

DRINKING WATER SYSTEM ANNUAL REPORT			
Reporting Period:	January 1 st to Decer	mber 31 st , (year)	
Water System			
Water System Owner			
Primary Contact Name (Operator or Manager)			
Phone Number (Operator or Manager)			
E-mail (Operator or Manager)			
DESCRIBE YOUR WATER SUPPLY SYSTEM			
What is the Source(s) of Raw Water?			
Deep Well Shallow Well	Surface Water	Other	
If other, specify details:			
Does the Drinking Water System have Prim	nary Disinfection?	Yes	□No
Chlorination Ultraviolet Light	Ozone	Other	
If other, specify details:			
Does the Drinking Water System have Seco	ndary Disinfection?	Yes	□No
Chlorination Other			
If other, specify details:			
Does the Drinking Water System have Filtro	ation?	Yes	∐No
Check all boxes that apply	□a 		
Cartridge Filter(s) Carbon Filter	Sand Filtration	Reverse Osmosis	Other
If other, specify details:			
D			
PUBLIC REPORTING			
Emergency Response & Contingency Plan (
Is your ERCP up to Date?	Yes	∐No	
How do you Inform the System Users of the Hand Delivered Bulletin Board	Newspaper	Utility Bill Insert	Website
			□
Other (specify details) Radio, Social Mo Drinking Water System Annual Report	Euld		
How do you Inform the System Users of the	Annual Report?		
Hand Delivered Bulletin Board	Newspaper	Utility Bill Insert	Website
Other (specify details)	Писмэрары		



WATER QUALITY STANDARDS FOR POTABLE WATER Parameter: Standard: Did this system meet standard? Escherichia coli (for all samples) No detectable Escherichia coli per 100ml Yes No Total Coliform Bacteria (if only 1 sample collected in a 30 No detectable total coliform bacteria per 100ml Yes No day period) Total Coliform Bacteria No more than 10% of samples contain total	Are you in compliance with your Operating Permit?	Are you in compliance with your Operating Permit?	Are you in compliance with your BACTERIOLOGICAL TESTING AND DRIN How many bacteriological samp What is the minimum required s Additional sampling details:	r Operating Permit? NKING WATER PROTECTION REGULATION WATER Poles were collected during this reporting p	es R QUALITY STANI	
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and the second s		Date TC/100ml E.coli/100ml Reason Corrective Action		• •		
the table below; attach additional sheets if necessary.	Date TC/100ml E.coli/100ml Reason Corrective Action		Date TC/100ml	E.coli/100ml Reason	Corre	ctive Action



CHEMICAL SAMPLING COMPLETED DURING THIS REPORTING PERIOD								
Was any chen	Was any chemical sampling conducted during reporting period?							
If no, when w	If no, when were the last chemical samples conducted for this system? (date)							
If yes, attach	If yes, attach a list of the chemical results							
	If any water samples did not meet the Guidelines for Canadian Drinking Water Quality, record the results in the table below; attach additional sheets if necessary.							
Next scheduled full chemical test (date)								
Parameter	Result	Corrective A	ction / Treatmer	nt / Comments				
Additional Testing								
If yes, check all boxes that apply: Chlorine Turbidity Other (details) Are the results available on request? If any additional testing or sampling was conducted, record results in the table below; attach additional sheets if necessary.								
Additional Te	sting & Reason	for Sampling	Corrective Act	ion Taken				
WATER QUALITY COMPLAINTS								
Were there any water quality complaints in this reporting period? (e.g. taste, odour, colour etc.)								
If yes, complete the table below; attach additional sheets if necessary.								
Date	Water Qualit	ty Complaint	Corrective	Action / Treatm	nent			
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OPERATIONAL PROBLEMS						
Were there any operational problems during this reporting period? (e.g. insufficient water supply, malfunction of						
If yes, complete the table below; att	tach additional she	ets if necessary.				
Incident Date Type of Operational	Problem Corr	ective Action Taker	1			
MAJOR UPGRADES/REPAIRS & EXPENSES						
Were there any major upgrades/repairs or any major costs incurred during this reporting period?						
If yes, complete the table below; attach additional sheets if necessary.						
Major Upgrades/Expenses	Details					
Improvements required by DWO						
Additions/changes to system						
Purchase or install new equipment						
Equipment repair or replacement						
Annual maintenance of system						
Specialist report						
Other						
FUTURE IMPROVEMENTS						
Are there any plans for future impro	ovements?	Yes	S No			
If yes, complete the table below; attach additional sheets if necessary. New system commissioned in 2021						
Future Upgrades or Improvements Estimated Date of Completion						
		1				
Click here to enter a date.						
DATE COMPLETED:		COMPLETED BY:				

Malahat Forest

Facility Information

Location 175 Ingram Street Duncan

Type 2-14 Connections

Facility Sampling History

Location S2 MF WTP Treated Water	Date 16-Dec-2024	Total Coliform	E. Coli/Enterococci
S2 MF WTP Treated Water	18-Nov-2024	LT1	LT1
S1 MF WTN 95694 RAW Water	21-Oct-2024	LT1	LT1
S1 MF WTN 95694 RAW Water	17-Sep-2024	LT1	LT1
S1 MF WTN 95694 RAW Water	20-Aug-2024	LT1	LT1
S1 MF WTN 95694 RAW Water	23-Jul-2024	LT1	LT1
S1 MF WTN 95694 RAW Water	24-Jun-2024	LT1	LT1
S1 MF WTN 95694 RAW Water	17-Jun-2024	QRWRT	QRWRT
S1 MF WTN 95694 RAW Water	21-May-2024	LT1	LT1
S1 MF WTN 95694 RAW Water	22-Apr-2024	LT1	LT1
S1 MF WTN 95694 RAW Water	18-Mar-2024	LT1	LT1
S1 MF WTN 95694 RAW Water	20-Feb-2024	LT1	LT1
S1 MF WTN 95694 RAW Water	23-Jan-2024	LT1	LT1

