Kerry Park Recreation Centre

ANNUAL REPORT

(Drinking Water System Name)

Reporting Period:	January to December 2012
Operating Permit Number:	
Drinking Water System Owner:	Cowichan Valley Regional District, Kerry Park Recreation Centre
Drinking Water System Contact:	
Name: <u>Tony</u>	Liddle
Phone No: <u>(250</u> )	701-3120 (cell), 250-743-5922 (main office)
Email: <u>tliddle</u>	@cvrd.bc.ca

# 1 Microbiological testing completed during this reporting period:

a. bacteriological results attached to this report.

b. adverse bacteriological results:

 $\boxtimes$  None detected  $\square$  Listed in table below:

#### **Adverse Results:**

Date	Total coliform	E. Coli	Reason	Corrective Action

### 2 Chemical results for this reporting period:

- a. most recent chemical analysis attached to this report.
- b. chemical parameters listed in *The Guidelines for Canadian Drinking Water Quality ("the Guidelines")* are:

⊠ all within GCDWQ

above the GCDWQ and are listed below:

### Parameters above the Guidelines:

Parameter	Result	Max. Acceptable Concentration	Aesthetic Objective	Treatment/Corrective Action

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3 Summarize additional testing and sampling carried out in accordance with the requirement of a Water Source approval, Written Order or as per the conditions of your *Operating Permit*.

no additional testing

 $\boxtimes$  additional testing listed below:

# Additional testing:

	-		
Description of parameter & reason for sampling	Health parameter or non-health related parameter	Corrective action necessary (Y/N?)	Corrective action taken
Continue to monitor and record chlorine residual levels	Health Parameter	Ν	

# 4 Water Quality Complaints:

During the course of the year, the water system:

 $\boxtimes$  did not receive water quality complaints (ie taste, odour, colour, etc)  $\square$  received water quality complaints and are listed below:

### Water Quality Complaints:

Date	Water quality complaint	Corrective action taken

5 Adverse results: Total number of adverse results during this reporting period for insufficient water supply, malfunction of disinfection equipment or elevated turbidity:

 $\boxtimes$  No adverse results

Adverse results listed below:

### **Adverse Results:**

Incident date	Corrective action	Corrected by

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6	Description of the system: Sources of raw water: Groundwater Surface water Other (specify):	
	Does the drinking water system have disinfection Disinfection methods (check boxes that apply): Chlorination Ultraviolet light Ozonation Other (specify):	on? ⊠Yes ⊡No
	Does the drinking water system have treatment Treatment type (check boxes that apply): Particulate cartridge filters Membrane filtration Carbon filter Sand filtration Reverse osmosis Other (specify):	? □Yes ⊠No
7	Major expenses incurred during the period covered To purchase or install required equipment: N/A To replace equipment: To complete annual maintenance of system: (sy replacement of carbon filters, etc) To complete specialist report (specify):	
8	<ul> <li>Further communication with users:</li> <li>a. Indicate how you notified system users that you available, and is free of charge: <ul> <li>hand delivered</li> <li>public access/ notice via web</li> <li>public access/notice via government of public access/notice via newspaper</li> <li>public access/notice via bill stuffer</li> <li>public access/ notice via other method To be posted on CVRD-Kerry Park web</li> </ul> </li> </ul>	office d (specify):
	<ul> <li>b. Improvements or remedial actions required by t Officer:</li> <li></li></ul>	ort attached to report

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# **Improvements/Remedial Actions:**

Required action	Completion date

# c. Future water system improvements:

☐ no improvements planned ⊠ improvements listed below:

#### **Future Improvements:**

Future plans	Planned completion date
Continuing to work with CVRD Water Department to improve operation and maintenance of our system	Ongoing

d. Emergency Response Plan can be accessed by:

posting on web
posting at nearest government office
Contacting water system owner
Other (specify):

JL:kl N: Forms\Drinking Water Systems Annual Report template