

Water Quality Reports

2004

Chesterville

Bacti Analysis
Chemical Analysis
Annual Report
Summary Report and Resolution of Council
Performance Assessment
Annual Rate of Water Taking
Meter Calibrations
Adverse Water Reports
Chemical Acquisitions
Well Field Levels
Notification of Gap in Scada Data

WELL #5**WELL MONITORING**

(Permit to take Water #89-P-4052)

Year: 2004	FIRST QUARTER	SECOND QUARTER	THIRD QUARTER	FOURTH QUARTER
Production Well ON	4.90	4.50	5.40	5.00
Production Well OFF	2.50	2.20	3.02	2.30
TW#5 stand-by	2.30	2.03	3.02	3.80
TW#4 Monast pit	1.90	1.55	1.97	2.12
PIEZ. #7 High School	11.27	10.99	11.40	11.50

THE CORPORATION OF THE TOWNSHIP OF NORTH DUNDAS

SESSION

MARCH 14 2005

RESOLUTION NO. 14

MOVED BY:

Barbara Ross

SECONDED BY:

John Funnell

THAT the 2004 Summary of Water Quality Information for the Winchester and Chesterville Water Treatment Facilities were presented by OCWA and

reviewed by Council of the Township of North Dundas this 14th day of March, 2005.

DIVISION

FOR

AGAINST

OTE

SIGNATURE: PRESIDING OFFICER

John Funnell

CARRIED ☒

DEFEATED ☐

DEFERRED ☐

DECLARATION CONFLICT OF INTEREST

(a) DISCLOSED HIS (THEIR) HER INTEREST(S).

(b) VACATED HIS (THEIR) HER SEAT.

(c) ABSTAINED FROM DISCUSSION AND DID NOT VOTE ON THIS QUESTION

Clerk



Dave Markell
02/25/2005 11:31 AM

To: Reg170_FormSubmission@ene.gov.on.ca
cc: "Angela Rutley" <arutley@northdundas.com>

Subject: Annual Report-Chesterville,210000728,Part III Form 2

Annual Report-Chesterville,210000728



Annual report - 2004-Chesterville.D

dave markell
613-448-3098

Part III Form 2

Section 11. ANNUAL REPORT.

Drinking-Water System Number:
Drinking-Water System Name:
Drinking-Water System Owner:
Drinking-Water System Category:
Period being reported:

210000728
Chesterville
Township of North Dundas
Large Municipal Residential
January 1 to December 31, 2004

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 ☒

Is your annual report available to the public at no charge on a web site on the Internet? Yes ☒ No ☐

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

Available at the Township of North Dundas Office, 636 St. Lawrence Street, Winchester, Ontario and on their website www.northdundas.com

Complete for all other Categories.

Number of Designated Facilities served:

Did you provide a copy of your annual report to all Designated Facilities you serve?

Yes ☐ No ☐ N/A ☒

Number of Interested Authorities you report to:

Did you provide a copy of your annual report to all Interested Authorities you report to for each Designated Facility?

Yes ☐ No ☐ N/A ☒

List Drinking-Water Systems, which receive all of their drinking water from your system:

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 ☐ N/A ☒

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 _____

Drinking-Water Systems Regulation O. Reg. 170/03

Describe your Drinking-Water System

Groundwater is pumped from the source well and Sodium Hypochlorite is added. From the wells it travels 3.7 kilometers through a feeder main to a reservoir/contact tank where sufficient time for disinfection is provided. As water is used throughout the distribution system, the water level in the elevated tank falls to a preset limit and a pump at the reservoir starts. This pump draws water from the reservoir/contact tank and refills the elevated tank.

List all water treatment chemicals used over this reporting period

Sodium Hypochlorite was used at an average dosage rate of 1.62 mg/L.

Were any significant expenses incurred to?

- ☒ Install required equipment
- ☒ Repair required equipment
- ☒ Replace required equipment

Describe

Purchased and installed a low temperature alarm in the valve chamber of the elevated water tower. Cleaned and inspected the water reservoir. Rebuilt 8 fire hydrants in the distribution system.

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
May 12/04	HPC	>500	Cts/1ml	Resample	May 12/04
May 26/04	Total Coliforms	1	Cts/100ml	Resample	May 27/04
July 20/04	Background	>200	Cts/100ml	Resample	July 20/04
July 20/04	Background	>200	Cts/100ml	Resample	July 20/04
July 20/04	Background	>200	Cts/100ml	Resample	July 20/04
July 20/04	HPC	>500	Cts/1ml	Resample	July 20/04
August 4/04	Total Coliform	1	Cts/100ml	Resample	August 4/04
August 11/04	HPC	>500	Cts/1ml	Resample	August 12/04

Drinking-Water Systems Regulation O. Reg. 170/03

Microbiological testing done under section 8 (2) during this reporting period

	Number of Samples	Range of E.Coli or Fecal Results (#-#)	Range of Total Coliform Results (#-#)	Number of HPC Samples	Range of HPC Results (#-#)	Number of Background Samples	Range of Background Samples (#-#)
Raw	156	0-0	0-0	0	0	52	0->200
Treated	162	0-0	0-0	40	0>500	15	0-0
Distribution	406	0-0	0-1	51	0->500	22	0->200

Operational testing done under Schedule 7, 8 or 9 during the period covered by this Annual Report.

	Number of Grab Samples	Range of Results (#-#)
Turbidity Treated	8760	0.143-5.01 NTU's
Turbidity Raw	12	0.12-0.58 NTU's
Chlorine	8760	0.3-2.4

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 or order.

Date of order or C of A	Parameter	Date Sampled	Result	Unit of Measure
N/A				

Summary of Inorganic parameters tested during this reporting period or most recent

Parameter	Minimum Sample Date	Maximum Sample Date	Minimum Value	Maximum Value	Unit of Measure	Exceedance
Antimony	12/9/03	12/9/03	<0.6	<0.6	ug / L	No
Arsenic	01/20/03	01/20/03	<0.001	<0.001	mg / L	No
Barium	01/20/03	01/20/03	0.12	0.12	mg / L	No
Boron	01/20/03	01/20/03	<0.05	<0.05	mg / L	No
Cadmium	01/20/03	01/20/03	<0.0001	<0.0001	mg / L	No
Chromium	01/20/03	01/20/03	0.002	0.002	mg / L	No
Copper	01/20/03	01/20/03	0.007	0.007	mg / L	No
Iron	01/20/03	01/20/03	0.05	0.05	mg / L	No
Lead	01/28/04	01/28/04	<0.001	<0.001	mg / L	No
Mercury	01/20/03	01/20/03	<0.0001	<0.0001	mg / L	No
Selenium	01/20/03	01/20/03	<0.001	<0.001	mg / L	No
Uranium	01/20/03	01/20/03	<0.001	<0.001	mg / L	No
Fluoride	01/20/03	01/20/03	0.15	0.15	mg / L	No
Nitrite	01/28/04	10/25/04	<0.1	<0.1	mg / L	No
Nitrate	01/28/04	10/25/04	<0.1	<0.1	mg / L	No

Drinking-Water Systems Regulation O. Reg. 170/03

Summary of Organic parameters sampled during this reporting period or most recent

Parameter	Minimum Sample Date	Maximum Sample Date	Minimum Value	Maximum Value	Unit of Measure	Exceedance
Alachlor	12/9/03	01/20/03	<0.11	<0.5	ug / L	No
Aldicarb	12/9/03	01/20/03	<0.3	<5	ug / L	No
Aldrin + Dieldrin	01/20/03	12/9/03	<0.012	<0.067	ug / L	No
Atrazine + N-dealkylated metabolites	12/9/03	01/20/03	<0.12	<1.0	ug / L	No
Azinphos-methyl	12/9/03	01/20/03	<0.21	<2	ug / L	No
Bendiocarb	12/9/03	01/20/03	<0.13	<2	ug / L	No
Benzene	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Benzo(a)pyrene	12/9/03	12/9/03	<0.004	<0.004	ug / L	No
Bromoxynil	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Carbaryl	12/9/03	01/20/03	<0.16	<5	ug / L	No
Carbofuran	12/9/03	01/20/03	<0.37	<5	ug / L	No
Carbon Tetrachloride	01/20/03	01/20/03	<0.9	<0.9	ug / L	No
Chlordane (Total)	01/20/03	12/9/03	<0.012	<0.11	ug / L	No
Chlorpyrifos	01/20/03	01/20/03	<0.18	<1	ug / L	No
Cyanazine	12/9/03	01/20/03	<0.18	<1	ug / L	No
Diazinon	12/9/03	01/20/03	<0.081	<1	ug / L	No
Dicamba	01/20/03	01/20/03	<1	<1	ug / L	No
1,2-Dichlorobenzene	01/20/03	01/20/03	<0.4	<0.4	ug / L	No
1,4-Dichlorobenzene	01/20/03	01/20/03	<0.4	<0.4	ug / L	No
Dichlorodiphenyltrichloroethane (DDT) + metabolites	01/20/03	12/9/03	<0.024	<0.14	ug / L	No
1,2-Dichloroethane	01/20/03	01/20/03	<0.7	<0.7	ug / L	No
1,1-Dichloroethylene (vinylidene chloride)	01/20/03	01/20/03	<0.5	<0.5	ug / L	No
Dichloromethane	01/20/03	01/20/03	<4	<4	ug / L	No
2,4-Dichlorophenol	12/9/03	01/20/03	<0.15	<0.5	ug / L	No
2,4-Dichlorophenoxy acetic acid (2,4-D)	12/9/03	01/20/03	<0.11	<1	ug / L	No
Diclofop-methyl	12/9/03	01/20/03	<0.13	<0.9	ug / L	No
Dimethoate	12/9/03	01/20/03	<0.12	<2.5	ug / L	No
Dinoseb	12/9/03	01/20/03	<0.084	<1	ug / L	No
Diquat	12/9/03	01/20/03	<1	<7	ug / L	No
Diuron	12/9/03	01/20/03	<0.087	<10	ug / L	No
Glyphosate	12/9/03	01/20/03	<6	<10	ug / L	No
Heptachlor + Heptachlor Epoxide	01/20/03	12/9/03	<0.012	<0.11	ug / L	No
Lindane (Total)	01/20/03	12/9/03	<0.006	<0.056	ug / L	No
Malathion	12/9/03	01/20/03	<0.091	<5	ug / L	No
Methoxychlor	01/20/03	12/9/03	<0.024	<0.14	ug / L	No
Metolachlor	12/9/03	01/20/03	<0.092	<0.5	ug / L	No
Metribuzin	12/9/03	01/20/03	<0.12	<5	ug / L	No
Monochlorobenzene	01/20/03	01/20/03	<0.2	<0.2	ug / L	No
Paraquat	12/9/03	01/20/03	<1	<1	ug / L	No
Parathion	12/9/03	01/20/03	<0.18	<1	ug / L	No
Pentachlorophenol	12/9/03	01/20/03	<0.15	<0.5	ug / L	No
Phorate	12/9/03	01/20/03	<0.11	<0.5	ug / L	No
Picloram	12/9/03	01/20/03	<0.2	<5	ug / L	No

Drinking-Water Systems Regulation O. Reg. 170/03

Polychlorinated Biphenyls(PCB)	12/9/03	01/20/03	<0.04	<0.05	ug / L	No
Promethyne	12/9/03	01/20/03	<0.23	<0.25	ug / L	No
Simazine	12/9/03	01/20/03	<0.15	<1	ug / L	No
THM (NOTE: show latest quarterly average)	04/21/04	01/28/04	5.6	12.0	ug / L	No
Temephos	12/9/03	01/20/03	<0.31	<10	ug / L	No
Terbufos	01/20/03	01/20/03	<0.12	<0.7	ug / L	No
Tetrachloroethylene	01/20/03	01/20/03	<0.3	<0.3	ug / L	No
2,3,4,6-Tetrachlorophenol	12/9/03	01/20/03	<0.14	<0.5	ug / L	No
Triallate	12/9/03	01/20/03	<0.10	<1	ug / L	No
Trichloroethylene	01/20/03	01/20/03	<0.3	<0.3	ug / L	No
2,4,6-Trichlorophenol	12/9/03	01/20/03	<0.25	<0.5	ug / L	No
2,4,5-Trichlorophenoxy acetic acid (2,4,5-T)	12/9/03	01/20/03	<0.14	<1	ug / L	No
Trifluralin	12/9/03	01/20/03	<0.12	<1	ug / L	No
Vinyl Chloride	01/20/03	01/20/03	<0.5	<0.5	ug / 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			

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



Dave Markell
03/11/2005 03:32 PM

To: "Angela Rutley" <arutley@northdundas.com>
cc: Blair Henderson/OCWA@OCWA

Subject: **Chesterville Summary Report**

Angela, attached find the 2004 Summary Report for Chesterville as per the following excerpts of Schedule 22 of O.Reg 170. Blair says if you want he will come and present this to council. If not the regulations state this must be "given to the members of the municipal council". This should be documented in some way eg: a resolution of council.

Report

22-2. (1) The owner of a drinking-water system shall ensure that, not later than March 31 of each year after 2003, a report is prepared in accordance with subsections (2) and (3) for the preceding calendar year and is given to,

(a) in the case of a drinking-water system owned by a municipality, the members of the municipal council;

(2) The report must,

(a) list the requirements of the Act, the regulations, the system's approval and any order that the system failed to meet at any time during the period covered by the report and specify the duration of the failure; and

(b) for each failure referred to in clause (a), describe the measures that were taken to correct the failure.

(3) The report must also include the following information for the purpose of enabling the owner of the system to assess the capability of the system to meet existing and planned uses of the system:

1. A summary of the quantities and flow rates of the water supplied during the period covered by the report, including monthly average and maximum daily flows and daily instantaneous peak flow rates.

2. A comparison of the summary referred to in paragraph 1 to the rated capacity and flow rates approved in the system's approval.



2004



2004-CW-PARS.pdf



2004-Annual Rate of Taking Chesterville-Well #5

dave

SUMMARY REPORTS FOR MUNICIPALITIES

Report

This report is a summary of water quality information for the **Chesterville WTF**, published in accordance with Schedule 22 of Ontario's Drinking-Water Systems Regulation for the reporting period of January 1, 2004 to December 31, 2004. The Chesterville WTF is categorized as a Large Municipal Residential Drinking Water System.

This report was prepared by The Ontario Clean Water Agency on behalf of The Township of North Dundas.

Who gets a copy of the Report:

- in the case of a drinking-water system owned by a municipality, the members of the municipal council;
- in the case of a drinking-water system owned by a municipal service board established under section 195 of the *Municipal Act, 2001*, the members of the municipal service board; or
- in the case of a drinking-water system owned by a corporation, the board of directors of the corporation.

What must the Report contain?

The report must,

- (a) list the requirements of the Act, the regulations, the system's approval and any order that the system **failed to meet** at any time during the period covered by the report and specify the duration of the failure; and
- (b) for each failure referred to in clause (a), describe the measures that were taken to correct the failure.

The following table lists the requirements that the system failed to meet and the measures taken to correct the failure:

Drinking Water Legislation	List the requirement(s) the system failed to meet	Specify the duration of the failure (i.e. date(s))	Describe the measures taken to correct the failure	Status (complete or outstanding)
Safe Drinking Water Act	NA ✓			
Ontario Regulations (eg. O.Reg 170/03, O.Reg 435/93, O.Reg 903)	NA ✓			
System Certificate of Approval #7683-5QEPS6	N/A ✓			
Provincial Officer's Order No.	NA ✓			

What else must the Report contain?

The report must also include the following information for the purpose of enabling the owner of the system to assess the capability of the system to meet existing and planned uses of the system:

1. A summary of the quantities and flow rates of the water supplied during the period covered by the report, including monthly average and maximum daily flows and daily instantaneous peak flow rates.
2. A comparison of the summary referred to in paragraph 1 to the rated capacity and flow rates approved in the system's approval.

