

# MUNICIPAL DRINKING WATER SUPPLIES

## ANNUAL REPORT

NOTE : ANNUAL REPORT MUST BE SUBMITTED ON OR BEFORE APRIL 1.

YEAR 2022 \_\_\_\_\_

MUNICIPALITY OF Annapolis

WATER UTILITY NAME: Annapolis County Water

FACILITY NAME: Margaretsville

APPROVAL TO OPERATE NO.: 2004-038542-02

WATER WITHDRAWAL APPROVAL NO: 2014-090989-01

I certify that information provided in this report is a complete and accurate representation of Water System operation.

Offences under the Environment Act:

158 A person who

- (a) knowingly provides false or misleading information pursuant to a requirement under this Act to provide information;
- (b) provides false or misleading information pursuant to a requirement under this Act to provide information;
- (c) does not provide information as required pursuant to this Act;
- (d) hinders or obstructs an inspector or administrator who is exercising powers or carrying out duties, or attempting to do so, pursuant to this Act;
- (e) knowingly contravenes a term or condition of an approval, an environmental assessment approval, a temporary approval, a certificate of variance or a certificate of qualification;

Name of the person in overall direct responsible charge

[Print Name] JAMES JENNER.....

Signature .....

Manager responsible for water system [Print Name]

Signature .....

**PART 1 - STANDARD SUBMISSIONS.**

Has the Utility submitted following updates for the next year:

<b>Required Submission</b>	<b>Yes</b>	<b>No</b>	<b>N/A Last year submission remains unchanged</b>
Contingency Plan			X
Notification Procedure			X
Monitoring Program (including sampling points location)			X
QA/QC			X
Source Water Protection Plan		X	
Source Water Implementation Schedule		X	
Lab Information			X
Operations Manual			X
Staff List and certification			X

**PART 2 - WATER TREATMENT PLANT MONITORING**

**A. WATER TREATMENT**

Table 1- Raw water flow

Month	Raw water flow (m <sup>3</sup> )	
	Source..... pond	
	Total Monthly Volume (m <sup>3</sup> )	Max Daily Volume (m <sup>3</sup> /d)
January	2653	92
February	2107	98
March	2138	91
April	2043	80
May	2283	80
Jun	2389	99
July	2401	110
August	1621	60
September	2174	104
October	1861	181
November	1125	50
December	1077	43
Total for the year.....	23872	
Maximum month	July	
Average	1989.33	
Water withdraw Approval No.. 2014-090989-.01	Withdraw limit: ....140.m3/day.....	
Approval to Operate No:.... 2004-038542-02	Rated design capacity:....cu3/day...	

Table 2 - Filtered water turbidity

Month	Filter 1			Filter 2			Combined Turbidity	
	Turbidity		Filter to waste	Turbidity		Filter to waste	How many times exceed Approval	max
	How many times exceed Approval	max NTU	max (upon return to production)	How many times exceed Approval	max NTU	max		
January	0	.12		0	.08			
February	0	.12		0	.09			
March	0	.09		0	.09			
April	0	.11		0	.08			
May	0	.11		0	.09			
Jun	0	.12		0	.11			
July	0	.21		0	.18			
August	0	.32		0	1.69			
September	0	.26		0	.63			
October	0	.15		0				
November	0	.80		0	.11			
December		.11		0	.12			
If Approval Limits for Filtration were exceeded provide date when Department was notified:								
Action taken: Filter # 2 was off line for the month Oct for cleaning								

Table 2 - Well water turbidity

Month	Well 1		Well 2		Comments
	Turbidity		Turbidity		
	How many times exceed Approval	maximum NTU	How many times exceed Approval	maximum NTU	
January	0	.22	0		
February	0	.24	0		
March	0	.24	0		
April	0	.21	0		
May	0	.21	0		
Jun	0	.59	0		
July	0	.34	0		
August	0	2.58	0		
September	0	.34	0		
October	0	.10	0		
November	0	.23	0		
December	0	.21	0		
If exceeded provide dates of occurrence and date when Department was notified.					
Action taken:					

Table 3 - Disinfection (leaving treatment plant or well)

