

**Section 11. ANNUAL REPORT.**

<b>Drinking-Water System Number:</b>	210003912
<b>Drinking-Water System Name:</b>	Finch Drinking Water System
<b>Drinking-Water System Owner:</b>	Township of North Stormont
<b>Drinking-Water System Category:</b>	Large Municipal Residential
<b>Period being reported:</b>	January 1 to December 31, 2017

<p><b><u>Complete if your Category is Large Municipal Residential or Small Municipal Residential</u></b></p> <p><b>Does your Drinking-Water System serve more than 10,000 people? Yes [ ] No [x]</b></p> <p><b>Is your annual report available to the public at no charge on a web site on the Internet? Yes [x] No [ ]</b></p> <p><b>Location where Summary Report required under O. Reg. 170/03 Schedule 22 will be available for inspection.</b></p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">                 Available at the Township of North Stormont municipal office located at 15 Union Street, Berwick, Ontario and on their website: <a href="http://www.northstormont.ca">www.northstormont.ca</a> </div>	<p><b><u>Complete for all other Categories.</u></b></p> <p><b>Number of Designated Facilities served:</b>  <input style="width: 100px; height: 20px;" type="text"/></p> <p><b>Did you provide a copy of your annual report to all Designated Facilities you serve? Yes [ ] No [ ]</b></p> <p><b>Number of Interested Authorities you report to:</b> <input style="width: 100px; height: 20px;" type="text"/></p> <p><b>Did you provide a copy of your annual report to all Interested Authorities you report to for each Designated Facility? Yes [ ] No [ ]</b></p>
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**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
n/a	n/a

**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 [ ] N/A [x]**

**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**

The Finch Drinking Water System consists of two wells, a pump house with treatment, a clearwell, an elevated storage tank and approximately 9 kilometers of distribution watermains. Groundwater is pumped from one of two source wells through an aeration tower for hydrogen sulphide removal. From the tower, water flows to a contact tank where sodium hypochlorite is added and allowed sufficient time for disinfection. As water is used throughout the distribution system, the level of the water tower falls to a preset limit and a pump in the plant starts. The pump draws water from the contact tank and forces it through pressure filters and out of the treatment plant to refill the water tower.

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

Sodium hypochlorite was used at an average dosage rate of 4.6 mg/L.

**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**

- Rebuilt 4 hydrants
- Replaced alarm dialer and signal wires at WTP
- Purchased well pump for Well #1
- Replaced well pump in Well #2
- Purchased chlorine pump rebuild kits
- Replaced curb stops
- Replaced front entry doors at WTP
- Replaced furnace unit heater, venting and gas piping
- Replaced manhole frame and cover

**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
01/09/2017	Sodium	93.3	mg/L	Resample	01/16/2017

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

	Number of Samples	Range of <i>E. coli</i> Or Fecal Results (min #)-(max #)	Range of Total Coliform Results (min #)-(max #)	Number of HPC Samples	Range of HPC Results (min #)-(max #)
<b>Raw</b>	96	0 - 0	0 - 2	n/a	n/a
<b>Treated</b>	52	0 - 0	0 - 0	52	1 - 540
<b>Distribution</b>	104	0 - 0	0 - 0	52	0 - 340

**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 #)
<b>Turbidity</b>	24	0.24 - 0.35 NTU
<b>Treated Chlorine</b>	8760	0.24 - 4.29 mg/L
<b>Distribution Chlorine</b>	8760	0.42 - 2.75 mg/L

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

**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
n/a				

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

Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
<b>Antimony</b>	01/21/2015	<0.0001	mg / L	No
<b>Arsenic</b>	01/21/2015	0.0009	mg / L	No
<b>Barium</b>	01/21/2015	0.377	mg / L	No
<b>Boron</b>	01/21/2015	0.177	mg / L	No
<b>Cadmium</b>	01/21/2015	<0.00002	mg / L	No
<b>Chromium</b>	01/21/2015	<0.002	mg / L	No
<b>*Lead</b>	n/a	n/a	mg / L	No
<b>Mercury</b>	01/21/2015	<0.00002	mg / L	No
<b>Selenium</b>	01/21/2015	0.002	mg / L	No
<b>Sodium</b>	01/09/2017	93.3	mg / L	Yes
<b>Uranium</b>	01/21/2015	0.00008	mg / L	No
<b>Fluoride</b>	01/09/2017	0.47	mg / L	No
<b>Nitrite</b>	10/16/2017	<0.003	mg / L	No
<b>Nitrate</b>	10/16/2017	0.116	mg / L	No

\*only for drinking water systems testing under Schedule 15.2; this includes large municipal non-residential systems, small municipal non-residential systems, non-municipal seasonal residential systems, large non-municipal non-residential systems, and small non-municipal non-residential systems.

**Summary of lead testing under Schedule 15.1 during this reporting period**

(applicable to the following drinking water systems; large municipal residential systems, small municipal residential systems, and non-municipal year-round residential systems)

Location Type	Number of Samples	Range of Lead Results (min#) – (max #)	Number of Exceedances
Plumbing	n/a	n/a	n/a
Distribution	1	0.08 µg / L	0

**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	01/21/2015	<0.3	µg / L	No
Aldicarb	01/21/2015	<3	µg / L	No
Aldrin + Dieldrin	01/21/2015	<0.02	µg / L	No
Atrazine + N-dealkylated metabolites	01/21/2015	<0.5	µg / L	No
Azinphos-methyl	01/21/2015	<1	µg / L	No
Bendiocarb	01/21/2015	<3	µg / L	No
Benzene	01/21/2015	<0.5	µg / L	No
Benzo(a)pyrene	01/21/2015	<0.005	µg / L	No
Bromoxynil	01/21/2015	<0.3	µg / L	No
Carbaryl	01/21/2015	<3	µg / L	No
Carbofuran	01/21/2015	<1	µg / L	No
Carbon Tetrachloride	01/21/2015	<0.2	µg / L	No
Chlordane (Total)	01/21/2015	<0.04	µg / L	No
Chlorpyrifos	01/21/2015	<0.5	µg / L	No
Cyanazine	01/21/2015	<0.5	µg / L	No
Diazinon	01/21/2015	<1	µg / L	No
Dicamba	01/21/2015	<5	µg / L	No
1,2-Dichlorobenzene	01/21/2015	<0.1	µg / L	No
1,4-Dichlorobenzene	01/21/2015	<0.2	µg / L	No
Dichlorodiphenyltrichloroethane (DDT) + metabolites	01/21/2015	<0.01	µg / L	No
1,2-Dichloroethane	01/21/2015	<0.1	µg / L	No
1,1-Dichloroethylene (vinylidene chloride)	01/21/2015	<0.1	µg / L	No
Dichloromethane	01/21/2015	<0.3	µg / L	No
2-4 Dichlorophenol	01/21/2015	<0.1	µg / L	No
2,4-Dichlorophenoxy acetic acid (2,4-D)	01/21/2015	<5	µg / L	No
Diclofop-methyl	01/21/2015	<0.5	µg / L	No
Dimethoate	01/21/2015	<1	µg / L	No
Dinoseb	01/21/2015	<0.5	µg / L	No
Diquat	01/21/2015	<5	µg / L	No
Diuron	01/21/2015	<5	µg / L	No
Glyphosate	01/21/2015	<25	µg / L	No
Heptachlor + Heptachlor Epoxide	01/21/2015	<0.1	µg / L	No
Lindane (Total)	01/21/2015	<0.1	µg / L	No
Malathion	01/21/2015	<5	µg / L	No
Methoxychlor	01/21/2015	<0.1	µg / L	No

Metolachlor	01/21/2015	<3	µg / L	No
Metribuzin	01/21/2015	<3	µg / L	No
Monochlorobenzene	01/21/2015	<0.2	µg / L	No
Paraquat	01/21/2015	<1	µg / L	No
Parathion	01/21/2015	<3	µg / L	No
Pentachlorophenol	01/21/2015	<0.1	µg / L	No
Phorate	01/21/2015	<0.3	µg / L	No
Picloram	01/21/2015	<5	µg / L	No
Polychlorinated Biphenyls(PCB)	01/21/2015	<0.05	µg / L	No
Prometryne	01/21/2015	<0.1	µg / L	No
Simazine	01/21/2015	<0.5	µg / L	No
Temephos	01/21/2015	<10	µg / L	No
Terbufos	01/21/2015	<0.3	µg / L	No
Tetrachloroethylene	01/21/2015	<0.2	µg / L	No
2,3,4,6-Tetrachlorophenol	01/21/2015	<0.1	µg / L	No
Triallate	01/21/2015	<10	µg / L	No
Trichloroethylene	01/21/2015	<0.1	µg / L	No
2,4,6-Trichlorophenol	01/21/2015	<0.1	µg / L	No
2,4,5-Trichlorophenoxy acetic acid (2,4,5-T)	01/21/2015	<10	µg / L	No
Trifluralin	01/21/2015	<0.5	µg / L	No
Vinyl Chloride	01/21/2015	<0.2	µg / L	No

Distribution Water Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
THM (NOTE: show latest annual average)	10/16/17	63.75	µg / L	No
HAA (NOTE: show latest annual average)	10/16/17	13.98	µg / L	No

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
n/a			