

# LOGIN NOTICE CONFIRMATION (Work Order 25J0348)

## THIS IS NOT A REPORT

Need help reading your Login Notice? Check out this handy article:

<https://www.caro.ca/quick-guide-to-your-login-notice-how-to-review-your-sample-submission/>

**CLIENT** Wynndel Irrigation District

**PO NUMBER**

**PROJECT** Drinking Water

**PROJECT INFO** [none]

**QUOTATION ID**

Wynndel ID Master Bid

**SUBMITTED BY**

**COC NO.**

No Number

By engaging our services, you are agreeing to CARO's Standard Terms and Conditions outlined here: <https://www.caro.ca/terms-conditions>

## Receipt Details:

**RECEIVED** 10/2/2025 12:30:00 P

**LOCATION** Kelowna Lab

**DISPOSAL DATE** 11/1/2025

**SAMPLES LOGGED IN** 1

**LOGGED IN** 10/2/2025 2:06:00 PM

**ACCOUNT MGR** Hanane El Hannaoui

## Sample Condition Summary:

Quantity of Transport Vessels Received: 1

Receipt Temperature = 6.6°C

Broken Container(s)	No	Sampling Date(s) Missing	No	Incorrect Cont./Pres.	No	Custody Seals Intact	
Cooling Initiated	Yes	Sample(s) Frozen	No	Missing/Extra Samples	No	Documentation Issue	No
Environmental	No	Microbiological	No				
Sample(s) >10°C		Sample(s) >8°C					

**Note:** Sample transport temperatures of less than 8°C for microbiological parameters and less than or equal to 10°C for environmental parameters is recommended. Samples that exceed these values will still be processed. However, please note that the analytical results may be affected, especially for samples collected prior to the day of receipt.

## REPORT TO

Evan Sgang  
Wynndel Irrigation District  
5127 A Wynndel Road  
WYNNDEL, BC V0B 2N2  
Tel: (250) 866-5312

**INCLUDE QC** No  
**INCLUDE COC** No  
**EXTRAS** Guidelines

## INVOICE TO

Evan Sgang  
Wynndel Irrigation District  
5127 A Wynndel Road  
WYNNDEL, BC V0B 2N2  
Tel: (250) 866-5312

**FREQUENCY** With Report  
**GST EXEMPT** No  
**PAYMENT TERMS** Upon Receipt  
**MIN AMOUNT** N/A

## Delivery Plan:

**REPORT DUE** 10/9/2025 5:00:00 PM to 2025-10-14 17:00 (5-7 day TAT)

Contact Name	Email / Fax / Cellular	Login Notice	Report	Invoice	EDD	EDD Format	CC to	Fax	Text	Mail
Evan Sgang	wynndelid@gmail.com	✓	✓	✓						

## Analysis Schedule:

Analysis / Version	Due	Expires <sup>1</sup>	Status <sup>2</sup>	Comments
Wynndel Store (25J0348-01)   Matrix: Drinking Water   Sampled: 10/1/2025 8:30:00 AM				
Container(s) Submitted: A = C35_250 mL Plastic (Micro)				
Potability, Coliforms, Total & E. coli (CFU)	2025-10-14	2025-10-02	Batched	



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### Analysis Schedule, Continued:

Analysis / Version	Due	Expires <sup>1</sup>	Status <sup>2</sup>	Comments
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- <sup>1</sup> Red font indicates that the analysis has already or is about to expire. Note that all pH in water / Chlorine / Temperature / Dissolved Oxygen results will be automatically be qualified as they should be analyzed in the field for greatest accuracy.
- <sup>2</sup> Subcontracted samples will be sent to a CARO-approved subcontract laboratory for testing, in accordance with our Terms and Conditions. For further information, please contact your account manager or [teamcaro@caro.ca](mailto:teamcaro@caro.ca)

### Packages and their respective Analyses included in this Work Order:

#### Potability, Coliforms, Total & E. coli (CFU)

Coliforms, Total (CFU)

E. coli (CFU)

### Each Analysis includes the following Analytes and their respective Reporting Limits [RLs]:

#### Coliforms, Total (CFU) in Water

Reference Method: SM 9222\* (2015)

Units: CFU/100 mL

Coliforms, Total [1]

#### E. coli (CFU) in Water

Reference Method: SM 9222\* (2015)

Units: CFU/100 mL

E. coli [1]

Note: RLs on Final Report may be higher than expected due to: 1) limited sample volume, 2) high moisture, 3) analytical interferences

**Please verify that all of the information included in this Login Notice is correct. If there are any errors, omissions, or concerns, please contact us at 1-888-311-8846.**

**You can expect to receive the analytical report via email on or after the due date shown above.**

**Thank you for using CARO!**



# Microbiological Testing Chain of Custody (COC Form)



PASSMORE

LABORATORY LTD. [passmorelaboratory.ca](http://passmorelaboratory.ca)

250-226-7339 [test@passmorelaboratory.ca](mailto:test@passmorelaboratory.ca)

4240 Passmore Upper Rd. Winlaw, BC, V0G2J0

- Submit this completed form with sample(s)
- Ensure label on bottle is accurate
- Pay by cheque, cash, or e-transfer
- The report and receipt will be sent by email unless otherwise directed.
- This form and directions on how to collect the sample are on our website.
- \*Fecal coliform testing will be done on untreated or raw samples only unless otherwise requested.
- Tests other than bacteriological typically require a different sample bottle

REPORT  
NUMBER

CQ CA ET N

Rec.

Scan.

Log.

Sent.

Name or Company: Wynndel Irrigation District

Attention: Evan Stang

Email Report to: [wynndelid@gmail.com](mailto:wynndelid@gmail.com)

Email (CC) Report to: [Jennifer.Beverley@interiorhealth.ca](mailto:Jennifer.Beverley@interiorhealth.ca)

Phone: 403.634.4369

After Hours Phone (if applicable) : 403.634.4369

Receipt/Invoice to (Email): [wynndelid@gmail.com](mailto:wynndelid@gmail.com)

P.O. #:

Drinking Water Guideline on Report?  
(Health Canada)



Project Name and Info: Wynndel Weekly Microbiological Testing

For regulatory  
compliance?



Email report to public  
health or DW officer?:



## Sample information:

Sample information:							Bacteria test					
Sample #.	Sample Identification or Address	Date Collected (mm/dd/yy)	Time collected h:MM tt	Source: Well, Creek, Distribution, Other	Treated or Untreated	Temp (Lab)	Total Coliform E. Coli *Fecal Coliform	*Fecal Coliform	Heterotrophic Plate Count	Turbidity	Conductivity	Other (write)
1	Wynndel Stn CL <sup>2</sup> 0.56	10/1/25	8:30				<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
2							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
3							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
4							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
5							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
6							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
7							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	
8							<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	

Sampled by: Brent Mospat

## SAMPLE RECEIVING INFORMATION

(Lab): Received by:

Ace B 6.6°C

Date: 10/02/2025

Time: 12:30

Remarks: