

Your P.O. #: BN500116
 Your Project #: HOLY CROSS
 Site:500018994
 Your C.O.C. #: NA

Attention: Roland Lawton
 Dufferin Peel Catholic District...
 School Board
 40 Matheson Blvd W
 Mississauga, ON
 L5R 1C5

Report Date: 2008/09/09

CERTIFICATE OF ANALYSIS

MAXXAM JOB #: A8A0482
Received: 2008/09/05, 13:28

Sample Matrix: Water
 # Samples Received: 2

| Analyses | Quantity | Date Extracted | Date Analyzed | Laboratory Method | Method Reference |
|--|----------|-------------------|------------------|-------------------|---------------------|
| Metals Analysis by ICPMS (as received) 0 | 2 | 2008/09/08 | 2008/09/08 | CAM SOP-00447 | EPA 6020 |

* RPDs calculated using raw data. The rounding of final results may result in the apparent difference.

(1) Metals analysis was performed on the sample 'as received'.

Encryption Key

Please direct all questions regarding this Certificate of Analysis to your Project Manager.

JAMES ASPIN, Project Manager
 Email: James.Aspin@maxxamAnalytics.com
 Phone# (905) 817-5700 Ext:5771

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Maxxam has procedures in place to guard against improper use of the electronic signature and have the required "signatories", as per section 5.10.2 of ISO/IEC 17025:2005(E), signing the reports. SCC and CAEAL have approved this reporting process and electronic report format.

For Service Group specific validation please refer to the Validation Signature Page

Total cover pages: 1

Maxxam Job #: A8A0482
 Report Date: 2008/09/09

Dufferin Peel Catholic District...
 Client Project #: HOLY CROSS
 Project name: 500018994
 Your P.O. #: BN500116

ELEMENTS BY ATOMIC SPECTROSCOPY (WATER)

| | | | | | | |
|---------------|--------------|-----------------|---|--|------------|-----------------|
| Maxxam ID | | | AK1096 | AK1097 | | |
| Sampling Date | | | 2008/09/05 07:00 | 2008/09/05 07:36 | | |
| COC Number | | | NA | NA | | |
| | Units | Criteria | HOLY CROSS KITCHEN STAFF ROOM STANDING | HOLY CROSS KITCHEN STAFF ROOM FLUSHED | RDL | QC Batch |

| | | | | | | |
|---------------|------|-------------|--------|--------|--------|---------|
| Metals | | | | | | |
| . Lead (Pb) | mg/L | 0.01 | 0.0061 | 0.0019 | 0.0005 | 1606912 |

RDL = Reportable Detection Limit
 QC Batch = Quality Control Batch
 CRITERIA: Ontario Regulation 243/07 made under the Safe Drinking Water Act, 2002.
 Released June 7, 2007

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| | |
|-----------|--------|
| Package 1 | 13.0°C |
|-----------|--------|

Each temperature is the average of up to three cooler temperatures taken at receipt

GENERAL COMMENTS

Results relate only to the items tested.

Dufferin Peel Catholic District...
 Attention: Roland Lawton
 Client Project #: HOLY CROSS
 P.O. #: BN500116
 Project name: 500018994

Quality Assurance Report
 Maxxam Job Number: MA8A0482


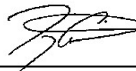
| QA/QC Batch | QC Type | Parameter | Date Analyzed yyyy/mm/dd | Value | Recovery | Units | QC Limits |
|-------------|--------------|-------------|-----------------------------|----------------|----------|-------|-----------|
| 1606912 JBW | MATRIX SPIKE | . Lead (Pb) | 2008/09/08 | | 101 | % | 80 - 120 |
| | Spiked Blank | . Lead (Pb) | 2008/09/08 | | 97 | % | 85 - 115 |
| | Method Blank | . Lead (Pb) | 2008/09/08 | ND, RDL=0.0005 | | mg/L | |
| | RPD | . Lead (Pb) | 2008/09/08 | 1.5 (1) | | % | 25 |

ND = Not detected
 RPD = Relative Percent Difference
 SPIKE = Fortified sample
 (1) POTENTIAL EXCEEDENCE FOR PARAMETER

Validation Signature Page

Maxxam Job #: A8A0482

The analytical data and all QC contained in this report were reviewed and validated by the following individual(s).