Attached please find a copy of the 2004 Performance Assessment Report and 2004 Annual Record of Water Taking for the Chesterville WTF, which contains all required flow information.

When Does the Report Get Submitted?

If a report is prepared for a system that supplies water to a municipality under the terms of a contract, the owner of the system shall give a copy of the report to the municipality by March 31.

ONTARIO CLEAN WATER AGENCY

WATER PLANT PERFORMANCE ASSESSMENT REPORT

MUNICIPALITY: **CHESTERVILLE**
 PROJECT: **CHESTERVILLE WATER SUPPLY**
 PROJ. NUM.: **6-0046-59-00**

YEAR: **2004**
 WATER SOURCE: **GROUNDWATER**
 DESIGN CAPACITY: **2,781 X 1000 M3/d**

WORKS NUM.: **210000728**
 DESCRIPTION: **A TWO WELL PUMPING SYSTEM WITH A 655m3 RESERVOIR AND FOUR HIGH LIFT PUMPS.
 DISINFECTION IS WITH SODIUM HYPOCHLORITE.**

MONTH	SYSTEM FLOWS (TREATED)			TREATED		DISTRIBUTION		E.coli.,T.Coli.,HPC,Background				RAW WATER	
	TOTAL FLOW	AVG DAY FLOW	MAX DAY FLOW	MIN FREE CL2 RESID	MAX FREE CL2 RESID	MIN FREE CL2 RESID	MAX FREE CL2 RESID	SAFE		ADVERSE		E.COLI	
	m3	m3	m3	(mg/l)	(mg/l)	(mg/l)	(mg/l)	TREAT	DIST	TREAT	DIST	TAKEN	DETECTED
JAN	17402	561	658	0.80	1.60	0.40	1.49	12	29	0	0	4	0
FEB	16223	559	656	0.60	1.30	0.76	1.31	12	28	0	0	4	0
MAR	18714	604	681	0.70	1.70	0.30	1.55	15	35	0	0	5	0
APR	18355	612	993	0.80	1.65	0.58	1.80	12	28	0	0	4	0
MAY	18238	588	856	0.74	1.50	0.49	1.80	17	51	1	1	6	0
JUN	17702	590	778	0.60	1.50	0.77	1.43	12	28	0	0	4	0
JUL	18788	606	736	1.00	1.50	0.84	1.41	15	39	0	1	4	0
AUG	18929	611	753	0.90	1.30	0.48	1.40	15	45	0	2	5	0
SEP	18489	616	1139	0.90	1.29	0.42	1.23	12	28	0	0	4	0
OCT	16987	548	661	0.63	1.40	0.50	1.21	12	28	0	0	4	0
NOV	16152	538	685	0.87	1.50	0.57	1.28	15	35	0	0	5	0
DEC	17130	553	727	0.90	2.40	0.63	1.52	12	28	0	0	4	0
TOTAL	213109							161	402	1	4	53	0
AVG		582			1.55								
MIN				0.600		0.300							
MAX			1139		2.40		1.80						
CRITERIA				0.20		0.05	4.00						

COMMENTS: **Max. day flows include days that fire hydrants were flushed.**

Personal information contained on this form is collected under the authority of the Ontario Water Resources Act, Section 20. The Purpose of the form is to record details and information about the taking of water annually. Questions should be directed to the Ministry of the Environment's Regional Office in your area.

Les renseignements personnels qui figurent dans le présent formulaire sont recueillis en vertu de l'article 20 de la Loi sur les ressources en eau de l'Ontario. La présente sert à consigner aux dossiers les détails et les renseignements concernant la prise d'eau annuelle. Prière d'adresser toute question au bureau régional du ministère de l'Environnement le Plus proche.

Year(Année): 2004 Permit No.(N° de permis): 89-P-4052

Location: RW5 - CHESTERVILLE WELL # 5 (PRODUCTION)

Source: Groundwater

Name of Permittee: VILLAGE OF CHESTERVILLE

Nom du titulaire du permis

Mailing Address: O.C.W.A. 5 INDUSTRIAL DRIVE CHESTERVILLE

Adresse postale

Location Of Taking:

Lieu de la prise d'eau

Twp. or Municipality:

Canton ou municipalité

NORTH DUNDAS

Concession:

CON. 5

Lot:

LOT 12

Date Of Taking Date de la prise d'eau	Total Hours Of Taking (Hour) Heure	Avg. Daily Rate Of Taking (L/sec) Débit de prise d'eau	Total Amount Of Taking (m³) Volume des prises	Peak Daily Flow (m³/day) Prélèvement maximum journalier	Max. Daily Rate of Taking (L/sec) Débit de pointe journalier
JAN	340.89	13.89	17,024	648	19
FEB	322.80	13.90	16,095	647	17
MAR	364.00	14.23	18,626	664	19
APR	366.44	14.20	18,723	890	18
MAY	376.56	14.00	18,985	856	18
JUN	386.27	13.67	18,979	886	19
JUL	413.17	13.65	20,235	922	19
AUG	370.23	13.54	18,014	670	18
SEP	373.42	13.48	18,112	1,131	19
OCT	343.09	13.41	16,557	627	19
NOV	329.37	13.47	15,974	688	19
DEC	345.04	13.57	16,856	653	15
Total:			214,180		
Criteria:		23.00		1,950	20

I certify that the above information is true, complete and accurate.

Signature

Date

J'atteste que les renseignements ci-dessus sont vrais, complets et exacts.

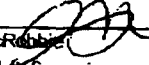
Client: CHESTERVILLE W. SUPPLY
5 Industrial Drive
Chesterville, ON
K0C 1H0
Attention: Mr. Blair Henderson

Report Number: 2401556
Date: 2004-02-05
Date Submitted: 2004-01-29
MOE DWIS UPLOAD: 2400808
Project: Water and System

P.O. Number:
Matrix: Supply Water

			LAB ID:	299066	299067							GUIDELINE		
			Sample Date:	2004-01-28	2004-01-28									
			Sample ID:	1- Well #5	2- SPS Chesterville							MOE REG 170/03		
PARAMETER	UNITS	MDL	TREATED	DISTRIBUTION								TYPE	LIMIT	UNITS
N-NO2 (Nitrite)	mg/L	0.10	<0.10 ✓									MAC	1.0	mg/L
N-NO3 (Nitrate)	mg/L	0.10	<0.10 ✓									MAC	10.0	mg/L
Lead	mg/L	0.001		0.001 ✓								MAC	0.01	mg/L

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration
Comment:

APPROVAL: 
Ewan McRobbie
Inorganic Lab Supervisor

Client: CHESTERVILLE W. SUPPLY
5 Industrial Drive
Chesterville, ON
K0C 1H0

Attention: Mr. Blair Henderson

Report Number: 2401556
Date: 2004-02-05
Date Submitted: 2004-01-29
MOE DWIS UPLOAD: 2400609
Project: Wells and System

P.O. Number:

Supply Water		Matrix:																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																																													
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MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

APPROVAL

Mina Nasirai
Organic Lab Supervisor

Client: CHESTERVILLE WELL SUPPLY
5 Industrial Drive
Chesterville, ON
K0C 1H0
Attention: Mr. Blair Henderson

Report Number: 2406615
Date: 2004-04-21
Data Submitted: 2004-04-19
MOE OWS UPLOAD: 2402263
Project:

04/22/04 THU 08:26 FAX 613 727 5222

ACCUTEST LABS

->>> OCWA Chestervill 003

LAB ID: 312869		Sample Date: 2004-04-19		Sample ID: CW-01		Supply Water	
PARAMETER		UNITS	MDL	TREATED	TYPE	LIMIT	UNITS
N-NO2 (Nitrite)	mg/L	0.10	<0.10		MAC	1.0	mg/L
N-NO3 (Nitrate)	mg/L	0.10	<0.10		MAC	10.0	mg/L

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

Comment:

Handwritten: Done 4/19/04

APPROVAL:

Ewan McRobbie
Inorganic Lab Supervisor

Client: CHESTERVILLE WELL SUPPLY

5 Industrial Drive

Chesterville, ON

K0C 1H0

Attention: Mr. Blair Henderson

Report Number: 2406896

Date: 2004-06-21

Date Submitted: 2004-04-22

MOE DWIS UPLOAD: 2402379

Project: 210000728

P.O. Number:

Matrix:

Supply Water

			LAB ID:	313249						GUIDELINE		
			Sample Date:	2004-04-21						MOE REG 170/03		
			Sample ID:	1 System THM SPS								
PARAMETER	UNITS	MDL	DISTRIBUTION							TYPE	LIMIT	UNITS
VOLATILE ORGANIC COMPOUNDS - VOCs												
Bromodichloromethane	ug/L	0.3	1.9									
Bromoform	ug/L	0.4	<0.4									
Chloroform	ug/L	0.5	2.4									
Dibromochloromethane	ug/L	0.3	1.3									
Trihalomethanes (total)	ug/L	2.0	5.6							MAC	100	ug/L
VOC SURROGATES												
Toluene-d8	%		100									

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

Comment: This is an amendment and supercedes all previous copies of this report. Sample ID has been corrected.

