

**Part III Form 2**

**Section 11. ANNUAL REPORT.**

<b>Drinking-Water System Number:</b>	260046904
<b>Drinking-Water System Name:</b>	Dawn-Euphemia Water Distribution System
<b>Drinking-Water System Owner:</b>	Township of Dawn-Euphemia
<b>Drinking-Water System Category:</b>	WD I
<b>Period being reported:</b>	2021

<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 Report required under O. Reg. 170/03 Schedule 22 will be available for inspection.</b></p> <div style="border: 1px solid black; padding: 5px;"> <p>Township of Dawn-Euphemia Municipal Office Municipal Library, Florence, Ontario Municipal Website</p> </div>	<p><b><u>Complete for all other Categories.</u></b></p> <p><b>Number of Designated Facilities served:</b> <input type="text" value="n/a"/></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 type="text" value="n/a"/> none</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 [ ] n/a</b></p>
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**List Drinking-Water Systems, which receive all of their drinking water from your system:**

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 [x] No [ ] n/a

**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

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

- 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 - notice included on water bills

**Describe your Drinking-Water System**

Water distribution system with 50 mm dia. to 200 mm dia. Water receives from the Township of Enniskillen Water Distribution System at five metered connections

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

none

**Were any significant expenses incurred to?**

- Install required equipment
- Repair required equipment
- Replace required equipment

**Describe**

n/a

**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

**Microbiological testing done under section 8 (2) during this reporting period**

	Number of Samples	Range of E.Coli or Fecal Results (#-#)	Range of Total Coliform Results (#-#)	Number of HPC Samples	Range of HPC Results (#-#)
Raw					
Treated					
Distribution	208	0 – 0	0 – 0.00	208	<10 – 20

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

	Number of Grab Samples	Range of Results (#-#)
Chlorine – dist.	208	0.45 – 1.71

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






**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 category is large municipal residential, small municipal residential, large municipal non residential, small municipal non residential, large non municipal non residential)