

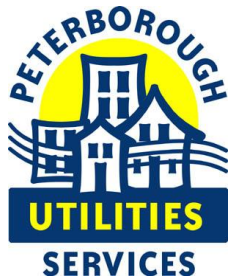
PETERBOROUGH UTILITIES COMMISSION

ANNUAL REPORT

FOR

WOODLAND ACRES WATER DISTRIBUTION SYSTEM

PERIOD: January 1, 2010 – December 31, 2010



MOE Waterworks # 210001503



| | |
|--|---------------------------------------|
| Drinking-Water System Number: | 210001503 |
| Drinking-Water System Name: | Woodland Acres |
| Drinking-Water System Owner: | Township of Smith-Ennismore-Lakefield |
| Drinking-Water System Category: | WD Class 1 |
| Period being reported: | January 1, 2010 – December 31, 2010 |

| | |
|--|--|
| <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;"> Township of Smith-Ennismore-Lakefield Office 1310 Centerline Intersection of County Road 18 and the Centerline of Smith Township Bridgenorth, ON K0L 1H0 </div> | <p><u>Complete for all other Categories.</u></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> |
|--|--|

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 |
|----------------------------|------------------------------|
| | |

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 []



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 Woodland Acres distribution system is operated by Peterborough Utilities Services Inc. under contract with the Township of Smith-Ennismore-Lakefield.

The Woodland Acres municipal water distribution system generally consist of three elements:

1. Drinking Water Supply

The Woodland Acres water distribution system obtains its water from the City Of Peterborough’s municipal water system. The Peterborough Utilities Commission owns and operated the Peterborough water system (MOE # 220000497) and the Annual report for this system may be viewed on the Peterborough Utilities’ web page at www.puc.org.

2. Water Pumping Stations

There is a water booster pumping station at Woodland Drive and Woodward Avenue.

3. Water Distribution Piping System

The water distribution system consists of approximately 3,775 meters of pipe (water mains), 20 hydrants and 263 individual water services.

List all water treatment chemicals used over this reporting period

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

[Empty box for monetary expenses]

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 |
|---------------|-----------|--------|-----------------|-------------------|------------------------|
| NONE | | | | | |
| | | | | | |

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 #) |
|--------------|-------------------|--|---|-----------------------|--------------------------------------|
| Raw | | | | | |
| Treated | | | | | |
| Distribution | 155 | 0-0 | 0-0 | 155 | 0-137 |

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 #) |
|---|------------------------|----------------------------------|
| Turbidity | | |
| Chlorine | 419 | 0.54 – 1.73 mg/L |
| Fluoride (If the DWS provides fluoridation) | | |

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 |
|---------------------------------|-----------|--------------|--------|-----------------|
| | | | | |



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 | Jan 14 | <0.005 | mg/L | No |
| | Apr 15 | <0.005 | | |
| | Jul 15 | <0.005 | | |
| | Oct 07 | <0.005 | | |
| Nitrate | Jan 14 | 0.081 | mg/L | No |
| | Apr 15 | 0.083 | | |
| | Jul 15 | 0.046 | | |
| | Oct 07 | 0.020 | | |

*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 | 2 | 0.19 – 0.67 | 0 |
| Distribution | 2 | 0.30 – 0.34 | 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: show latest annual average) | Jan 14 Apr 15 Jul 15 Oct 07 | 68.5 | µg/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 |
|-----------|--------------|-----------------|----------------|
| | | | |
| | | | |