Month	Disinfectant residual (mg/l)			CT value
	Minimum this month	How many times below Approval limit	Maximum this month	How many times CT <sub>achieved</sub> was less than CT <sub>required</sub>
January	1.24	0	2.04	0
February	1.17	0	1.71	0
March	1.21	0	1.67	0
April	1.08	0	1.75	0
May	1.55	0	1.76	0
Jun	1.20	0	1.65	0
July	1.55	0	2.44	0
August	1.21	0	4.64	0
September	1.70	0	2.56	0
October	1.92	0	2.57	0
November	1.68	0	3.14	0
December	1.33	0	2.08	0
If Approval Limits were exceeded provide date of occurrence and date when Department was notified:				
If CT requirements were not met provide date of occurrence and date when Department was notified:				
Action Taken:				
NOTE: CT values must be calculated daily, or minimum operational conditions must be monitored daily and records kept by Approval Holder				
<b>MINIMUM OPERATIONAL PARAMETERS TO PROVIDE REQUIRED CT</b> (CT calculations for "worst case scenario" must be provided to Department) See attached				
Peak Daily Flow			181	
Temperature at CT control Point			10.4	
Minimum residual at CT control Point			1.08	
pH at CT control Point			7.15	
Water level in the tank during peak hourly flow			75%	
Total chlorine use this year:...kg			Target organism: Giardia..... Or Viruses.....	

Table 4 - Bacteriological quality (leaving treatment plant or GUDI well)

Month	Total number of samples taken	<i>E.coli</i>	Total Coliform	Giardia		Cryptosporidium	
				if tested N/A		if tested N/A	
		No. of Present this month	No. of Present this month	No. of Present this month	Total	No. of Present this month	Total
January	5	0	0	0	0	0	0
February	4	0	0	0	0	0	0
March	4	0	0	0	0	0	0
April	4	0	0	0	0	0	0
May	5	0	0	0	0	0	0
Jun	4	0	0	0	0	0	0
July	4	0	0	0	0	0	0
August	5	0	0	0	0	0	0
September	4	0	0	0	0	0	0
October	5	0	0	0	0	0	0
November	4	0	0	0	0	0	0
December	3	0	0	0	0	0	0
If <i>E.coli</i> Present provide date of occurrence and date when Department was notified:							
If Total Coliforms Present provide date of occurrence and date when Department was notified							
Action taken:							
Certified Lab: Yarmouth Regional Hospital							

Table 5 - Fluoride (if fluoridating)

Month	Min this month (mg/l)	Max this month (mg/l)
January	N/A	
February		
March		
April		
May		
Jun		
July		
August		
September		
October		
November		
December		
If exceeded Approval limits provide date of occurrence and date when Department was notified:		
Action taken:		



Table 6 - Aluminum (for facilities using aluminum-based coagulants)

	At Treatment Facility		Distribution System*	
Month	Min this month (mg/l)	Max this month (mg/l)	Min this month (mg/l)	Max this month (mg/l)
January	N/A			
February				
March				
April				
May				
Jun				
July				
August				
September				
October				
November				
December				
If Aluminum exceeded Approval limits provide date of occurrence and date when Department was notified				
Action taken:				

Table 7- pH

Month	Raw water inlet		CT Control Point	
	Minimum this month	Maximum this month	Minimum this month	Maximum this month
January	6.92	7.37	6.92	7.37
February	6.77	6.97	6.77	6.97
March	6.97	7.35	6.97	7.35
April	7.16	7.38	7.16	7.38
May	6.85	7.15	6.85	7.15
Jun	7.00	7.17	7.00	7.17
July	7.03	7.13	7.03	7.13
August	7.09	7.43	7.09	7.43
September	7.41	7.60	7.41	7.60
October	7.25	7.50	7.25	7.50
November	7.43	7.93	7.43	7.93
December	7.25	8.03	7.25	8.03
Comments:				

Table 8 - Guidelines for Monitoring Public Drinking Water Supplies (Section 33 of Regulations)

