

**Part III Form 2  
Section 11. ANNUAL REPORT.**

<b>Drinking-Water System Number:</b>	220009933
<b>Drinking-Water System Name:</b>	Colgan Well Supply
<b>Drinking-Water System Owner:</b>	Township of Adjala-Tosorontio
<b>Drinking-Water System Category:</b>	Small Municipal Residential
<b>Period being reported:</b>	January 1, 2008 to December 31, 2008

<p><b><u>Complete if your Category is Large Municipal Residential or Small Municipal Residential</u></b></p> <p>Does your Drinking-Water System serve more than 10,000 people? Yes [ ] No [x]</p> <p>Is your annual report available to the public at no charge on a web site on the Internet? Yes [x] No [ ]</p> <p>Location where Summary Report required under O. Reg. 170/03 Schedule 22 will be available for inspection.</p> <div style="border: 1px solid black; padding: 5px; margin-top: 10px;">                 Summary Report is available for inspection at the Municipal Office.             </div>	<p><b><u>Complete for all other Categories.</u></b></p> <p>Number of Designated Facilities served:  <input style="width: 100px; height: 20px;" type="text"/></p> <p>Did you provide a copy of your annual report to all Designated Facilities you serve?                  Yes [ ] No [ ]</p> <p>Number of Interested Authorities you report to: <input style="width: 100px; height: 20px;" type="text"/></p> <p>Did you provide a copy of your annual report to all Interested Authorities you report to for each Designated Facility?                  Yes [ ] No [ ]</p>
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**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
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 [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 Colgan Water system is classified as a Small Municipal Residential water system that currently serves approximately 71 homes, plus a school. Water is supplied via two Municipal wells, one pumphouse and an inground reservoir system. Inspections and maintenance duties are conducted by Municipal staff on a regular basis, and are in compliance with O.Reg 170/03 to ensure that Colgan's water supply is safe to drink.

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

Sodium Hypochlorite (Chlorine)  
Polyphosphate

**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**

Change Meters for calibration;  
Installation of new Chlorine analyzer  
Replacement of Lift Pump #1

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
09/01/08	Sodium	33	Mg/L	Resample/Flush	09/03/08
09/01/08	Sodium	33	Mg/L	Resample/Flush	09/03/08

### 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 #)
<b>Raw</b>	104	0-8	0-1	104	0-200
<b>Treated</b>	52	0	0	52	0-3
<b>Distribution</b>	104	0	0-1	104	0-88

### 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>	8760	0.113-2.036
<b>Chlorine</b>	8760	0.643-2.69
<b>Fluoride (If the DWS provides fluoridation)</b>	N/A	

*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
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>	02/04/08	N/D	MG/L	0
<b>Arsenic</b>	02/04/08	N/D	MG/L	0
<b>Barium</b>	02/04/08	0.094	MG/L	0
<b>Boron</b>	02/04/08	0.051	MG/L	0
<b>Cadmium</b>	02/04/08	N/D	MG/L	0
<b>Chromium</b>	02/04/08	N/D	MG/L	0
<b>Lead</b>	02/04/08	N/D	MG/L	0
<b>Mercury</b>	02/04/08	N/D	MG/L	0
<b>Selenium</b>	02/04/08	N/D	MG/L	0
<b>Sodium</b>	02/12/07	38	MG/L	1
<b>Uranium</b>	02/07/05	N/D	MG/L	0
<b>Fluoride</b>	02/04/08	N/D	MG/L	0
<b>Nitrite</b>	10/20/08	N/D	MG/L	0
<b>Nitrate</b>	10/20/08	N/D	MG/L	0

