



## **Certificate of Analysis**

**Skyline Mountain Special Services District** 

Attn: Roy Fox 2201 SMR

Fairview, UT 84629

Sampled: 10/8/21 11:38

Sampled: 10/8/21 11:57

System #: UTAH20043

Work Order: 21J0526

Phone: (801) 361-6227

Fax:

Email: rrfox3768@gmail.com

Original Failure Date:

Lab #: 21J0526-01

Sample ID: Thads Peak Report to State: Yes

Sampled By: Jeremy Fox

Sample Type: Routine Field Res. Chlorine: Not Provided

System #: UTAH20043 Sample Source: DS001 Sample Point: DS001

Repeat Lab:

**Parameter Name** 

Coliform, Total

E. Coli

Result Units Absent Org/100 mL

Method **EPA 9223B** 

Test Started 10/8/2021 15:15 10/8/2021 15:15 **Test Ended** 

Flags

10/9/2021 16:30 10/9/2021 16:30

Lab #: 21J0526-02

Sample ID: Club House Report to State: Yes

**Absent** 

Sampled By: Jeremy Fox

Field Res. Chlorine: Not Provided

Sample Type: Routine

Sample Source: DS001

**EPA 9223B** 

Sample Point: DS001

Original Failure Date:

**Parameter Name** 

Repeat Lab:

Result Coliform, Total Absent E. Coli **Absent** 

Units Org/100 mL Org/100 mL

Org/100 mL

Method **EPA 9223B EPA 9223B** 

Test Started 10/8/2021 15:15 10/8/2021 15:15

10/9/2021 16:30 10/9/2021 16:30

Test Ended

Flags



Joyce Applegate, Project Manager

JujeApplegale

9632 South 500 West

Sandy, Utah 84070

801.262.7299 Main

866.792.0093 Fax

www.ChemtechFord.com

## **Chain of Custody/Sample Submittal Form**

\*TAL is a Chemtech-Ford Affiliate

1384 W 130 S	Orem, Ut 8405	8 801-229-2282		· ·		<del>-</del>	-						
Compa	ny or Name	5m55	D				Lab Notes:						
Address							[ ] Custody Seals [/ COC Incl		COC Includ	cluded Received within hold time			
Phone						[/] Containers Intact / ] COC Complete			Chec	Checked by:			
Contact Name/Email Roy Tox													
PO#Project							[/] Received on Ice [ ] Temp Blank Receiving Temp:C						
DW System # ut 20043 Report DW to State Of N							Correct Containers [ ] Headspace Present (VOC)						
							-		2-11-1				
Lab Work Order # Rush Due Date:													
(Lab Use)			Sample	Sample Sample (For Drink			cing Water)				(For Lab Use)		
Sample #	Sample ID	or Location	Date	Time	Matrix	Source	Sample Pt.		Analysis Re	quested		Bottle-Lot	Quantity
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	CG Dy	U			Date/ Time		Neceived D	y				Date/ IIIIle	
Relinguishe	ed by				Date/Time		Received b	V				Date/Time	