



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

**ROSEMONT
WELL SUPPLY SYSTEM**

ONTARIO REGULATION 170/03

Section 11

ANNUAL REPORT

For the Period of

May 4, 2009 to December 31, 2009

Prepared for The Corporation of the Township of Adjala-Tosorontio

By the Ontario Clean Water Agency



OPTIONAL ANNUAL REPORT TEMPLATE

Drinking-Water System Number:	220003859
Drinking-Water System Name:	Rosemont Well Supply System
Drinking-Water System Owner:	The Corporation of the Township of Adjala-Tosorontio
Drinking-Water System Category:	Small Municipal Residential
Period being reported:	May 4, 2009 to December 31, 2009

<p><u>Complete if your Category is Large Municipal Residential or Small Municipal Residential</u></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;"> <p>Summary Report is available for inspection at the Township of Adjala-Tosorontio Municipal Office located at 7855 Sideroad 30, Alliston, ON</p> </div>	<p><u>Complete for all other Categories.</u></p> <p>Number of Designated Facilities served:</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <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:</p> <div style="border: 1px solid black; width: 100px; height: 20px; margin: 5px 0;"></div> <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
Not applicable	Not applicable

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 [NA]



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 Rosemont water system is classified as a Small Municipal Residential water system that currently serves approximately 47 homes. Water is supplied via two (2) municipal wells, two (2) pumphouses and an inground reservoir. Inspections and maintenance duties are conducted by Ontario Clean Water Agency staff on a regular basis to maintain compliance with Ontario Regulation 170/03 to ensure that Rosemont's water supply is safe to drink.

List all water treatment chemicals used over this reporting period

Sodium Hypochlorite 12% Solution NSF, Disinfection

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

Expenses incurred which were in addition to normal operating costs:

1. Drinking Water Quality Management System Multi-Facility Operational Plan
2. Community Lead Testing Program
3. Data Logger
4. Repaired access hatch to reservoir



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
May 17, 2009 (AWQI# 88098)	Low Free Chlorine Residual on Treated Water	<0.20	mg/L	Oral and Written Notification and Disinfection Restored	May 17, 2009
May 17, 2009 (AWQI# 88099)	Low Free Chlorine Residual on Treated Water	<0.20	mg/L	Oral and Written Notification and Disinfection Restored	May 17, 2009
May 18, 2009 (AWQI# 88103)	Low Free Chlorine Residual on Treated Water	<0.20	mg/L	Oral and Written Notification and Disinfection Restored	May 18, 2009
May 21, 2009 (AWQI# 88164)	Low Free Chlorine Residual on Treated Water	<0.20	mg/L	Oral and Written Notification and Disinfection Restored	May 21, 2009
May 22, 2009 (AWQI# 88195)	Low Free Chlorine Residual on Treated Water	<0.20	mg/L	Oral and Written Notification and Disinfection Restored	May 22, 2009
May 30, 2009 (AWQI# 88305)	Low Free Chlorine Residual on Treated Water	<0.20	mg/L	Oral and Written Notification and Disinfection Restored	May 30, 2009

Note: On each of the above AWQI's disinfection was restored and everything working properly when the operator arrived on site. Review of Data Logger in each case revealed that residual had dropped sharply then had risen back to normal levels. The main cause of this was the degassing feature on the chemical pump which was disconnected.

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 #)
RW1 – Raw Well #1A	8	0 - NDOG	0 - 0	1	1 - 1
RW3 – Raw Well #3A	8	0 - NDOG	0 - 5	1	5 - 5
Distribution	18	0 - 0	0 - 0	18	0 - 2

NDOG – No Data: E.coli / Total Coliform Plate Overgrown (sample taken on June 2, 2009) was an anomaly



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 #)
RW1 – Raw Well #1A Turbidity	8	0.16 – 0.80 NTU
RW3 – Raw Well #3A Turbidity	8	0.13 – 2.04 NTU
Pumphouse #1 Treated Free Chlorine Residual	8760	0.02 – 5.00 mg/L *
Pumphouse #3 Treated Free Chlorine Residual	8760	0.05 – 5.00 mg/L ^
Distribution Free Chlorine Residual	76	0.97 – 3.40 mg/L
Fluoride (If the DWS provides fluoridation)	N/A	

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

* Chlorine residual of 0.02 (Please see note on page 3 for reason); Chlorine residuals of 5.00 due to system maintenance and / or power interruptions and does not indicate an adverse situation.

^ Chlorine residuals of 0.05 and 5.00 due to system maintenance and / or power interruptions and does not indicate an adverse situation.

*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
No Additional Testing and or Sampling Required				



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

Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
Antimony				
Arsenic				
Barium				
Boron				
Cadmium				
Chromium				
*Lead				
Mercury				
Selenium				
Sodium				
Uranium				
Fluoride				
Nitrite	2009/07/21	<0.005	mg/L	No
Nitrite	2009/10/05	<0.005	mg/L	No
Nitrate	2009/07/21	3.06	mg/L	No
Nitrate	2009/10/05	3.86	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	6	0.08 – 4.70 ug/L	0
Distribution	1	1.91 ug/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				
Aldicarb				
Aldrin + Dieldrin				
Atrazine + N-dealkylated metabolites				
Azinphos-methyl				
Bendiocarb				
Benzene				
Benzo(a)pyrene				
Bromoxynil				
Carbaryl				
Carbofuran				
Carbon Tetrachloride				
Chlordane (Total)				
Chlorpyrifos				
Cyanazine				
Diazinon				
Dicamba				
1,2-Dichlorobenzene				
1,4-Dichlorobenzene				
Dichlorodiphenyltrichloroethane (DDT) + metabolites				
1,2-Dichloroethane				
1,1-Dichloroethylene (vinylidene chloride)				
Dichloromethane				
2-4 Dichlorophenol				
2,4-Dichlorophenoxy acetic acid (2,4-D)				
Diclofop-methyl				
Dimethoate				
Dinoseb				
Diquat				
Diuron				
Glyphosate				
Heptachlor + Heptachlor Epoxide				
Lindane (Total)				
Malathion				
Methoxychlor				
Metolachlor				
Metribuzin				



Monochlorobenzene				
Paraquat				
Parathion				
Pentachlorophenol				
Phorate				
Picloram				
Polychlorinated Biphenyls(PCB)				
Prometryne				
Simazine				
THM (NOTE: shows latest annual average which includes February and April results sampled by Township of Adjala-Tosorontio Staff)	2009	14.9*	ug/L	No
Temephos				
Terbufos				
Tetrachloroethylene				
2,3,4,6-Tetrachlorophenol				
Triallate				
Trichloroethylene				
2,4,6-Trichlorophenol				
2,4,5-Trichlorophenoxy acetic acid (2,4,5-T)				
Trifluralin				
Vinyl Chloride				

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
No Parameters exceeded half the standard prescribed in Schedule 2 for the Rosemont Well Supply System.			