



9/29/2023

Work Order: 23I1846
Project: [none]

Skyline Mountain Special Services District
Attn: Roy Fox
2201 SMR
Fairview, UT 84629

Client Service Contact: 801.262.7299

The analyses presented on this report were performed in accordance with the National Environmental Laboratory Accreditation Program (NELAP) unless noted in the comments, flags, or case narrative. If the report is to be used for regulatory compliance, it should be presented in its entirety, and not be altered.



Approved By:

Joyce Applegate, Project Manager



Certificate of Analysis

Lab Sample No.: 2311846-01

Name: Skyline Mountain Special Services District	Sample Date: 9/22/2023 10:00 AM
Sample Site: Golf Course 19	Receipt Date: 9/22/2023 1:00 PM
Comments:	Sampler: Jeremy Fox
Sample Matrix: Drinking Water	Project:
PO Number:	System No.: UTAH20043
Source Code: DS001	Sample Point: DS001
	Report to State: Y

Parameter	Sample Result	EPA Max Contaminant Level (MCL)	Minimum Reporting Limit	Units	Analytical Method	Preparation Date/Time	Analysis Date/Time	Flag
Metals								
Copper, Total	0.0102	1.3	0.0010	mg/L	EPA 200.8/200.2	09/26/2023	09/26/2023	
Lead, Total	0.0005	0.015	0.0005	mg/L	EPA 200.8/200.2	09/26/2023	09/26/2023	



Certificate of Analysis

Lab Sample No.: 2311846-02

Name: Skyline Mountain Special Services District	Sample Date: 9/22/2023 10:30 AM
Sample Site: Golf Course 36	Receipt Date: 9/22/2023 1:00 PM
Comments:	Sampler: Jeremy Fox
Sample Matrix: Drinking Water	Project:
PO Number:	System No.: UTAH20043
Source Code: DS001	Sample Point: DS001
	Report to State: Y

Parameter	Sample Result	EPA Max Contaminant Level (MCL)	Minimum Reporting Limit	Units	Analytical Method	Preparation Date/Time	Analysis Date/Time	Flag
Metals								
Copper, Total	0.0021	1.3	0.0010	mg/L	EPA 200.8/200.2	09/26/2023	09/26/2023	
Lead, Total	ND	0.015	0.0005	mg/L	EPA 200.8/200.2	09/26/2023	09/26/2023	



Certificate of Analysis

Lab Sample No.: 2311846-03

Name: Skyline Mountain Special Services District	Sample Date: 9/22/2023 10:45 AM
Sample Site: Golf Course Well	Receipt Date: 9/22/2023 1:00 PM
Comments:	Sampler: Jeremy Fox
Sample Matrix: Drinking Water	Project:
PO Number:	System No.: UTAH20043
Source Code: WS003	Sample Point: WS003
	Report to State: Y

Parameter	Sample Result	EPA Max Contaminant Level (MCL)	Minimum Reporting Limit	Units	Analytical Method	Preparation Date/Time	Analysis Date/Time	Flag
Metals								
Copper, Total	0.0019	1.3	0.0010	mg/L	EPA 200.8/200.2	09/26/2023	09/26/2023	
Lead, Total	ND	0.015	0.0005	mg/L	EPA 200.8/200.2	09/26/2023	09/26/2023	



Certificate of Analysis

Lab Sample No.: 2311846-04

Name: Skyline Mountain Special Services District	Sample Date: 9/22/2023 11:00 AM
Sample Site: Club House Well	Receipt Date: 9/22/2023 1:00 PM
Comments:	Sampler: Jeremy Fox
Sample Matrix: Drinking Water	Project:
PO Number:	System No.: UTAH20043
Source Code: WS001	Sample Point: WS001
	Report to State: Y

Parameter	Sample Result	EPA Max Contaminant Level (MCL)	Minimum Reporting Limit	Units	Analytical Method	Preparation Date/Time	Analysis Date/Time	Flag
Metals								
Copper, Total	0.0569	1.3	0.0010	mg/L	EPA 200.8/200.2	09/26/2023	09/26/2023	
Lead, Total	0.0030	0.015	0.0005	mg/L	EPA 200.8/200.2	09/26/2023	09/26/2023	



Certificate of Analysis

Report Footnotes

Abbreviations

ND = Not detected at the corresponding Minimum Reporting Limit.