Parameter	Health based guideline (mg/l)	AO [or OG] (mg/l)	Raw mg/l (maximum this year)	Treated mg/l (maximum this year)	Date	Location
Alkalinity	-	-	60	58	July 5	M-Ville
Aluminum	0.1/0.2	-	.032	.014		
Ammonia	-	-	<.00003	.00003		
Antimony	0.006	-	.,<.002	<.002		
Arsenic	0.010	-	<.002	<.002		
Barium	1	-	<.005	<.005		
Boron	5	-	.010	.011		
Cadmium	0.005	-	<.00009	<.00009		
Calcium	-	-	.018	.014		
Chloride	-	≤250	15	19		
Chromium	0.05	-	<.001	<.001		
Colour	-	≤15	<5	<5		
Conductivity	-	-	208	197		
Copper	-	≤1.0	<.001	.002		
Fluoride	1.5	-	<.12	<.12		
Hardness	-	-	76.2	61.7		
Iron	-	≤0.3	<.050	<.050		
Lead	0.010	-	<.0005	<.0005		
Magnesium	-	-	.0076	.0065		
Manganese	-	≤0.05	<.003	<.003		
Nitrate - nitrogen	10	-	4.06	1.67		
pH	-	6.5-8.5	6.94	6.93		
Potassium	-	-	.0016	.0008		
Selenium	0.01	-	<.001	<.001		

Parameter	Health based guideline (mg/l)	AO [or OG] (mg/l)	Raw mg/l (maximum this year)	Treated mg/l (maximum this year)	Date	Location
Sodium	-	≤200	12	14	July 5	M-Ville
Sulphate	-	≤500	6	5		
Total Dissolved Solids	-	≤500	.114	.102		
Total Organic Carbon	-	-	1.5	1.8		
Turbidity	See Approval	-	.8	<.5		
Uranium	0.02	-	<.0002	<.0002		
Zinc	-	≤5.0	<.005	<.005		
<b>OTHER PARAMETERS SAMPLED</b>						
Has any of the parameter exceeded Guidelines Yes..... No...X.						
If Yes provide date of occurrence and date when Department was notified:						
Action taken:						
Certified Lab:AGAT						

Table 9 - Raw Water turbidity

Month	Minimum NTU	Maximum NTU
January	.08	.22
February	.08	.24
March	.19	.24
April	.06	.21
May	.12	.21
Jun	.13	.59
July	.21	.34
August	.100	2.58
September	.08	.34
October	.05	.100
November	.12	.23
December	.12	.21

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## B. WASTE TREATMENT

Table 10 - Waste water discharge

Month	Suspended Solids Limit:.....		Aluminum Limit:.....		Chlorine Limit:.....		pH Limit:		Fish toxicity	
	average mg/l	Max mg/l	average mg/l	Max mg/l	average mg/l	Max mg/l	average mg/l	Max mg/l		
January										
February										
March										
April										
May										
Jun										
July										
August										
September										
October										
November										
December										

Has any of the parameter exceeded Limits Yes..... No.....

If Yes provide date of occurrence and date when Department was notified:

**PART 3 - WATER DISTRIBUTION SYSTEM MONITORING**

Table 11 - Distribution System Bacteriology and Disinfection Residual

Site : A		Location: Highway 362									
Month	<i>E.coli</i>				Total Coliforms				Free chlorine residual		
	Present	Absent	Total number of samples	% Absent	Present	Absent	Total number of samples	% Absent	Min mg/l	Max mg/l	No. below Approval Limits
January	0	5	5	100	0	5	5	100	1.01	1.45	0
February	0	4	4	100	0	4	4	100	.91	1.25	0
March	0	4	4	100	0	4	4	100	.85	1.22	0
April	0	4	4	100	0	4	4	100	.79	1.11	0
May	0	5	5	100	0	5	5	100	.80	1.04	0
Jun	0	4	4	100	0	4	4	100	.37	.89	0
July	0	4	4	100	0	4	4	100	.40	.68	0
August	0	5	5	100	0	5	5	100	.28	1.14	0
September	0	4	4	100	0	4	4	100	.46	1.10	0
October	0	5	5	100	0	5	5	100	.36	1.37	0
November	0	4	4	100	0	4	4	100	.74	1.73	0
December	0	3	3	100	0	3	3	100	.53	1.89	0
If Approval limits exceeded, provide date of occurrence and date when Department was notified:											
Action taken:											

Table 11 - Distribution System Bacteriology and Disinfection Residual (continued)

