



**OPTIONAL ANNUAL REPORT TEMPLATE**

<b>Drinking-Water System Number:</b>	260087048
<b>Drinking-Water System Name:</b>	Leamington (Wheatley) Drinking Water System
<b>Drinking-Water System Owner:</b>	Leamington
<b>Drinking-Water System Category:</b>	Large Municipal Year Round Residential
<b>Period being reported:</b>	January 1 – December 31, 2018

<p><b><u>Complete if your Category is Large Municipal Residential or Small Municipal Residential</u></b></p> <p><b>Does your Drinking-Water System serve more than 10,000 people? Yes [ ] No [X]</b></p> <p><b>Is your annual report available to the public at no charge on a web site on the Internet? Yes [X] No [ ]</b></p> <p><b>Location where Summary Report required under O. Reg. 170/03 Schedule 22 will be available for inspection.</b></p> <div style="border: 1px solid black; padding: 5px;"> <p>Chatham-Kent P.U.C. 325 Grand Ave. East P.O. Box 1191 Chatham, ON N7M 5L8</p> </div>	<p><b><u>Complete for all other Categories.</u></b></p> <p><b>Number of Designated Facilities served:</b></p> <div style="border: 1px solid black; padding: 2px; width: fit-content; margin: 5px auto;">N/A</div> <p><b>Did you provide a copy of your annual report to all Designated Facilities you serve? Yes [ ] No [ ]</b></p> <p><b>Number of Interested Authorities you report to:</b></p> <div style="border: 1px solid black; padding: 2px; width: fit-content; margin: 5px auto;">N/A</div> <p><b>Did you provide a copy of your annual report to all Interested Authorities you report to for each Designated Facility? Yes [ ] No [ ]</b></p>
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**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
None	

**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 Leamington (Wheatley) DWS forms part of a stand-alone water distribution system owned by the Municipality of Leamington. The other subsystem which forms part of it is the Leamington (Union) Distribution System. They are both connected to each other at several inter-connections valves which are closed at all times except in emergency situations. This distribution system does not contain storage, pumping or re-chlorination facilities. There are 181 residential and commercial service connections served by the Leamington (Wheatley) Distribution System. It therefore falls into the 'large municipal residential' category under O. Regulation 170/03. Treated drinking water is supplied by the Wheatley Drinking Water System which is owned and operated by the Chatham-Kent Public Utilities Commission which takes its source of raw water from Lake Erie. Pressure in the distribution system is maintained by the Wheatley tower which the Chatham-Kent PUC governs by controlling tower levels. A water supply agreement between Chatham-Kent PUC and Municipality of Leamington was renewed 2016 January 1. This agreement authorises Chatham-Kent PUC to conduct testing and monitoring services of the Leamington (Wheatley) DS in accordance with the provisions of O. Reg. 170/03 s. 5 (4) on Leamington's behalf. Leamington Water Services is responsible for all other aspects of the operation, including maintenance and repairs of the water distribution infrastructure.

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

None

**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**

No expenditures on the part of Chatham-Kent



**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 #)
<b>Raw</b>					
<b>Point of Entry (Treated)</b>					
<b>Distribution</b>	153	0 - 0	0 - 0	153	<10 - 130

**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>		
<b>Chlorine</b>	206	0.43 – 1.96
<b>Fluoride</b> (If the DWS provides fluoridation)	None	None

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

***NOTE:** Record the unit of measure if it is **not** milligrams per liter.*

**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
None				



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

Sampled and reported by the Donor System.

	Sample Date Feb 12	Sample Date May 7	Sample Date Sept 5	Sample Date Nov 19	Exceedances
Antimony – ug/L					
Arsenic – ug/L					
Barium – ug/L					
Boron – ug/L					
Cadmium – ug/L					
Chromium – ug/L					
Lead – ug/L	See Schedule 15.1 Summary				
Mercury – mg/L					
Selenium- ug/L					
Sodium – mg/L					
Uranium – ug/L					
Fluoride – mg/L					
Nitrate – mg/L					
Nitrite – mg/L					

**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 (ug/L) (min#) – (max #)	Number of Exceedances
Residential	0		
Non Residential	0		
Distribution	2	< 0.50 – < 0.50	None



**Summary of Organic parameters sampled during this reporting period or the most recent sample results  
Sampled and reported by the Donor System.**

<b>Parameter</b>	<b>Sample Date</b>	<b>Results Value</b>	<b>Unit of Measure</b>	<b>Exceedances</b>
Alachlor				
Atrazine + N-dealkylated metabolites				
Azinphos - methyl				
Benzene				
Benzo(a)pyrene				
Bromoxynil				
Carbaryl				
Carbofuran				
Carbon Tetrachloride				
Chloropyrifos				
Diazinon				
Dicamba				
1,2 - Dichlorobenzene				
1,4 - Dichlorobenzene				
1,2 - Dichloroethane				
1,1- Dichloroethylene (vinylidenechloride)				
Dichloromethane				
2,4 - Dichlorophenol				
2,4 - Dichlorophenoxy acetic acid (2,4 - D)				
Diclofop - methyl				
Dimethoate				
Diquat				
Diuran				
Glyphosate				
Malathion				
Haloacetic Acids – sampled quarterly				
Metolachlor				
Metribuzin				
Monochlorobenzene (chlorobenzene )				
MPCA (2-Methyl-4-chlorophenoxyacetic acid)				
Paraquat				
Pentachlorophenol				
Phorate				
Picloram				
Polychlorinated Byphenyls (PCB)				
Prometryne				



Simazine				
Trihalomethanes – sampled quarterly (THM)	Feb 12 May 7 May 7 Aug 20 Sept 5 Nov 19	32.7 32.5 39.2 61.6 70.7 44.9 <b>44.9</b>	ug/L	None
<b>Running Annual Average</b>				
Terbufos				
Tetrachloroethylene (perchloroethylene)				
2,3,4,6 - Tetrachlorophenol				
Triallate				
Trichloroethylene				
2,4,6 - Trichlorophenol				
Trifluralin				
Vinyl Chloride				

**ADDITIONAL**

<b>Parameter- POINT OF ENTRY</b> Sampled and reported by the Donor System	<b>Sample Date</b> <b>Feb 12</b>	<b>Sample Date</b> <b>May 7</b>	<b>Sample Date</b> <b>Sept 5</b>	<b>Sample Date</b> <b>Nov 19</b>
pH				
HARDNESS – mg/L				
ALKALINITY – mg/L				
COLOUR - TCU				
FLUORIDE – mg/L				
ALUMINUM –mg/L				

**List any Inorganic or Organic parameter(s) that exceeded half the standard prescribed in Schedule 2 of Ontario Drinking Water Quality Standards.**

<b>Parameter</b>	<b>Result Value</b>	<b>Unit of Measure</b>	<b>Date of Sample</b>
None			

**Summary of additional voluntary sampling and testing during this reporting period.**

<b>Parameter</b>	<b>Date Sampled</b>	<b>Results Value Raw</b>	<b>Results Value Point of Entry</b>	<b>Results Value Distribution</b>	<b>Units</b>
None					