

## Part III Form 2

### Section 11. ANNUAL REPORT.

Drinking-Water System Number:  
Drinking-Water System Name:  
Drinking-Water System Owner:  
Drinking-Water System Category:  
Period being reported:

|  |
|--|
|  |
|  |
|  |
|  |
|  |

**Complete if your Category is Large Municipal Residential or Small Municipal Residential**

Does your Drinking-Water System serve more than 10,000 people? Yes [ ] No [ ]

Is your annual report available to the public at no charge on a web site on the Internet? Yes [ ] No [ ]

Location where Summary Report required under O. Reg. 170/03 Schedule 22 will be available for inspection.

|  |
|--|
|  |
|--|

**Complete for all other Categories.**

Number of Designated Facilities served:

|  |
|--|
|  |
|--|

Did you provide a copy of your annual report to all Designated Facilities you serve? Yes [ ] No [ ]

Number of Interested Authorities you report to:

|  |
|--|
|  |
|--|

Did you provide a copy of your annual report to all Interested Authorities you report to for each Designated Facility? Yes [ ] No [ ]

**Note: For the following tables below, additional rows or columns may be added or an appendix may be attached to the report**

List all Drinking-Water Systems (if any), which receive all of their drinking water from your system:

| Drinking Water System Name | Drinking Water System Number |
|----------------------------|------------------------------|
|                            |                              |

Did you provide a copy of your annual report to all Drinking-Water System owners that are connected to you and to whom you provide all of its drinking water? Yes [ ] No [ ]

Indicate how you notified system users that your annual report is available, and is free of charge.

☐ Public access/notice via the web

☐ Public access/notice via Government Office

☐ Public access/notice via a newspaper

☐ Public access/notice via Public Request

☐ Public access/notice via a Public Library

☐ Public access/notice via other method \_\_\_\_\_

**Describe your Drinking-Water System**

**List all water treatment chemicals used over this reporting period**

**Were any significant expenses incurred to?**

☐ Install required equipment

☐ Repair required equipment

☐ Replace required equipment

**Please provide a brief description and a breakdown of monetary expenses incurred**

**Provide details on the notices submitted in accordance with subsection 18(1) of the Safe Drinking-Water Act or section 16-4 of Schedule 16 of O.Reg.170/03 and reported to Spills Action Centre**

| Incident Date | Parameter | Result | Unit of Measure | Corrective Action | Corrective Action Date |
|---------------|-----------|--------|-----------------|-------------------|------------------------|
|               |           |        |                 |                   |                        |
|               |           |        |                 |                   |                        |

# Drinking-Water Systems Regulation O. Reg. 170/03

**Microbiological testing done under the Schedule 10, 11 or 12 of Regulation 170/03, during this reporting period.**

|              | Number of Samples | Range of E.Coli Or Fecal Results (min #)-(max #) | Range of Total Coliform Results (min #)-(max #) | Number of HPC Samples | Range of HPC Results (min #)-(max #) |
|--------------|-------------------|--------------------------------------------------|-------------------------------------------------|-----------------------|--------------------------------------|
| Raw          |                   |                                                  |                                                 |                       |                                      |
| Treated      |                   |                                                  |                                                 |                       |                                      |
| Distribution |                   |                                                  |                                                 |                       |                                      |

**Operational testing done under Schedule 7, 8 or 9 of Regulation 170/03 during the period covered by this Annual Report.**

|                                             | Number of Grab Samples | Range of Results (min #)-(max #) |
|---------------------------------------------|------------------------|----------------------------------|
| Turbidity                                   |                        |                                  |
| Chlorine                                    |                        |                                  |
| Fluoride (If the DWS provides fluoridation) |                        |                                  |

***NOTE:** For continuous monitors use 8760 as the number of samples.*

***NOTE:** Record the unit of measure if it is **not** milligrams per litre.*

**Summary of additional testing and sampling carried out in accordance with the requirement of an approval, order or other legal instrument.**

| Date of legal instrument issued | Parameter | Date Sampled | Result | Unit of Measure |
|---------------------------------|-----------|--------------|--------|-----------------|
|                                 |           |              |        |                 |
|                                 |           |              |        |                 |

**Summary of Inorganic parameters tested during this reporting period or the most recent sample results**

| Parameter | Sample Date | Result Value | Unit of Measure | Exceedance |
|-----------|-------------|--------------|-----------------|------------|
| Antimony  |             |              |                 |            |
| Arsenic   |             |              |                 |            |
| Barium    |             |              |                 |            |
| Boron     |             |              |                 |            |
| Cadmium   |             |              |                 |            |
| Chromium  |             |              |                 |            |
| Lead      |             |              |                 |            |
| Mercury   |             |              |                 |            |
| Selenium  |             |              |                 |            |
| Sodium    |             |              |                 |            |
| Uranium   |             |              |                 |            |
| Fluoride  |             |              |                 |            |

|         |  |  |  |  |
|---------|--|--|--|--|
| Nitrite |  |  |  |  |
| Nitrate |  |  |  |  |