1 mg/L = one milligram per liter or 1 mg/Kg = one milligram per kilogram = 1 part per million.

1 ug/L = one microgram per liter or 1 ug/Kg = one microgram per kilogram = 1 part per billion.

1 ng/L = one nanogram per liter or 1 ng/Kg = one nanogram per kilogram = 1 part per trillion.

Data Comparisons

Values reported in **RED** exceed Primary Drinking Water standards.

Values reported in **BLUE** exceed Secondary Drinking Water standards.

BLANK values in the MCL column indicate no standard.

On calculated parameters, there may be a slight difference between summing the rounded values shown on the report vs the unrounded values used in the calculation.

CHAIN OF CUSTODY - SAMPLE SUBMITTAL FORM

DRINKING WATER & MICRO



**CHEMTECH-FORD
LABORATORIES**

Chemtech-Ford Laboratories
- Drop-Off Location -
1384 W 130 S
Orem, Ut. 84058
Phone: 801-229-2282

COMPANY: SMSSD
 ADDRESS: _____
 CITY/STATE/ZIP: _____
 PHONE #: _____
 CONTACT: Roy Foy
 EMAIL: _____
 PROJECT: _____
 PO Number: _____
 INVOICE EMAIL ADDRESS: _____

State System #	*Rush Due Date
Utah 20043	
Send to State	
<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	*Additional fees may apply

Sample Condition		Delivery Method	
<input type="checkbox"/> Custody Seals	<input checked="" type="checkbox"/> COC Complete	<input type="checkbox"/> UPS	<input type="checkbox"/> USPS
<input checked="" type="checkbox"/> Container Intact	<input checked="" type="checkbox"/> Sufficient Sample Volume	<input type="checkbox"/> FedEx	<input type="checkbox"/> Chemtech-Ford Courier
<input checked="" type="checkbox"/> COC/Labels Agree	<input type="checkbox"/> Headspace Present (VOC)	<input checked="" type="checkbox"/> Walk-in	<input type="checkbox"/> Client Courier
<input type="checkbox"/> Received on Ice	<input type="checkbox"/> Temperature Blank	Tracking #: _____	
<input checked="" type="checkbox"/> Correct Containers	<input checked="" type="checkbox"/> Received within Holding Time		

23I1846 CLIENT SAMPLE INFORMATION					
Lab Use Only	LOCATION / IDENTIFICATION	DATE	TIME	FACILITY ID (Source Code)	POINT CODE (DBP)
1	1. Golf Course P1	9/22/23	1006	DS001	
	2.				
2	3. Golf Course 36	9/22/23	1030	DS001	
	4.				
3	5. Golf Course well	9/22/23	1045	WS003	
	6.				
4	7. Club House well	9/22/23	1100	WS001	
	8.				
	9.				
	10.				
	11.				

TESTS REQUESTED										BACTERIA						
Field: Residual Chlorine										Lead + Copper	Total Coliform + E coli (Present/Absent)	Total Coliform + E coli (Enumerated)	HPC (Misc. Bacteria Plate Count)	R = Routine	Repeat OR - Original UP - Upstream DN = Downstream	Failed Sample Lab ID #
														I = Investigative		
														TR = Trigger Source		
														RP = Repeat		

Sampled by: [print] <u>M Jeremy Foy</u>		ON ICE NOT ON ICE Temp (C°): <u>12.8</u>
Special Instructions: _____		Samples received outside the EPA recommended temperature range of 0-6 C° may be rejected. <u>AQ1171 pres in rec.</u>
Relinquished by: [signature] <u>[Signature]</u>	Date/Time <u>9/22/23 1200</u>	Received by: [signature] <u>[Signature]</u>
Relinquished by: [signature] <u>[Signature]</u>	Date/Time <u>9-22-23 @ 1400</u>	Received by: [signature] <u>[Signature]</u>
Relinquished by: [signature] _____	Date/Time _____	Received by: [signature] _____
		Date/Time <u>9-22-23 @ 1300</u>
		Date/Time <u>9/22/23 1438</u>
		Date/Time _____

Payment Terms are net 30 days OAC. 1.5% interest charge per month (18% per annum). Client agrees to pay collection costs and attorney's fees.