APPROVAL: _____

Mina Nasirai

Organic Lab Supervisor

Client: CHESTERVILLE WELL SUPPLY

5 Industrial Drive
Chesterville, ON
K0C 1H0

Attention: Mr. Blair Henderson

Report Number: 2414942

Date: 2004-08-13

Date Submitted: 2004-08-09

MOE DWIS UPLOAD: 2404991

Project:

P.O. Number:

Matrix:

Supply Water

			LAB ID:	334805						GUIDELINE		
			Sample Date:	2004-08-09						MOE REG 170/03		
			Sample ID:	Chesterville Dist.								
PARAMETER	UNITS	MDL	DISTRIBUTION							TYPE	LIMIT	UNITS
N-NO2 (Nitrite)	mg/L	0.10	<0.10 ✓							MAC	1.0	mg/L
N-NO3 (Nitrate)	mg/L	0.10	<0.10 ✓							MAC	10.0	mg/L
Done A.S. 23/24												

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

Comment:

APPROVAL: _____

Ewan McRobbie
Inorganic Lab Supervisor

Client: CHESTERVILLE WELL SUPPLY
5 Industrial Drive
Chesterville, ON
K0C 1H0
Attention: Mr. Blair Henderson

Report Number: 2414942
Date: 2004-08-13
Date Submitted: 2004-08-09
MOE DWIS UPLOAD: 2404991
Project:

P.O. Number:
Matrix:

PARAMETER		LAB ID:	Supply Water				GUIDELINE	
		Sample Date:						
		Sample ID:						
			334805					
			2004-08-09					
			Chesterville Dist.					
			DISTRIBUTION					
		UNITS	MDL				TYPE	LIMIT
								UNITS
VOLATILE ORGANIC COMPOUNDS - VOCs								
Bromodichloromethane		ug/L	0.3	1.8				
Bromoform		ug/L	0.4	<0.4				
Chloroform		ug/L	0.5	4.0				
Dibromochloromethane		ug/L	0.3	1.0				
Trihalomethanes (total)		ug/L	2.0	6.8			MAC	100 ug/L
VOC SURROGATES								
Toluene-d8		%		99				

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

Comment:

APPROVAL:

Mina Nasirai
Organic Lab Supervisor
Results relate only to the parameters tested on the samples submitted for analysis.

Client: CHESTERVILLE WELL SUPPLY
5 Industrial Drive
Chesterville, ON
K0C 1H0
Attention: Mr. Blair Henderson

Report Number: 2420424
Date: 2004-10-29
Date Submitted: 2004-10-25
MOE DWIS UPLOAD: 2406761
Project: 5705

P.O. Number: _____
Matrix: _____ Supply Water

LAB ID: 350137 Sample Date: 2004-10-25 Sample ID: Chesterville Treated				Matrix:				Supply Water		
								GUIDELINE		
								MOE REG 170/03		
PARAMETER	UNITS	MDL	TREATED					TYPE	LIMIT	UNITS
N-NO2 (Nitrite)	mg/L	0.10	<0.10					MAC	1.0	mg/L
N-NO3 (Nitrate)	mg/L	0.10	<0.10					MAC	10.0	mg/L

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration
Comment:

APPROVAL: _____
Ewan McRobbie
Inorganic Lab Supervisor

Client: CHESTERVILLE WELL SUPPLY

5 Industrial Drive
Chesterville, ON
K0C 1H0

Attention: Mr. Blair Henderson

Report Number: 2421612
Date: 2004-11-11
Date Submitted: 2004-11-08
MOE DWIS UPLOAD: 2407000
Project: Chesterville Dist

P.O. Number:

Matrix: Supply Water

				LAB ID:	353671							GUIDELINE		
				Sample Date:	2004-11-08						MOE REG 170/03			
				Sample ID:	Chesterville SPS									
PARAMETER				UNITS	MDL	DISTRIBUTION						TYPE	LIMIT	UNITS
VOLATILE ORGANIC COMPOUNDS - VOCs												MAC	100	ug/L
Bromodichloromethane				ug/L	0.3	2.4								
Bromoform				ug/L	0.4	<0.4								
Chloroform				ug/L	0.5	3.8								
Dibromochloromethane				ug/L	0.3	1.4								
Trihalomethanes (total)				ug/L	2.0	7.6								
VOC SURROGATES														
Toluene-d8				%		100								
Dave Nov 12/04														

Dave
Nov 12/04

MDL = Method Detection Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

Comment:

APPROVAL:

Mina Nasirai
Organic Lab Supervisor

C.O.C.: C-000240

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-144

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 06-Jan-04

DATE REPORTED: 08-Jan-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.:

P.O. NUMBER: Chesterville WTP

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	06-Jan-2004	06-Jan-2004	06-Jan-2004	06-Jan-2004	06-Jan-2004

Client I.D.	Sample I.D.	Date Collected					
Well #5 Raw	B04-144-1	05-Jan-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Well #5 Treated	B04-144-2	05-Jan-04	< 1 ✓	--	< 1 ✓	2 ✓	0.96 ✓
Chesterville Public School	B04-144-3	05-Jan-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.11 ✓
McEwen Ser Sta	B04-144-4	05-Jan-04	< 1 ✓	--	< 1 ✓	--	1.11 ✓
D+D Auto	B04-144-5	05-Jan-04	< 1 ✓	--	< 1 ✓	--	1.16 ✓

*Dave Jan 21 04
FAXED*

K. Pipin

Krystyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00241

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-749

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 13-Jan-04

JOB/PROJECT NO.:

DATE REPORTED: 16-Jan-04

P.O. NUMBER: Chesterville WTP

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	2.20
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	13-Jan-2004	13-Jan-2004	13-Jan-2004	13-Jan-2004	13-Jan-2004

Client I.D.	Sample I.D.	Date Collected					
Well #5 Raw	B04-749-1	12-Jan-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Well #5 Treated	B04-749-2	12-Jan-04	< 1 ✓	--	< 1 ✓	< 2 ✓	0.99 ✓
Fosters Kitchen Sink	B04-749-3	12-Jan-04	< 1 ✓	--	< 1 ✓	< 2 ✓	0.99 ✓
61 Albert St	B04-749-4	12-Jan-04	< 1 ✓	--	< 1 ✓	--	1.14 ✓

Jan 16/04
AM

*1 sample
broken, resampled
Sent. Jan 17
Faxed.
Jan 19/04*

K. Pipin

Krystyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00287

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-884

Rev. 1

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 14-Jan-04

DATE REPORTED: 20-Jan-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.:

P.O. NUMBER: Chesterville WTP

WATERWORKS NO. 210000728

Parameter Name:		Total Coliform	E coli	Heterotrophic Plate Count	Free Chlorine	
Units:		cts/100mL	cts/100mL	cts/1mL	mg/L	
M.D.L.:		1	1	2	2.20	
Reference Method:		MOE E3371	MOE E3371	MOE E3371	n/a	
Date Analyzed:		14-Jan-2004	14-Jan-2004	14-Jan-2004	14-Jan-2004	
Client I.D.	Sample I.D.	Date Collected				
	5 Industrial Dr.	B04-884-1	13-Jan-04	< 1	< 1	< 2