## Summary of Organic parameters sampled during this reporting period or the most recent sample results

| Parameter                                           | Sample Date | Result Value | Unit of Measure | Exceedance |
|-----------------------------------------------------|-------------|--------------|-----------------|------------|
| Alachlor                                            |             |              |                 |            |
| Aldicarb                                            |             |              |                 |            |
| Aldrin + Dieldrin                                   |             |              |                 |            |
| Atrazine + N-dealkylated metabolites                |             |              |                 |            |
| Azinphos-methyl                                     |             |              |                 |            |
| Bendiocarb                                          |             |              |                 |            |
| Benzene                                             |             |              |                 |            |
| Benzo(a)pyrene                                      |             |              |                 |            |
| Bromoxynil                                          |             |              |                 |            |
| Carbaryl                                            |             |              |                 |            |
| Carbofuran                                          |             |              |                 |            |
| Carbon Tetrachloride                                |             |              |                 |            |
| Chlordane (Total)                                   |             |              |                 |            |
| Chlorpyrifos                                        |             |              |                 |            |
| Cyanazine                                           |             |              |                 |            |
| Diazinon                                            |             |              |                 |            |
| Dicamba                                             |             |              |                 |            |
| 1,2-Dichlorobenzene                                 |             |              |                 |            |
| 1,4-Dichlorobenzene                                 |             |              |                 |            |
| Dichlorodiphenyltrichloroethane (DDT) + metabolites |             |              |                 |            |
| 1,2-Dichloroethane                                  |             |              |                 |            |
| 1,1-Dichloroethylene (vinylidene chloride)          |             |              |                 |            |
| Dichloromethane                                     |             |              |                 |            |
| 2,4-Dichlorophenol                                  |             |              |                 |            |
| 2,4-Dichlorophenoxy acetic acid (2,4-D)             |             |              |                 |            |
| Diclofop-methyl                                     |             |              |                 |            |
| Dimethoate                                          |             |              |                 |            |
| Dinoseb                                             |             |              |                 |            |
| Diquat                                              |             |              |                 |            |
| Diuron                                              |             |              |                 |            |
| Glyphosate                                          |             |              |                 |            |
| Heptachlor + Heptachlor Epoxide                     |             |              |                 |            |
| Lindane (Total)                                     |             |              |                 |            |
| Malathion                                           |             |              |                 |            |
| Methoxychlor                                        |             |              |                 |            |
| Metolachlor                                         |             |              |                 |            |

|                                              |  |  |  |  |
|----------------------------------------------|--|--|--|--|
| Metribuzin                                   |  |  |  |  |
| Monochlorobenzene                            |  |  |  |  |
| Paraquat                                     |  |  |  |  |
| Parathion                                    |  |  |  |  |
| Pentachlorophenol                            |  |  |  |  |
| Phorate                                      |  |  |  |  |
| Picloram                                     |  |  |  |  |
| Polychlorinated Biphenyls(PCB)               |  |  |  |  |
| Prometryne                                   |  |  |  |  |
| Simazine                                     |  |  |  |  |
| THM<br>(NOTE: show latest annual average)    |  |  |  |  |
| Temephos                                     |  |  |  |  |
| Terbufos                                     |  |  |  |  |
| Tetrachloroethylene                          |  |  |  |  |
| 2,3,4,6-Tetrachlorophenol                    |  |  |  |  |
| Triallate                                    |  |  |  |  |
| Trichloroethylene                            |  |  |  |  |
| 2,4,6-Trichlorophenol                        |  |  |  |  |
| 2,4,5-Trichlorophenoxy acetic acid (2,4,5-T) |  |  |  |  |
| Trifluralin                                  |  |  |  |  |
| Vinyl Chloride                               |  |  |  |  |

List any Inorganic or Organic parameter(s) that exceeded half the standard prescribed in Schedule 2 of Ontario Drinking Water Quality Standards.

| Parameter | Result Value | Unit of Measure | Date of Sample |
|-----------|--------------|-----------------|----------------|
|           |              |                 |                |
|           |              |                 |                |

(Only if DWS category is large municipal residential, small municipal residential, large municipal non residential, non municipal year round residential, large non municipal non residential)