

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

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 Munica Residential or Small Municipal Residentia	
Does your Drinking-Water System serve more than 10,000 people? Yes [] No [Number of Designated Facilities served:
Is your annual report available to the pul at no charge on a web site on the Internet Yes [] No []	
Location where Summary Report require under O. Reg. 170/03 Schedule 22 will be available for inspection.	
	Did you provide a copy of your annual report to all Interested Authorities you report to for each Designated English?

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

Yes [] No []

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 $[\]$



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Indicate ho	ow you notified syste	em users that	your annu	ıal report is availal	ole, and is free
of charge.					
[] Public a	access/notice via the	e web			
[] Public a	access/notice via Go	vernment Of	fice		
[] Public a	access/notice via a n	ewspaper			
Public a	access/notice via Pu	blic Request			
	access/notice via a P	_	7		
	access/notice via oth	•			
Describe v	our Drinking-Wate	r System			
<u></u>	3 0-12 2 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1 1	- 2J200111			
List all wa	ter treatment chemi	icals used ove	r this repo	rting period	
			_		
•	significant expenses				
	tall required equipme				
[] Rep	oair required equipme	ent			
[] Rep	olace required equipm	nent			
				_	
Please pro	vide a brief descript	tion and a bre	eakdown of	f monetary expense	s incurred
Duovido do	tails on the notices	auhmittad in 1	a a a a mada mada	a with aubaatian 10	Q(1) of the Cofe
	tails on the notices				• •
_	Water Act or section	n 16-4 of Sche	dule 16 of	O.Reg.170/03 and	reported to
Spills Action		D 1/	TT '4 C		
Incident Date	Parameter	Result	Unit of Measure	Corrective Action	Corrective Action Date
Date			Measure		Action Date
					-
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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.

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	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.

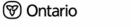
NOTE: Record the unit of measure if it is **not** milligrams per litre.

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				



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Nitrite		
Nitrate		

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

recent sample results	10.	D 14	TT */ 0	
Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
Alachlor	Date	value	Wieasure	
Aldicarb				
Aldrin + Dieldrin				
Atrazine + N-dealkylated metobolites				
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				



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Metribuzin		
Monochlorobenzene		
Paraquat		
Parathion		
Pentachlorophenol		
Phorate		
Picloram		
Polychlorinated Biphenyls(PCB)		
Prometryne		
Simazine		
THM (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)