Streptococcus	COAL FS	Detection Limit	0 - 80	Reportable Limit:	1	Performed by Membrane Filtration	M/F CFU/100 ml