

Kerry Park Recreation Centre 2014 ANNUAL REPORT

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|--------------------------------|---|
| Reporting Period: | January to December 2014 |
| Operating Permit Number: | |
| Drinking Water System Owner: | Cowichan Valley Regional District, Kerry Park Recreation Centre |
| Drinking Water System Contact: | |
| Name: | <u>Tony Liddle</u> |
| Phone No: | <u>(250) 701-3120 (cell), 250-743-5922 (main office)</u> |
| Email: | <u>tliddle@cvrld.bc.ca</u> |

1 Microbiological testing completed during this reporting period:

- a. bacteriological results attached to this report.
- b. adverse bacteriological results: None detected
 Listed in table below:

Adverse Results:

| Date | Total coliform | E. Coli | Reason | Corrective Action |
|------|----------------|---------|--------|-------------------|
| | | | | |
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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
 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 | N | |
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4 Water Quality Complaints:

- During the course of the year, the water system:
 did not receive water quality complaints (ie taste, odour, colour, etc)
 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:

- No adverse results
 Adverse results listed below:

Adverse Results:

| Incident date | Corrective action | Corrected by |
|---------------|-------------------|--------------|
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| | | |
| | | |

6 Description of the system:

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Sources of raw water:

- Groundwater
- Surface water
- Other (specify): _____

Does the drinking water system have disinfection? Yes No

Disinfection methods (check boxes that apply):

- Chlorination
- Ultraviolet light
- Ozonation
- Other (specify): _____

Does the drinking water system have treatment? Yes No

Treatment type (check boxes that apply):

- Particulate cartridge filters
- Membrane filtration
- Carbon filter
- Sand filtration
- Reverse osmosis
- Other (specify): _____

7 Major expenses incurred during the period covered by the report:

To purchase or install required equipment: N/A

To replace equipment: _____

To complete annual maintenance of system: *(system flushing, replacement of carbon filters, etc)* _____

To complete specialist report (specify): _____

8 Further communication with users:

a. Indicate how you notified system users that your annual report is available, and is free of charge:

- hand delivered
- public access/ notice via web
- public access/notice via government office
- public access/notice via newspaper
- public access/notice via bill stuffer
- public access/ notice via other method (specify):
To be posted on CVRD-Kerry Park web site

b. Improvements or remedial actions required by the Drinking Water Officer:

- no action required
- Drinking Water Officer inspection report attached to report
- actions required by Drinking Water Officer listed below:

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Improvements/Remedial Actions:

| Required action | Completion date |
|-----------------|-----------------|
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- 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 |
| Develop and include a "Drought Response Plan" for 2015/16 | End of 2015 to be supplied in 2016 Annual Report |

- d. Emergency Response Plan can be accessed by:
- posting on web
 - posting at nearest government office
 - contacting water system owner
 - Other (specify): _____

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 N: Forms\Drinking Water Systems Annual Report template