*Collected to
replace sample
broken in transit
Jan 12/04*

K. Pipin

Krystyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00243

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-1173

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 19-Jan-04

JOB/PROJECT NO.:

DATE REPORTED: 21-Jan-04

P.O. NUMBER: **Chesterville WTP**

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	19-Jan-2004	19-Jan-2004	19-Jan-2004	19-Jan-2004	19-Jan-2004

Client I.D.	Sample I.D.	Date Collected					
Well #5 Raw	B04-1173-1	19-Jan-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Well #5 Treated	B04-1173-2	19-Jan-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.15
Community Hall	B04-1173-3	19-Jan-04	< 1 ✓	--	< 1 ✓	4 ✓	1.14
Post Office	B04-1173-4	19-Jan-04	< 1 ✓	--	< 1 ✓	--	0.84
True Value	B04-1173-5	19-Jan-04	< 1 ✓	--	< 1 ✓	--	1.10

*Dave
Jan 21/04*

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00244

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-1714

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 26-Jan-04

JOB/PROJECT NO.:

DATE REPORTED: 28-Jan-04

P.O. NUMBER: **Chesterville WTP**

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	26-Jan-2004	26-Jan-2004	26-Jan-2004	26-Jan-2004	26-Jan-2004

Client I.D.	Sample I.D.	Date Collected					
Well #5 Raw	B04-1714-1	26-Jan-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Well #5 Treated	B04-1714-2	26-Jan-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.07
61 Albert ST	B04-1714-3	26-Jan-04	< 1 ✓	--	< 1 ✓	2 ✓	0.99
Lannins Garage	B04-1714-4	26-Jan-04	< 1 ✓	--	< 1 ✓	--	1.09
Arena	B04-1714-5	26-Jan-04	< 1 ✓	--	< 1 ✓	--	1.12

Dwr
Jan 28/04

K. Pipin

Krystyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00245

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-2243

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 02-Feb-04

JOB/PROJECT NO.:

DATE REPORTED: 04-Feb-04

P.O. NUMBER: Chesterville WTP

SAMPLE MATRIX: Drinking Water

210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	2.20
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	02-Feb-2004	02-Feb-2004	02-Feb-2004	02-Feb-2004	02-Feb-2004

Client I.D.	Sample I.D.	Date Collected					
Well #5 Raw	B04-2243-1	02-Feb-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Well #5 Treated	B04-2243-2	02-Feb-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.17
St. Mary's School	B04-2243-3	02-Feb-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.18
CPS	B04-2243-4	02-Feb-04	< 1 ✓	--	< 1 ✓	--	1.31
LCBO	B04-2243-5	02-Feb-04	< 1 ✓	--	< 1 ✓	--	1.07

*Dave
Feb 6/04
Faxed Feb 6/04*

M.D.L. = Method Detection Limit

Krystyna Pipin
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00246

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-2784

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 09-Feb-04

JOB/PROJECT NO.:

DATE REPORTED: 11-Feb-04

P.O. NUMBER: Chesterville WTP

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	09-Feb-2004	09-Feb-2004	09-Feb-2004	09-Feb-2004	09-Feb-2004

Client I.D.	Sample I.D.	Date Collected					
Well #5 Raw	B04-2784-1	09-Feb-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Well #5 Treated	B04-2784-2	09-Feb-04	< 1 ✓	--	< 1 ✓	< 2 ✓	0.84
H Curran	B04-2784-3	09-Feb-04	< 1 ✓	--	< 1 ✓	< 2 ✓	0.95
61 Albert	B04-2784-4	09-Feb-04	< 1 ✓	--	< 1 ✓	--	0.79
5 Industrial	B04-2784-5	09-Feb-04	< 1 ✓	--	< 1 ✓	--	0.76

*Dave
Fated.
Feb 13/04*

K. Pipin

Krystyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

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C.O.C.: C-00421

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-3311

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 16-Feb-04

DATE REPORTED: 18-Feb-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.:

P.O. NUMBER: Chesterville WTP

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	2.20
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	17-Feb-2004	17-Feb-2004	17-Feb-2004	17-Feb-2004	17-Feb-2004

Client I.D.	Sample I.D.	Date Collected					
Well #5 Raw	B04-3311-1	16-Feb-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Well #5 Treated	B04-3311-2	16-Feb-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.00
Fosters Kitchen	B04-3311-3	16-Feb-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.18
21 Albert Kitchen	B04-3311-4	16-Feb-04	< 1 ✓	--	< 1 ✓	--	0.80
Legion LB	B04-3311-5	16-Feb-04	< 1	--	< 1 ✓	--	0.69

*Dave
Feb 19/04
Faxed.*

K. Pipin

Krystyna Pipin
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

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C.O.C.: C-00422

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-3876

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 23-Feb-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 25-Feb-04

P.O. NUMBER: Chesterville WTP

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	2.20
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	23-Feb-2004	23-Feb-2004	23-Feb-2004	23-Feb-2004	23-Feb-2004

Client I.D.	Sample I.D.	Date Collected					
Well #5 Raw ✓	B04-3876-1	23-Feb-04	< 1 ✓	> 200 ✓	< 1 ✓	--	--
Well #5 Treated ✓	B04-3876-2		< 1 ✓	--	< 1 ✓	< 2 ✓	--
St Mary's School ✓	B04-3876-3	23-Feb-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.04
Post Office Kitchen ✓	B04-3876-4	23-Feb-04	< 1 ✓	--	< 1 ✓	--	1.23
LCBO Kitchen ✓	B04-3876-5	23-Feb-04	< 1 ✓	--	< 1 ✓	--	1.16

*Dave
Feb 26/04*

Faxed

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

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C.O.C.: 00423

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-4412

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 01-Mar-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 03-Mar-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	01-Mar-2004	01-Mar-2004	01-Mar-2004	01-Mar-2004	01-Mar-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-4412-1	01-Mar-04	< 1 ✓	44 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated	B04-4412-2	01-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.31
Community Hall - Ladies' Bathroom	B04-4412-3	01-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.43
18A Industrial Dr. Bathroom	B04-4412-4	01-Mar-04	< 1 ✓	--	< 1 ✓	--	1.44
61 Albert St. Bathroom	B04-4412-5	01-Mar-04	< 1 ✓	--	< 1 ✓	--	1.36

Dave
Mar 3/04

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00431

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-4986

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 08-Mar-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 10-Mar-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	08-Mar-2004	08-Mar-2004	08-Mar-2004	08-Mar-2004	08-Mar-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-4986-1	08-Mar-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated	B04-4986-2	08-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.47
Lannins Sink	B04-4986-3	08-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.36
21 Albert St Kitchen Sink	B04-4986-4	08-Mar-04	< 1 ✓	--	< 1 ✓	--	1.35
5 Industrial Kitchen	B04-4986-5	08-Mar-04	< 1 ✓	--	< 1 ✓	--	1.33

*Dave
Mar 12/04
Fated*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00424

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-5581

Report To:Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0**Attention:** Dave Markell**Caduceon Environmental Laboratories**2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 15-Mar-04

DATE REPORTED: 18-Mar-04

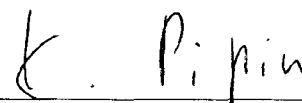
SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: -

WATERWORKS NO. 210000728

Parameter Name:			Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:			cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:			1	1	1	2	
Reference Method:			MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:			15-Mar-2004	15-Mar-2004	15-Mar-2004	15-Mar-2004	15-Mar-2004
Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-5581-1	15-Mar-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated - Kitchen	B04-5581-2	15-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	0.77
Chesterville Bowling	B04-5581-3	15-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	0.85
Post Office Kitchen	B04-5581-4	15-Mar-04	< 1 ✓	--	< 1 ✓	--	0.88
H. Currans Shop Sink	B04-5581-5	15-Mar-04	< 1 ✓	--	< 1 ✓	--	0.83

