

**Part III Form 2**
**Section 11. ANNUAL REPORT.**

<b>Drinking-Water System Number:</b>	260011622
<b>Drinking-Water System Name:</b>	Deer Park PS
<b>Drinking-Water System Owner:</b>	York Region District School Board
<b>Drinking-Water System Category:</b>	Small Non-Municipal Non-Residential
<b>Period being reported:</b>	01/04/2018 to 31/03/2019

**Complete if your Category is Large Municipal Residential or Small Municipal Residential**

Does your Drinking-Water System serve more than 10,000 people? Yes [ ] No [X]

Is your annual report available to the public at no charge on a web site on the Internet? Yes [X] No [ ]

Location where Report required under O. Reg. 170/03 Schedule 22 will be available for inspection.

**Complete for all other Categories.**

Number of Designated Facilities served:

1

Did you provide a copy of your annual report to all Designated Facilities you serve? Yes [x] No [..]

Number of Interested Authorities you report to:

1

Did you provide a copy of your annual report to all Interested Authorities you report to for each Designated Facility? Yes [x] No [..]

**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:**

<b>Drinking Water System Name</b>	<b>Drinking Water System Number</b>
Deer Park PS	260011622

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 [x] 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

Deer Park P.S. is served by an on-site well water supply located on the north side of the school. The well is drilled to a depth of 92.96 metres below grade where water is obtained from a bedrock/confined clay aquifer. In order to comply with minimum treatment requirements, ultraviolet disinfection equipment was installed at this school. As an extra precaution, chlorine feed equipment, and turbidity meter were installed even though they were not required by the regulation. A holding tank with a methane gas ventilator was installed in 2012. A professional engineer hired by the Board provided certification that the water works at the school meets minimum treatment requirements set forth in the regulation. This engineering assessment and certification is a mandatory part of the regulation. In 2007 UPS power back up units were installed for the turbidity meter, chlorine analyzer, chessell recorder and UV system to provide power to the water treatment system for up to three hours in the case of power failure. Automatic shut off valves were installed which stop water flow in the event the UV disinfection unit alarms due to loss of intensity. This prevents the untreated water from being distributed to the system when the UV cannot provide an adequate level of disinfection. In 2013, a new UV unit (UVMaxPro 30) was installed to replace the previous UV unit.

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

Sodium Hypochlorite (12% Chlorine solution)

## 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

The cost to install, repair and replace required equipment, as well as the contractor to service the equipment and test the water, is approximately \$9944.87.

**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
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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	13	0 - 0	0 - 0		
Treated	26	0 - 0	0 - 0	26	0 - 4
Distribution					

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	n/a	n/a
Chlorine	n/a	n/a
Fluoride (If the DWS provides fluoridation)	n/a	n/a

*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	24/01/2017	.0001	mg/L	No
Arsenic	24/01/2017	.0002	mg/L	No
Barium	24/01/2017	.015	mg/L	No
Boron	24/01/2017	.163	mg/L	No
Cadmium	24/01/2017	.000006	mg/L	No
Chromium	24/01/2017	.00061	mg/L	No
Fluoride	24/01/2017	.54	mg/L	No
Lead (Standing Sample)	06/12/2018	.0119	mg/L	Yes
Lead (Standing Sample)	14/06/2018	.0253	mg/L	Yes

Lead (Standing Sample)	14/06/2018	.0323	mg/L	Yes
Lead (Standing Sample)	05/06/2018	.0365	mg/L	Yes
Lead (Standing Sample)	05/06/2018	.0321	mg/L	Yes
Lead (Standing Sample)	12/05/2018	.0103	mg/L	Yes
Lead (Standing Sample)	12/05/2018	.0177	mg/L	Yes
Mercury	24/01/2017	.00001	mg/L	No
Nitrate	10/01/2017	.018	mg/L	No
Nitrite	10/01/2017	.003	mg/L	No
Selenium	24/01/2017	.0001	mg/L	No
Sodium	24/01/2017	75.9	mg/L	Yes
Uranium	24/01/2017	.000002	mg/L	No

## Summary of Organic parameters sampled during this reporting period or the most recent sample results

Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
1,1-Dichloroethylene	24/01/2017	.00033	mg/L	No
1,2-Dichlorobenzene	24/01/2017	.00041	mg/L	No
1,2-Dichloroethane	24/01/2017	.00035	mg/L	No
1,4-Dichlorobenzene	24/01/2017	.00036	mg/L	No
2,3,4,6-Tetrachlorophenol	24/01/2017	.0002	mg/L	No
2,4,6-Trichlorophenol	24/01/2017	.00025	mg/L	No
2,4-D	24/01/2017	.00019	mg/L	No
2,4-Dichlorophenol	24/01/2017	.00015	mg/L	No
2-methyl-4-chlorophenoxyacetic acid (MCPA)	24/01/2017	1.2E-07	mg/L	No
Alachlor	24/01/2017	.00002	mg/L	No
Atrazine + N-dealkylated metabolites	24/01/2017	.00001	mg/L	No
Azinphos-methyl	24/01/2017	.00005	mg/L	No
Benzene	24/01/2017	.00032	mg/L	No
Benzo(a)pyrene	24/01/2017	.000004	mg/L	No
Bromoxynil	24/01/2017	.00033	mg/L	No
Carbaryl	24/01/2017	.00005	mg/L	No
Carbofuran	24/01/2017	.00001	mg/L	No
Carbon Tetrachloride	24/01/2017	.00016	mg/L	No
Chlorpyrifos	24/01/2017	.00002	mg/L	No
Diazinon	24/01/2017	.00002	mg/L	No
Dicamba	24/01/2017	.0002	mg/L	No
Dichloromethane	24/01/2017	.00035	mg/L	No
Diclofop-methyl	24/01/2017	.0004	mg/L	No
Dimethoate	24/01/2017	.00003	mg/L	No
Diquat	24/01/2017	.001	mg/L	No
Diuron	24/01/2017	.00003	mg/L	No
Glyphosate	24/01/2017	.001	mg/L	No
Malathion	24/01/2017	.00002	mg/L	No
Metolachlor	24/01/2017	.00001	mg/L	No
Metribuzin	24/01/2017	.00002	mg/L	No

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Monochlorobenzene	24/01/2017	.0003	mg/L	No
Paraquat	24/01/2017	.001	mg/L	No
PCB	24/01/2017	.00004	mg/L	No
Pentachlorophenol	24/01/2017	.00015	mg/L	No
Phorate	24/01/2017	.00001	mg/L	No
Picloram	24/01/2017	.001	mg/L	No
Prometryne	24/01/2017	.00003	mg/L	No
Simazine	24/01/2017	.00001	mg/L	No
Terbufos	24/01/2017	.00001	mg/L	No
Tetrachloroethylene	24/01/2017	.00035	mg/L	No
Triallate	24/01/2017	.00001	mg/L	No
Trichloroethylene	24/01/2017	.00044	mg/L	No
Trifluralin	24/01/2017	.00002	mg/L	No
Trihalomethanes	05/04/2016	.0036	mg/L	No
Trihalomethanes	18/10/2016	.0034	mg/L	No
Trihalomethanes	12/07/2016	.021	mg/L	No
Vinyl Chloride	24/01/2017	.00017	mg/L	No

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
n/a	n/a	n/a	n/a

(Only if DWS category is large municipal residential, small municipal residential, large municipal non residential, non municipal year round residential, large non municipal non residential)