Site : B		Location: Seaman Street									
Month	<i>E.coli</i>				Total Coliforms				Free chlorine residual		
	Present	Absent	Total number of samples	% Absent	Present	Absent	Total number of samples	% Absent	Min mg/l	Max mg/l	No. below 0.2 mg/l
January	0	5	5	100	0	5	5	100	.98	1.46	0
February	0	4	4	100	0	4	4	100	.90	1.33	0
March	0	4	4	100	0	4	4	100	.94	1.43	0
April	0	4	4	100	0	4	4	100	.77	1.10	0
May	0	5	5	100	0	5	5	100	.88	1.10	0
Jun	0	4	4	100	0	4	4	100	.49	.87	0
July	0	4	4	100	0	4	4	100	.28	.64	0
August	0	5	5	100	0	5	5	100	.30	1.33	0
September	0	4	4	100	0	4	4	100	.41	.96	0
October	0	5	5	100	0	5	5	100	.71	1.52	0
November	0	4	4	100	0	4	4	100	.83	1.91	0
December	0	3	3	100	0	3	3	100	.77	1.92	0
Was E.Coli or Total Coliform present in any sample this year <b>Yes..... No.....</b>											
If Yes provide date of occurrence and date when Department was notified:											
<b>Action taken:</b>											



Table 12a - Distribution System THM's

Month	Site A Location: Gorden Rd	Site B Location Seaman st	Site C Location: Highway 362
	THM total mg/l	THM total mg/l	THM total mg/l
January	.016	.032	.030
February			
March <b>1<sup>st</sup> Qt</b>			
April			
May	.028	.040	.050
Jun <b>2<sup>nd</sup> Qt</b>			
July	.054	.066	.067
August			
September <b>3<sup>rd</sup> Qt</b>			
October	.048	.068	.036
November			
December <b>4<sup>th</sup> Qt</b>			
Annual Average	.036	.051	.045
Limits	0.100 mg/l THM's - Locational running annual average based on a minimum of four quarterly samples.		
Action taken:			

Table 12b - Distribution System HAA's

Month	Site A Location: Gorden Rd	Site B Location: Seaman st	Site C Location: Highway 362
	HAA (5) mg/l	HAA (5) mg/l	HAA (5) mg/l
January	.021	.034	.032
February			
March <b>1<sup>st</sup> Qt</b>			
April			
May	.040	.046	.047
Jun <b>2<sup>nd</sup> Qt</b>			
July	.068	.064	.069
August			
September <b>3<sup>rd</sup> Qt</b>			
October	.023	.033	.019
November			
December <b>4<sup>th</sup> Qt</b>			
Annual Average	.038	.044	.041
Limits	0.080 mg/l HAA's - Locational running annual average based on a minimum of four quarterly samples.		
Action taken:			

Table 13 - Distribution System Turbidity

Month	Site A Location: Highway 362		Site B Location: Seaman st		Site C Location:	
	min NTU	max NTU	min NTU	max NTU	min NTU	max NTU
January	.08	.24	.07	.13		
February	.08	.22	.08	.18		
March	.100	.13	.08	.09		
April	.09	.16	.08	.12		
May	.09	.16	.09	.12		
Jun	.09	.13	.08	.11		
July	.100	.19	.08	.18		
August	.110	.33	.15	.29		
September	.08	.16	.07	.15		
October	.09	.17	.08	.13		
November	.08	.23	.08	.13		
December	.09	.18	.10	.53		
If Approval limits were exceeded provide date of occurrence and date when Department was notified:						
Action taken:						

Table 14 - Distribution System Lead

Month* (specify date sampled)	Site A Location: 108 Seamen st		Site B Location: 7 lighthouse rd		Site C Location: metering building	
	min mg/l	max mg/l	min mg/l	max mg/l	min mg/l	max mg/l
May						
Jun						
July		<.0005		.0032		<.0005
August						
September						
October						
If Approval limits were exceeded provide date of occurrence and date when Department was notified:						

\* To be sampled during warmest months

Table 15 - Distribution System Corrosion Control Program

Month	Site A Location: 100 Seaman st		Site B Location: 1 Seaman st		Site C Location: 180 Seaman st	
	Parameter 1 .....LEAD..	Parameter 2 ...Copper...	Parameter 1 .....LEAD.....	Parameter 2 ....Copper..	Parameter 1 .....LEAD.....	Parameter 2 .Copper.....
January						
February						
March						
April						
May						
Jun						
July	.00738	.378	.0029	.968	.0063	.109
August						
September						
October						
November						
December						
<b>Comments:</b>						