Dave
Mar 19Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: 00425

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-6198

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 22-Mar-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 24-Mar-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:			Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:			cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:			1	1	1	2	
Reference Method:			MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:			22-Mar-2004	22-Mar-2004	22-Mar-2004	22-Mar-2004	22-Mar-2004
Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-6198-1	22-Mar-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated - Kitchen	B04-6198-2	22-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.49
61 Albert St Bathroom	B04-6198-3	22-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.49
Community Hall Ladies Bathroom	B04-6198-4	22-Mar-04	< 1 ✓	--	< 1 ✓	--	1.38
LCBO Kitchen Sink	B04-6198-5	22-Mar-04	< 1 ✓	--	< 1 ✓	--	1.56

*Dave
Mar 26/04
E-mailed*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00426

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-6745

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 29-Mar-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 31-Mar-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	29-Mar-2004	29-Mar-2004	29-Mar-2004	29-Mar-2004	29-Mar-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-6745-1	29-Mar-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated - Kitchen	B04-6745-2	29-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.45
Curran's Garage	B04-6745-3	29-Mar-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.45
Public School	B04-6745-4	29-Mar-04	< 1 ✓	--	< 1 ✓	--	1.55
MB Foster	B04-6745-5	29-Mar-04	< 1 ✓	--	< 1 ✓	--	1.47

*Dave
Mar 31/04
e-mailed*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00427

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-7358

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 05-Apr-04

DATE REPORTED: 07-Apr-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: -

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	05-Apr-2004	05-Apr-2004	05-Apr-2004	05-Apr-2004	05-Apr-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-7358-1	05-Apr-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated - Kitchen	B04-7358-2	05-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.16
Co-op	B04-7358-3	05-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.07
MB Foster	B04-7358-4	05-Apr-04	< 1 ✓	--	< 1 ✓	--	1.22
LCBO	B04-7358-5	05-Apr-04	< 1 ✓	--	< 1 ✓	--	1.23

April 8/04
BAH

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00428

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-8077

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 13-Apr-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 15-Apr-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	14-Apr-2004	14-Apr-2004	14-Apr-2004	14-Apr-2004	14-Apr-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-8077-1	13-Apr-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated	B04-8077-2	13-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.19
31 Main St	B04-8077-3	13-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.06
5 Industrial Dr	B04-8077-4	13-Apr-04	< 1 ✓	--	< 1 ✓	--	1.17
Post Office	B04-8077-5	13-Apr-04	< 1 ✓	--	< 1 ✓	--	1.06

*Dave
Apr. 16/04
e mailed*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00430

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-8560

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 19-Apr-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 21-Apr-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	19-Apr-2004	19-Apr-2004	19-Apr-2004	19-Apr-2004	19-Apr-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-8560-1	19-Apr-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated - Kitchen	B04-8560-2	19-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.19
D+D Performance	B04-8560-3	19-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.08
M&T Sports	B04-8560-4	19-Apr-04	< 1 ✓	--	< 1 ✓	--	1.16
Lannin's Garage	B04-8560-5	19-Apr-04	< 1 ✓	--	< 1 ✓	--	1.16

*Dave
Apr 21/04
e-mailed*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: ---

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-9237

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 26-Apr-04

DATE REPORTED: 28-Apr-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: ---

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	2.20
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	26-Apr-2004	26-Apr-2004	26-Apr-2004	26-Apr-2004	26-Apr-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-9237-1	26-Apr-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated	B04-9237-2	26-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.14
MB Foster	B04-9237-3	26-Apr-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.22
Brag St. SPS	B04-9237-4	26-Apr-04	< 1 ✓	--	< 1 ✓	--	1.19
Post Office	B04-9237-5	26-Apr-04	< 1 ✓	--	< 1 ✓	--	1.02

April 29/04
BAF.

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: c-00740

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-9874

Report To:

Ontario Clean Water Agency - Chesterville

5 Industrial Dr.

Chesterville ON K0C 1H0

Attention: Dave Markell**Caduceon Environmental Laboratories**

2378 Holly Lane

Ottawa Ontario K1V 7P1

Tel: 526-0123

Fax 526-1244

DATE SUBMITTED: 03-May-04

DATE REPORTED: 05-May-04

SAMPLE MATRIX: Drinking Water

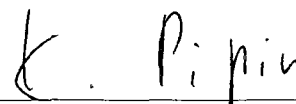
JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: -

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	03-May-2004	03-May-2004	03-May-2004	03-May-2004	03-May-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-9874-1	03-May-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated	B04-9874-2	03-May-04	< 1 ✓	--	< 1 ✓	4 ✓	1.33
Currans Garrage	B04-9874-3	03-May-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.19
Water St. SPS	B04-9874-4	03-May-04	< 1 ✓	--	< 1 ✓	--	1.30
LCBO	B04-9874-5	03-May-04	< 1 ✓	--	< 1 ✓	--	1.30

Dave
May 6Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00742

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-10605

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 10-May-04
DATE REPORTED: 12-May-04
SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP
P.O. NUMBER: —
WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	10-May-2004	10-May-2004	10-May-2004	10-May-2004	10-May-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-10605-1	10-May-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated	B04-10605-2	10-May-04	< 1 ✓	--	< 1 ✓	> 500 ✓	1.24
Public School	B04-10605-3	10-May-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.20
Becker's	B04-10605-4	10-May-04	< 1 ✓	--	< 1 ✓	--	1.15
Legion	B04-10605-5	10-May-04	< 1 ✓	--	< 1 ✓	--	1.21

may 13/04
Adverse. Reported
may 12
Resampled & driven to
Lab may 12

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00743

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-10977

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 12-May-04

DATE REPORTED: 14-May-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: -

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	12-May-2004	12-May-2004	12-May-2004	12-May-2004	12-May-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Inlet	B04-10977-1	12-May-04	< 1	< 1	< 1	--	0.75
Chesterville Well #5 - Treated	B04-10977-2	12-May-04	< 1	--	< 1	< 2	1.45
5 Industrial	B04-10977-3	12-May-04	< 1	--	< 1	< 2	1.24

Not Row or Treated
Process

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00744

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-11325

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 17-May-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 19-May-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:			Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:			cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:			1	1	1	2	
Reference Method:			MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:			17-May-2004	17-May-2004	17-May-2004	17-May-2004	17-May-2004
Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-11325-1	17-May-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated - Kitchen	B04-11325-2	17-May-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.13
SPS	B04-11325-3	17-May-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.02
61 Albert	B04-11325-4	17-May-04	< 1 ✓	--	< 1 ✓	--	1.21
LCBO	B04-11325-5	17-May-04	< 1 ✓	--	< 1 ✓	--	1.17

*Dave
May 20/04
e-mailed*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00745

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-12070

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.

Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane

Ottawa Ontario K1V 7P1

Tel: (613)526-0123

Fax (613)526-1244

DATE SUBMITTED: 25-May-04

DATE REPORTED: 27-May-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: -

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	26-May-2004	26-May-2004	26-May-2004	26-May-2004	26-May-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-12070-1	25-May-04	<1 ✓	<1 ✓	<1 ✓	--	--
Chesterville Well #5 - Treated	B04-12070-2	25-May-04	<1 ✓	--	<1 ✓	<2 ✓	1.27
D & D Performance	B04-12070-3	25-May-04	<1 ✓	--	<1 ✓	<2	1.08
Mckewen	B04-12070-4	25-May-04	1	--	<1 ✓	--	1.08
5 Industrial	B04-12070-5	25-May-04	<1 ✓	--	<1 ✓	--	1.02

Dave May 28

Adverse @ Mckewen's.

