



Lead and Copper Certified Laboratory Report Form
Submit Online: wqcdcompliance.com/login (preferred); Fax (303) 758-1398
WQCD-B2-Drinking Water CAS
4300 Cherry Creek Drive South; Denver, CO 80246-1530

LCR - Results

Revision: 11/01/2016

Section I (Supplied or Completed by Public Water System)				Section II (Supplied or Completed by Certified Laboratory)							
Public Water System Information				Certified Laboratory Information							
PWSID#: CO0207504		Facility ID: DS001		Laboratory ID: CO015							
System Name: Meadow Mtn Water Supply				Laboratory Name: Colorado Analytical Laboratory							
Contact Person: Barry Mauerman			Phone #: 303-747-2066	Contact Person: Customer Service				Phone: 303-659-2313			
Comments:				Comments:							

Section III (Supplied or Completed by Public Water System)				Section IV (Supplied or Completed by Certified Laboratory)							
Sample Date	Collector	Sample Pt ID	Address, City, Zip	Lab Receipt Date	Lab Analysis Date	Laboratory Sample ID #	Analyte	Analytical Method	AL (mg/L)	Lab MRL (mg/L)	Result (mg/L)
9/2/21	Barry Mauerm		Distribution - Entry	9/3/21	9/8/21	210903015-01	Copper	EPA 200.8	1.3	0.001	0.004
							Lead	EPA 200.8	0.015	0.001	BDL

NT: Not Tested
Lab MRL: Laboratory Minimum Reporting Level
BDL: Below Laboratory MRL. A less than (<) may also used.

mg/L: Milligrams per Liter
AL: Action Level

210903015 N

1/1

Drinking Water Chain of Custody



LABORATORIES, INC.

Commerce City Lab
10411 Heinz Way
Commerce City CO 80640

Lakewood Service Center
12860 W. Cedar Dr, Suite 100A
Lakewood CO 80228

Phone: 303-659-2313

www.coloradolab.com

Report To Information		Bill To Information (If different from report to)		Project Information	
Company Name: <u>MEADOW MOUNTAIN WATER SUPPLY</u>		Company Name: _____		PWSID: <u>0207504</u>	
Contact Name: <u>BARRY MAUERMAN</u>		Contact Name: _____		System Name: <u>MEADOW MOUNTAIN WATER SUPPLY</u>	
Address: <u>P.O. Box 186</u>		Address: _____		Compliance Samples: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
City: <u>ALLEN PARK</u> State: <u>CO</u> Zip: <u>80570</u>		City: _____ State: _____ Zip: _____		Send Results to CDPHE: Yes <input checked="" type="checkbox"/> No <input type="checkbox"/>	
Phone: <u>303-747-0317</u>		Phone: _____		Task Number (Lab Use Only)	
Email: <u>barry.mauerman@gmail.com</u>		Email: _____		CAL Task	
Sample Collector: <u>BARRY MAUERMAN</u>		Sample Collector Phone: <u>303-747-0317</u>		210903015	
PO Number: _____				JML	

PHASE I, II, V Drinking Water Analyses (check requested analysis)										Subcontract Analyses																					
Date	Time	Client Sample ID / Sample Pt ID	No. of Containers	Residual Chlorine (mg/L) P/A Samples Only	Total Coliform P/A	504.1 EDB/DBCP	505 Pests/PCBs	515.4 Herbicides	524.2 VOCs	525.2 SOCs-Pest	531.1 Carbamates	547 Glyphosate	548.1 Endothall	549.2 Diquat	524.2 TTHMs	552.2 HAA5s	Lead/Copper	Nitrate	Nitrite	Fluoride	Inorganics	Alk./Lang. Index (Circle)	TOC, DOC (Circle)	SUVA, UV 254 (Circle)	SEE LIST*	Gross Alpha/Beta	Radium 226/228	Radon	Uranium	Chlorite	
9-2-21	1145	DISTRIBUTION - ENTRY																X													
9-2-21	1145	DISTRIBUTION - ENTRY																							X						
9-2-21	1230	DISTRIBUTION - MAUERMAN																							X						
9-3-21	0825	DISTRIBUTION - ENTRY																							X						
9-3-21	0715	DISTRIBUTION - MAUERMAN																							X						

Instructions: PLEASE INCLUDE ON REPORT

DISTRIBUTION - ENTRY PH 7.5 TEMP 8

DISTRIBUTION - MAUERMAN PH 7.2 TEMP 15

C/S Info: 9/103/21

Delivered Via: HO

C/S Charge ☐

Temp. 5°C / Ice Y

Seals Present Yes ☐ No ☐

Headspace Yes ☐ No ☐

Sample Pres. Yes ☐ No ☐

Relinquished By: <u>Barry Mauerman</u>	Date/Time: <u>9-3-21 10:00</u>	Received By: <u>[Signature]</u>	Date/Time: <u>9-3-21 10:00</u>	Relinquished By: _____	Date/Time: _____	Received By: _____	Date/Time: _____
--	--------------------------------	---------------------------------	--------------------------------	------------------------	------------------	--------------------	------------------

MEADOW MOUNTAIN WATER SUPPLY TEST LIST

CAL Task
210903015

JML

- Alkalinity
- Calcium (as mg/L CaCO_3)
- Total Dissolved Solids
- ~~Silica (only if an inhibitor containing silica is used)~~
- Orthophosphate (mg/L as P)* (required even if an inhibitor containing phosphate is not used)
- Total phosphorus (mg/L as P)
- Chloride
- Sulfate
- Iron
- Manganese

* Note, if an orthophosphate concentration is given in units of "mg/L as PO_4 " or "mg/L as orthophosphate," the value must be divided by 3 to convert to "mg/L as P"