TROY CARRIERE, B.Sc., C.Chem, Scientific Specialist

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6740 Campobello Rd
Mississauga
Ontario L5N 2L8

REGULATION 243 DRINKING WATER SUB CHAIN OF CUSTODY RECORD

Tel: 905-817-5700
Fax: 905-817-5779
Toll Free: 1-800-563-6266

Samples are Regulated
Under Reg 243

5-Sep-08 13:28
JAMES ASPIN
A8A0482
M_O ENV-664

Report to:

Company Name: Dufferin-Peel Catholic District School Board
Client Contact: Roland Lawton, General Manager of Physical Plant Facilities
Address: 5685 Keaton Cres., Mississauga ON L5R 3H5
E-Mail: roland.lawton@dpcdsb.org Tel: 905-890-0708 ext. 23204
Project: Regulation 243 Fax: 905-890-5841
Quote #: A83456 P.O.#: BN500636
Lab Service Rep.: James Aspen

Invoice to: Same as "Report to"

PAGE ____ OF ____
ANALYSIS REQUESTED
Specify School Type
M.O.E. Assigned Water System Number
School Private School Day nursery
500018994
08 SEP 5 13:28

| Sample Identification | Sample Type (Please Specify Standing / Flushed) | Date Sampled | Time Sampled | Sampler Initials | Field Chlorine | | No. of Bottles | Lead | School | Private School | Day nursery |
|-----------------------|---|--------------|--------------|------------------|----------------|------|----------------|------|--------|----------------|-------------|
| | | | | | Total | Free | | | | | |
| Holy Cross | | | | | | | | | | | |
| Kitchen - Staffroom | Standing | 05-09-08 | 7:00 AM | | | | 1 | X | X | | |
| Kitchen - Staffroom | Flushed | 05-09-08 | 7:36 AM | | | | 1 | X | X | | |

* In accordance with the Safe Drinking Water Act (2002), notification of adverse results must be reported to the SAC, MOH & Waterworks. Failure to do so is an offence under the act. It is **IMPERATIVE** that the areas shaded in grey be filled out completely before submitting to Maxxam Analytics.

| TAT (Turnaround Time) | Notification Information for School, Private Schools & Day Nurseries | | LABORATORY USE ONLY |
|--|--|--------------------------------|--|
| RUSH TAT MUST HAVE PRIOR APPROVAL | Facility Name: Holy Cross | Medical Officer of Health | Received By: <i>Selma</i> |
| <input checked="" type="checkbox"/> Normal (5-15 Working Days) | Facility Address: 3615 Moring Star Drive | Region: Peel Region | Date: 08/09/08 Time: 13:28 |
| <input type="checkbox"/> RUSH (Specify Below) | Mississauga, ON L4T 1Y4 | Tel #: | Comments: |
| Date Due: | Tel: 905-677-5660 Fax: 905-677-1332 | Fax #: | 13/13/13C |
| PN # | E-mail: | Email: | |
| Relinquished by (Sign Name): <i>Andres del Rosario</i> | Date: 05-SEPT/08 | Laboratory Prepared Container: | <input type="checkbox"/> Yes <input type="checkbox"/> No |
| Relinquished by (Print Name): CESIDIO DEL-ROSCIO | Time: 7:36 AM | | |

NOTE: Samples received below 10°C. It is the Sampler's responsibility to ensure that this receiving temperature is maintained at this receiving temperature. Please ensure that individual waterworks.

SIF : Sample Inspection

Resolved By: Page 6 of 6

DW METALS PRESERVATION CHECKED