**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	12	0-1.9mg/L	0
Distribution	4	0-2.3mg/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	02/09/06	N/D	UG/L	0
Aldicarb	02/09/06	N/D	UG/L	0
Aldrin + Dieldrin	02/09/06	N/D	UG/L	0
Atrazine + N-dealkylated metabolites	02/09/06	N/D	UG/L	0
Azinphos-methyl	02/09/06	N/D	UG/L	0
Bendiocarb	02/09/06	N/D	UG/L	0
Benzene	02/09/06	N/D	UG/L	0
Benzo(a)pyrene	02/09/06	N/D	UG/L	0
Bromoxynil	02/09/06	N/D	UG/L	0
Carbaryl	02/09/06	N/D	UG/L	0
Carbofuran	02/09/06	N/D	UG/L	0
Carbon Tetrachloride	02/09/06	N/D	UG/L	0
Chlordane (Total)	02/09/06	N/D	UG/L	0
Chlorpyrifos	02/09/06	N/D	UG/L	0
Cyanazine	02/09/06	N/D	UG/L	0
Diazinon	02/09/06	N/D	UG/L	0
Dicamba	02/09/06	N/D	UG/L	0
1,2-Dichlorobenzene	02/09/06	N/D	UG/L	0
1,4-Dichlorobenzene	02/09/06	N/D	UG/L	0
Dichlorodiphenyltrichloroethane (DDT) + metabolites	02/09/06	N/D	UG/L	0
1,2-Dichloroethane	02/09/06	N/D	UG/L	0
1,1-Dichloroethylene (vinylidene chloride)	02/09/06	N/D	UG/L	0
Dichloromethane	02/09/06	N/D	UG/L	0
2-4 Dichlorophenol	02/09/06	N/D	UG/L	0
2,4-Dichlorophenoxy acetic acid (2,4-D)	02/09/06	N/D	UG/L	0
Diclofop-methyl	02/09/06	N/D	UG/L	0
Dimethoate	02/09/06	N/D	UG/L	0
Dinoseb	02/09/06	N/D	UG/L	0
Diquat	02/09/06	N/D	UG/L	0
Diuron	02/09/06	N/D	UG/L	0
Glyphosate	02/09/06	N/D	UG/L	0
Heptachlor + Heptachlor Epoxide	02/09/06	N/D	UG/L	0
Lindane (Total)	02/09/06	N/D	UG/L	0
Malathion	02/09/06	N/D	UG/L	0
Methoxychlor	02/09/06	N/D	UG/L	0

<b>Metolachlor</b>	02/09/06	N/D	UG/L	0
<b>Metribuzin</b>	02/09/06	N/D	UG/L	0
<b>Monochlorobenzene</b>	02/09/06	N/D	UG/L	0
<b>Paraquat</b>	02/09/06	N/D	UG/L	0
<b>Parathion</b>	02/09/06	N/D	UG/L	0
<b>Pentachlorophenol</b>	02/09/06	N/D	UG/L	0
<b>Phorate</b>	02/09/06	N/D	UG/L	0
<b>Picloram</b>	02/09/06	N/D	UG/L	0
<b>Polychlorinated Biphenyls(PCB)</b>	02/09/06	N/D	UG/L	0
<b>Prometryne</b>	02/09/06	N/D	UG/L	0
<b>Simazine</b>	02/09/06	N/D	UG/L	0
<b>THM (NOTE: show latest annual average)</b>	10/20/08	70.57	UG/L	1
<b>Temephos</b>	02/09/06	N/D	UG/L	0
<b>Terbufos</b>	02/09/06	N/D	UG/L	0
<b>Tetrachloroethylene</b>	02/09/06	N/D	UG/L	0
<b>2,3,4,6-Tetrachlorophenol</b>	02/09/06	N/D	UG/L	0
<b>Triallate</b>	02/09/06	N/D	UG/L	0
<b>Trichloroethylene</b>	02/09/06	N/D	UG/L	0
<b>2,4,6-Trichlorophenol</b>	02/09/06	N/D	UG/L	0
<b>2,4,5-Trichlorophenoxy acetic acid (2,4,5-T)</b>	02/09/06	N/D	UG/L	0
<b>Trifluralin</b>	02/09/06	N/D	UG/L	0
<b>Vinyl Chloride</b>	02/09/06	N/D	UG/L	0

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			

**(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)**