Resample & drive to lab. up, down, side

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: ---

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-12464

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE SUBMITTED: 27-May-04
DATE REPORTED: 31-May-04
SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP
P.O. NUMBER: ---
WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1		1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	27-May-2004	27-May-2004	27-May-2004	27-May-2004	27-May-2004

Client I.D.	Sample I.D.	Date Collected					
5 Industrial Dr. Kitchen Tap	B04-12464-1	27-May-04	< 1	--	< 1	2	1.02
King St. Becker's Cash tap	B04-12464-2	27-May-04	< 1	--	< 1	--	1.13
MacEwen Gas Queen St - Wash Tap	B04-12464-3	27-May-04	< 1	--	< 1	--	1.12

*resample
from T.C. - adverse.
all OK.
sent issue resolution
June 1/04
Dave*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00747

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-12688

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE SUBMITTED: 31-May-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 02-Jun-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	31-May-2004	31-May-2004	31-May-2004	31-May-2004	31-May-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-12688-1	31-May-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated	B04-12688-2	31-May-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.10
Bray St SPS	B04-12688-3	31-May-04	< 1 ✓	--	< 1 ✓	< 2 ✓	1.19
109 Main St Curran's	B04-12688-4	31-May-04	< 1 ✓	--	< 1 ✓	--	1.19
Water St SPS Hydrant	B04-12688-5	31-May-04	< 1 ✓	--	< 1 ✓	--	1.09

*Dave
June 3/04*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00748

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-13428

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE SUBMITTED: 07-Jun-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 09-Jun-04

P.O. NUMBER: _

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:			E coli	Total Coliform	Background	Heterotrophic Plate Count	Free Chlorine
Units:			cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:			1	1	1	2	
Reference Method:			MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
Date Analyzed:			07-Jun-2004	07-Jun-2004	07-Jun-2004	07-Jun-2004	07-Jun-2004
Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-13428-1	07-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated	B04-13428-2	07-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	< 2 ✓	1.36
Becker's 5 King St	B04-13428-3	07-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	44 ✓	1.76
2808 Main St Foster	B04-13428-4	07-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	--	1.43
19a Industrial Dr	B04-13428-5	07-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	--	1.61

RA
June 11/04

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00749

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-14163

Report To:Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0**Attention:** Dave Markell**Caduceon Environmental Laboratories**2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE SUBMITTED: 14-Jun-04

JOB/PROJECT NO.: Chesterville WTP

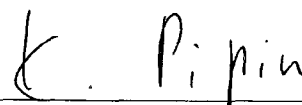
DATE REPORTED: 16-Jun-04

P.O. NUMBER:

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:			E coli	Total Coliform	Background	Heterotrophic Plate Count	Free Chlorine
Units:			cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:			1	1	1	2	
Reference Method:			MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
Date Analyzed:			14-Jun-2004	14-Jun-2004	14-Jun-2004	14-Jun-2004	14-Jun-2004
Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-14163-1	14-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated	B04-14163-2	14-Jun-04	< 1 ✓	< 1 ✓	--	< 2 ✓	1.43
H Curran Auto Shop	B04-14163-3	14-Jun-04	< 1 ✓	< 1 ✓	--	< 2 ✓	1.24
37 Main St	B04-14163-4	14-Jun-04	< 1 ✓	< 1 ✓	--	--	1.25
LCBO	B04-14163-5	14-Jun-04	< 1 ✓	< 1 ✓	--	--	1.20

Done
June 17/04Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: ---

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-14892

Report To:**Ontario Clean Water Agency - Chesterville**
5 Industrial Dr.
Chesterville ON K0C 1H0**Attention:** Dave Markell**Caduceon Environmental Laboratories**2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 21-Jun-04

DATE REPORTED: 23-Jun-04

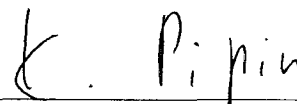
SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: _

WATERWORKS NO. 210000728

Parameter Name:			Total Coliform	E coli	Background	Heterotrophic Plate Count	Free Chlorine
Units:			cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:			1	1	1	2	
Reference Method:			MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
Date Analyzed:			21-Jun-2004	21-Jun-2004	21-Jun-2004	21-Jun-2004	21-Jun-2004
Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-14892-1	21-Jun-04	< 1 ✓	< 1 ✓	3 ✓	--	--
Chesterville Well #5 - Treated	B04-14892-2	21-Jun-04	< 1 ✓	< 1 ✓	--	< 2 ✓	1.15
McKewen's Fuel Main St.	B04-14892-3	21-Jun-04	< 1 ✓	< 1 ✓	--	< 2 ✓	1.15
5 Industrial Dr.	B04-14892-4	21-Jun-04	< 1 ✓	< 1 ✓	--	--	1.01
Bray St. SPS	B04-14892-5	21-Jun-04	< 1 ✓	< 1 ✓	--	--	1.18

*Dave
June 23/04*Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00751

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-15598

Report To:**Ontario Clean Water Agency - Chesterville**
5 Industrial Dr.
Chesterville ON K0C 1H0**Attention:** Dave Markell**Caduceon Environmental Laboratories**2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 28-Jun-04

DATE REPORTED: 30-Jun-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: —

WATERWORKS NO. 210000728

Parameter Name:			Total Coliform	E coli	Background	Heterotrophic Plate Count	Free Chlorine
Units:			cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:			1	1	1	2	
Reference Method:			MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
Date Analyzed:			29-Jun-2004	29-Jun-2004	29-Jun-2004	28-Jun-2004	28-Jun-2004
Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-15598-1	28-Jun-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated	B04-15598-2	28-Jun-04	< 1 ✓	< 1 ✓	--	< 2 ✓	1.25
Water St SPS	B04-15598-3	28-Jun-04	< 1 ✓	< 1 ✓	--	< 2 ✓	1.18
Royal Can Legion	B04-15598-4	28-Jun-04	< 1 ✓	< 1 ✓	--	--	1.27
Canada Post	B04-15598-5	28-Jun-04	< 1 ✓	< 1 ✓	--	--	1.19

Done
5-17-08

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00934

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-16127

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 05-Jul-04

DATE REPORTED: 07-Jul-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: -

WATERWORKS NO. 210000728

Parameter Name:			Total Coliform	E coli	Background	Heterotrophic Plate Count	Free Chlorine
Units:			cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:			1	1	1	2	
Reference Method:			MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
Date Analyzed:			05-Jul-2004	05-Jul-2004	05-Jul-2004	05-Jul-2004	05-Jul-2004
Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-16127-1	05-Jul-04	< 1	< 1	< 1	--	--
Chesterville Well #5 - Treated	B04-16127-2	05-Jul-04	< 1	< 1	--	< 2	1.17
MB Foster Kitchen	B04-16127-3	05-Jul-04	< 1	< 1	--	2	1.29
5 King St Sink	B04-16127-4	05-Jul-04	< 1	< 1	--	--	1.41
D+D Performance WR	B04-16127-5	05-Jul-04	< 1	< 1	--	--	1.17

July 8/04
EA

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00924

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-16794

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 12-Jul-04

DATE REPORTED: 14-Jul-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: -

WATERWORKS NO. 210000728

Parameter Name:			Total Coliform	E coli	Total Coliform	E coli	Background
Units:			cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:			1	1	1	1	1
Reference Method:			MOE E3371	MOE E3371	MOE E3407	MOE E3407	MOE E3371
Date Analyzed:			12-Jul-2004	12-Jul-2004	12-Jul-2004	12-Jul-2004	12-Jul-2004
Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-16794-1	12-Jul-04	< 1 ✓	< 1 ✓	--	--	< 1 ✓
Chesterville Well #5 - Treated	B04-16794-2	12-Jul-04	--	--	< 1 ✓	< 1 ✓	--
Co-op Chest	B04-16794-3	12-Jul-04	--	--	< 1 ✓	< 1 ✓	--
LCBO	B04-16794-4	12-Jul-04	--	--	< 1 ✓	< 1 ✓	--
Lannin's Garage	B04-16794-5	12-Jul-04	--	--	< 1 ✓	< 1 ✓	--

*Dave
July 15*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00924

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-16794

Report To:**Ontario Clean Water Agency - Chesterville**
5 Industrial Dr.
Chesterville ON K0C 1H0**Attention:** Dave Markell**Caduceon Environmental Laboratories**2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 12-Jul-04