**Table 16 - Storage tank chlorine residual**

Month	Storage Tank Location.....			Storage Tank Location.....			
	Min mg/l	Max mg/l	Number of times residual was less than 0.2 mg/l	Min mg/l	Max mg/l	Number of times residual was less than 0.2 mg/l	
January	1.24	2.04	0	na			
February	1.17	1.71	0				
March	1.21	1.67	0				
April	1.08	1.75	0				
May	1.55	1.76	0				
Jun	1.20	1.65	0				
July	1.55	2.44	0				
August	1.21	4.64	0				
September	1.70	2.56	0				
October	1.92	2.57	0				
November	1.68	3.14	0				
December	1.33	2.08	0				
Action taken:							
Certified Lab:							

## SOURCE WATER PROTECTION PLAN ANNUAL UPDATE CHECKLIST

Yearly review of the source water protection (SWP) plan is required. The review should consider questions including, but not limited, those listed below. Every five years, or whenever significant changes to the municipal water system or risks to its source occur, the municipal unit should consider revising the plan. Otherwise, updates may be added to the original source water protection plans in an appropriately identified appendix.

<b>QUESTIONS TO CONSIDER IN ANNUAL UPDATE</b>
How many source water committee meetings have been held in the past year? Have there been any changes to committee membership? None
Have there been any changes made to the committee terms of reference? No
Have changes to the system infrastructure been made (e.g. wells constructed or decommissioned)NO
Have any new risks to the watershed or aquifer area been identified? For example: <ul style="list-style-type: none"> <li>· have new land uses which could impact the source water commenced (or existing uses changed or ceased) within the watershed or aquifer area?</li> <li>· have recreational uses of concern continued, declined or increased with the past year within the watershed or aquifer area? NONE</li> </ul>
If new risks have been identified, what risk reduction strategies will be employed? N/A
Have any accidents/emergencies not considered in the contingency plan occurred within the watershed or aquifer area within the past year? NO
Has source water monitoring (differs from regulatory compliance monitoring) been undertaken? Please describe the results. NONE
Has your contingency plan been reviewed and contact information updated? YES
Have any accidents/emergencies not considered in the contingency plan occurred within the watershed or aquifer area within the past year? NO
Provide an updated schedule for the implementation of the SWP plan, including items completed within the last year, items ongoing, or items yet to be completed. Based on consideration of all the above questions, identify if any items need to be added to the implementation plan.

## DESCRIPTION OF ANY EMERGENCY AND UPSET CONDITIONS AND CORRECTIVE ACTION

May 25 Just to report that the final turbidity meter was out of water this morning, this caused the turbidity meter to record wrong numbers. The water pump that feeds the Margarettsville water treatment plants Domestic water and Turbidity meter has failed. The GFI plug and Water pump will need to be replaced. The pump is locally sourced and is in the process of being replaced.

This month 95% will be missed due to this. The operator tested the water and it was reading normal .06-.08 ntu. Right now the 95% is at 87.5%. Reported to environment

May 27 MWTP Water pump was replaced this morning. Turbidity is now back on continuous monitoring.

Oct - Hillary PH: 902-223-4219 she is the property owner at 127 Crombie Lane in Margarettsville and she has some concerns about the discoloration of the water. She advised that the issue has been on going from August to Sept, when you fill a pitched the water is a tan color.

Response - called Hillary. This property will be disconnected for the season soon. I mentioned there were no other issues with water discoloration on the street. It's possible that it could be a plumbing issue. I recommended allowing the water to flush through the sill tap of the house for 5-10 minutes and see if it clears. I offered to have a look if it persists.

I would recommend having a flush hydrant installed at the end of this line as there is no way of flushing dirt out. There may be a possibility she is getting slugs of dirty water from the main.

Nov 18 Hey everyone the water main break at 2702 Hwy 362 has been repaired and repaved. Hydrants we're flushed to bleed out air and dirty water. Chlorine and turbidity levels are normal. There was a 2" hike in the side of the pipe likely from the poor bury around the pipe. It was likely due to a rock. We used a 8"x12" stainless wrap to repair leak.



MODIFICATION TO CONTINGENCY PLAN, EMERGENCY NOTIFICATION OR PROCEDURE OR  
LABORATORY CHANGE:

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RECORD OF ANY VIOLATIONS OF APPROVAL AND CORRECTIVE ACTIONS TAKEN:

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## SUMMARY OF COMPLAINTS RECEIVED AND CORRECTIVE ACTIONS:

.Aug 4 After your call from 1607 Ben Phinney rd of yellow water. Matt and I went to the resident and there was nobody home. We opened the hydrant in front of the home and flushed it for about 5 minutes. It was a bit hazy at first but cleared up relatively quick. I took a turbidity test at the hydrant and again at the Gunit tank which is 4 homes up from this address. I had 0.30 NTU coming out of the plant and around 3.00 NTU at the hydrant which is below our acceptable levels. I also sampled our distribution sample point and nothing is out of the normal there. We have had no other complaint in the past few days. It would seem to be an isolated issue.