MALAHAT FOREST WATER SYSTEM

DISTRIBUTION

				101 TRAIL HEAD
			Sample ID	ROAD WTP
			•	(WTXTBD)
			Sampling Date	06/06/24
			Sampling Time	1:35 PM
Parameter Name	MAC	AO	Units	Result
Nitrite (N)	1		mg/L	<0.0050
Nitrate (N)	10		mg/L	0.505
Conductivity			uS/cm	190
рН			рН	8
Total Dissolved Solids		500	mg/L	120
Alkalinity (PP as CaCO3)			mg/L	<1.0
Alkalinity (Total as CaCO3)			mg/L	76
Bicarbonate (HCO3)			mg/L	93
Carbonate (CO3)			mg/L	<1.0
Hydroxide (OH)			mg/L	<1.0
Chloride (CI)		250	mg/L	3
Sulphate (SO4)		500	mg/L	8.8
True Colour		15	Col. Unit	12.7
Nitrate plus Nitrite (N)			mg/L	0.505
Langelier Index (@ 20C)			N/A	-0.367
Langelier Index (@ 4C)			N/A	-0.617
Saturation pH (@ 20C)			N/A	8.37
Saturation pH (@ 4C)			N/A	8.62
Dissolved Fluoride (F)	1.5		mg/L	<0.050
Tannins and Lignins			mg/L	<0.2
Turbidity	see remark	see remark	NTU	<0.10
Total Hardness (CaCO3)			mg/L	44.6
Total Aluminum (Al)	2900		ug/L	4.7
Total Antimony (Sb)	6		ug/L	<0.50
Total Arsenic (As)	10		ug/L	0.11
Total Barium (Ba)	2000		ug/L	5.8
Total Beryllium (Be)			ug/L	<0.10
Total Bismuth (Bi)			ug/L	<1.0
Total Boron (B)	5000		ug/L	<50
Total Cadmium (Cd)	7		ug/L	<0.010
Total Chromium (Cr)	50		ug/L	<1.0
Total Cobalt (Co)			ug/L	<0.20
Total Copper (Cu)	2000	1000	ug/L	1.1
Total Iron (Fe)		300	ug/L	301
Total Lead (Pb)	5		ug/L	<0.20
Total Manganese (Mn)	120	20	ug/L	11.9
Total Molybdenum (Mo)			ug/L	<1.0

MALAHAT FOREST WATER SYSTEM

DISTRIBUTION

				101 TRAIL HEAD
			Sample ID	ROAD WTP
				(WTXTBD)
			Sampling Date	06/06/24
			Sampling Time	1:35 PM
Parameter Name	MAC	AO	Units	Result
Total Nickel (Ni)			ug/L	<1.0
Total Selenium (Se)	50		ug/L	<0.10
Total Silicon (Si)			ug/L	11400
Total Silver (Ag)			ug/L	<0.020
Total Strontium (Sr)	7000		ug/L	83.7
Total Thallium (Tl)			ug/L	<0.010
Total Tin (Sn)			ug/L	<5.0
Total Titanium (Ti)			ug/L	<5.0
Total Uranium (U)	20		ug/L	<0.10
Total Vanadium (V)			ug/L	<5.0
Total Zinc (Zn)		5000	ug/L	<5.0
Total Zirconium (Zr)			ug/L	<0.10
Total Calcium (Ca)			mg/L	12.8
Total Magnesium (Mg)			mg/L	3.09
Total Potassium (K)			mg/L	1.1
Total Sodium (Na)		200	mg/L	10.7
Total Sulphur (S)			mg/L	<3.0
Total Mercury (Hg)	1		ug/L	0.0086
Total Total Kjeldahl Nitrogen (Calc)			mg/L	0.051
Total Organic Carbon (C)			mg/L	<0.50
Total Nitrogen (N)			mg/L	0.555
Total Ammonia (N)			mg/L	<0.015
Sulphide (as H2S)		0.05	mg/L	<0.0020
Total Sulphide		0.05	mg/L	<0.0018
Total Coliforms	0		CFU/100mL	0
E. coli	0		CFU/100mL	0
Heterotrophic Plate Count			CFU/mL	<1.0
Fecal Coliforms			CFU/100mL	0
Non-Coliform (Background)			CFU/100mL	<1
Iron Bacteria			CFU/mL	<25
Sulphate reducing bacteria			CFU/mL	<75
Total Trihalomethanes	100		ug/L	<1.0
Bromodichloromethane			ug/L	<1.0
Bromoform			ug/L	<1.0
Dibromochloromethane			ug/L	<1.0
Chloroform			ug/L	<1.0
Dalapon			ug/L	<5.0

MALAHAT FOREST WATER SYSTEM

DISTRIBUTION

				101 TRAIL HEAD
			Sample ID	ROAD WTP
				(WTXTBD)
			Sampling Date	06/06/24
			Sampling Time	1:35 PM
Parameter Name	MAC	AO	Units	Result
Monochloroacetic Acid			ug/L	<5.0
Monobromoacetic Acid			ug/L	<5.0
Dichloroacetic Acid			ug/L	<5.0
Trichloroacetic Acid			ug/L	<5.0
Bromochloroacetic Acid			ug/L	<5.0
Dibromoacetic Acid			ug/L	<5.0
Total Haloacetic Acids	80		ug/L	<5.0