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## REVIEW OF QA/QC PROGRAM TO VALIDATE PLANT INSTRUMENT AND FACILITY LAB:

Here at the county we use all the same on line monitors.

For on line chlorine we use models CL 17. These units are cleaned once a month to insure true readings. We double check all readings 4 – 5 times week depending on holidays. We check the readings using DR2000 spectrophotometers or DR 2800 spectrophotometers.

Turbidity we use Hach 1720c and 1720e model on line turbidity meters. The units are cleaned once a month. All units are double checked at least 4-5 times a week depending on holidays. The units we use to double check the readings are bench model 2100n turbidity meters. All sites have calibration tubes to calibrate the 2100n.

Ph probes are used.

Operators are required to submit their chlorine counts to the ODRC at least once a week to insure no low chlorine residuals are found.

All month end reports are sent to the ODRC.

Month end reports are then sent to the Municipal operations supervisor.

APPENDIX A: Health-related Guidelines for Canadian Drinking Water Quality (Section 35 of Regulations)

Parameter	Health based guideline (mg/l)	Raw mg/l (maximum this year)	Treated mg/l (maximum this year)	Date	Location
aldicarb	0.009				
aldrin + dieldrin	0.0007				
aluminum	0.1 or 0.2				
antimony	0.006				
arsenic	0.010				
atrazine + metabolites	0.005				
azinphos-methyl	0.02				
barium	1				
bendiocarb	0.04				
benzene	0.005				
benzo[a]pyrene	0.00001				
boron	5				
bromate	0.01				
bromoxynil	0.005				
cadmium	0.005				
carbaryl	0.09				
carbofuran	0.09				
carbon tetrachloride	0.005				
chloramines (total)	3.0				
chlorate	1.0				
chlorite	1.0				
chlorpyrifos	0.09				
chromium	0.05				
cyanazine	0.01				
cyanide	0.2				
cyanobacterial toxins (as microcystin-LR) - surface water only	0.0015				

Parameter	Health based guideline (mg/l)	Raw mg/l (maximum this year)	Treated mg/l (maximum this year)	Date	Location
diazinon	0.02				
dicamba	0.12				
1,2-dichlorobenzene	0.2				
1,4-dichlorobenzene	0.005				
1,2-dichloroethane	0.005				
1,1-dichloroethylene	0.014				
dichloromethane	0.05				
2,4-dichlorophenol	0.9				
dichlorophenoxyacetic acid,(2,4-D)	0.1				
diclofop-methyl	0.009				
dimethoate	0.02				
dinoseb	0.01				
diquat	0.07				
diuron	0.15				
fluoride	1.5				
glyphosate	0.28				
Haloacetic Acids (HAAs)	0.080				
lead	0.01				
malathion	0.19				
mercury	0.001				
methoxychlor	0.9				
metolachlor	0.05				
metribuzin	0.08				
monochlorobenzene	0.08				
nitrate - nitrogen	10				
nitrilotriacetic acid (NTA)	0.4				
paraquat (as dichloride)	0.01				
parathion	0.05				
pentachlorophenol	0.06				

Parameter	Health based guideline (mg/l)	Raw mg/l (maximum this year)	Treated mg/l (maximum this year)	Date	Location
phorate	0.002				
picloram	0.19				
selenium	0.01				
simazine	0.01				
terbufos	0.001				
tetrachloroethylene	0.03				
2,3,4,6-tetrachlorophenol	0.1				
trichloroethylene	0.005				
2,4,6-trichlorophenol	0.005				
trifluralin	0.045				
trihalomethanes (THM's)	0.100				
turbidity	See Approval				
uranium	0.02				
vinyl chloride	0.002				
Gross alpha	0.5 Bq/L				
Gross beta	1 Bq/L				
Lead 210	0.2 Bq/L				
Has any of the parameter exceeded Guidelines Yes..... No.....					
If Yes provide date of occurrence and date when Department was notified:					
Action taken:					
Certified Lab: AGAT					

NOVA SCOTIA ENVIRONMENT