DATE REPORTED: 14-Jul-04

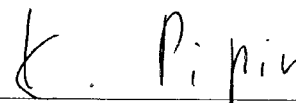
SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: _

WATERWORKS NO. 210000728

Parameter Name:			Heterotrophic Plate Count	Free Chlorine			
Units:			cts/1mL	mg/L			
M.D.L.:			2				
Reference Method:			MOE E3371	n/a			
Date Analyzed:			12-Jul-2004	12-Jul-2004			
Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-16794-1	12-Jul-04	--	--			
Chesterville Well #5 - Treated	B04-16794-2	12-Jul-04	< 2 ✓	1.14			
Co-op Chest	B04-16794-3	12-Jul-04	< 2 ✓	1.13			
LCBO	B04-16794-4	12-Jul-04	--	1.23			
Lannin's Garage	B04-16794-5	12-Jul-04	--	1.11			

Dave
July 15Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00925

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-17450

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 19-Jul-04

DATE REPORTED: 21-Jul-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: -

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	19-Jul-2004	19-Jul-2004	19-Jul-2004	19-Jul-2004	19-Jul-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-17450-1	19-Jul-04	< 1 ✓	< 1 ✓	> 200 ✓	--	--
Chesterville Well #5 - Treated	B04-17450-2	19-Jul-04	--	--	--	< 1 ✓	< 1 ✓
20 South St	B04-17450-3	19-Jul-04	--	--	--	< 1 ✓	< 1 ✓
59 Streeterpete	B04-17450-4	19-Jul-04	--	--	--	< 1 ✓	< 1 ✓
5 Industrial Drive	B04-17450-5	19-Jul-04	--	--	--	< 1 ✓	< 1 ✓

*Dave
Joh 24/04
3 addresses
Resampled July 21*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00925

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-17450

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 19-Jul-04

DATE REPORTED: 21-Jul-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: -

WATERWORKS NO. 210000728

Parameter Name:	Heterotrophic Plate Count	Free Chlorine	Background		
Units:	cts/1mL	mg/L	cts/100mL		
M.D.L.:	2		1		
Reference Method:	MOE E3371	n/a	MOE E3407		
Date Analyzed:	19-Jul-2004	19-Jul-2004	19-Jul-2004		

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-17450-1	19-Jul-04	--	--	--		
Chesterville Well #5 - Treated	B04-17450-2	19-Jul-04	4	1.23	--		
20 South St	B04-17450-3	19-Jul-04	> 500	1.12	> 200		
59 Streeterpete	B04-17450-4	19-Jul-04	--	1.10	> 200		
5 Industrial Drive	B04-17450-5	19-Jul-04	--	1.06	> 200		

Chlorine results provided by client
M.D.L. = Method Detection Limit

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00926

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-17592

Report To:

Ontario Clean Water Agency - Chesterville

5 Industrial Dr.

Chesterville ON K0C 1H0

Attention: Dave Markell**Caduceon Environmental Laboratories**

2378 Holly Lane

Ottawa Ontario K1V 7P1

Tel: (613)526-0123

Fax (613)526-1244

DATE RECEIVED: 20-Jul-04

DATE REPORTED: 22-Jul-04

SAMPLE MATRIX: Drinking Water

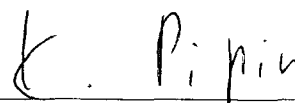
JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: -

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	E coli	Background	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
Date Analyzed:	20-Jul-2004	20-Jul-2004	20-Jul-2004	20-Jul-2004	20-Jul-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Treated Reservoir	B04-17592-1	20-Jul-04	< 1	< 1	< 1	< 2	1.20
5 Industrial Dr. Kitchen Tap	B04-17592-2	20-Jul-04	< 1	< 1	< 1	< 2	1.13
59 Streeterpete Outside Tap	B04-17592-3	20-Jul-04	< 1	< 1	< 1	< 2	1.17
20 South E. Washroom	B04-17592-4	20-Jul-04	< 1	< 1	< 1	< 2	1.16
2 Riverside	B04-17592-5	20-Jul-04	< 1	< 1	< 1	< 2	1.13

*Resample
Results from
adverse*Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00927

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-18088

Report To:**Ontario Clean Water Agency - Chesterville**
5 Industrial Dr.
Chesterville ON K0C 1H0**Attention:** Dave Markell**Caduceon Environmental Laboratories**2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 26-Jul-04

DATE REPORTED: 28-Jul-04

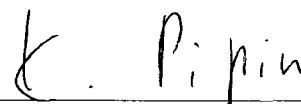
SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: _

WATERWORKS NO. 210000728

Parameter Name:			Total Coliform	E coli	Background	Total Coliform	E coli
Units:			cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:			1	1	1	1	1
Reference Method:			MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:			26-Jul-2004	26-Jul-2004	26-Jul-2004	26-Jul-2004	26-Jul-2004
Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-18088-1	26-Jul-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated	B04-18088-2	26-Jul-04	--	--	--	< 1 ✓	< 1 ✓
Chest. Library	B04-18088-3	26-Jul-04	--	--	--	< 1 ✓	< 1 ✓
M & T Advertising	B04-18088-4	26-Jul-04	--	--	--	< 1 ✓	< 1 ✓
Curran's Garage	B04-18088-5	26-Jul-04	--	--	--	< 1 ✓	< 1 ✓

*Dave
July 28 2004*Krystyna Pipin, M. Sc.
Lab SupervisorChlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00927

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-18088

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 26-Jul-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 28-Jul-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Heterotrophic Plate Count	Free Chlorine			
Units:	cts/1mL	mg/L			
M.D.L.:	2				
Reference Method:	MOE E3371	n/a			
Date Analyzed:	26-Jul-2004	26-Jul-2004			

Client I.D.	Sample I.D.	Date Collected				
Chesterville Well #5 - Raw	B04-18088-1	26-Jul-04	--	--		
Chesterville Well #5 - Treated	B04-18088-2	26-Jul-04	< 2 ✓	1.42		
Chest. Library	B04-18088-3	26-Jul-04	< 2 ✓	1.17		
M & T Advertising	B04-18088-4	26-Jul-04	--	1.13		
Curran's Garage	B04-18088-5	26-Jul-04	--	1.07		

Chlorine results provided by client
M.D.L. = Method Detection Limit

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00928

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-18731

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 05-Aug-04

DATE REPORTED: 05-Aug-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: -

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	03-Aug-2004	03-Aug-2004	03-Aug-2004	03-Aug-2004	03-Aug-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-18731-1	03-Aug-04	< 1 ✓	< 1 ✓	1 ✓	--	--
Chesterville Well #5 - Treated	B04-18731-2	03-Aug-04	--	--	--	< 1 ✓	< 1 ✓
LCBO	B04-18731-3	03-Aug-04	--	--	--	1 ✓	< 1 ✓
Brag St. SPS	B04-18731-4	03-Aug-04	--	--	--	1 ✓	< 1 ✓
MB Foster	B04-18731-5	03-Aug-04	--	--	--	< 1 ✓	< 1 ✓

Aug 6/04
BAH

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00928

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-18731

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 05-Aug-04

DATE REPORTED: 05-Aug-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: CHESTVILLE WTP

P.O. NUMBER: -

WATERWORKS NO. 210000728

Parameter Name:			Heterotrophic Plate Count	Free Chlorine			
Units:			cts/1mL	mg/L			
M.D.L.:			2				
Reference Method:			MOE E3371	n/a			
Date Analyzed:			03-Aug-2004	03-Aug-2004			
Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-18731-1	03-Aug-04	--	--			
Chesterville Well #5 - Treated	B04-18731-2	03-Aug-04	8 ✓	1.04			
LCBO	B04-18731-3	03-Aug-04	264 ✓	1.01			
Brag St. SPS	B04-18731-4	03-Aug-04	--	1.16			
MB Foster	B04-18731-5	03-Aug-04	--	1.07			

Aug 6/04
BT

K. Pipin

Chlorine results provided by client
M.D.L. = Method Detection Limit

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00929

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-18962

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 06-Aug-04

DATE REPORTED: 06-Aug-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO: Chesterville WTP

P.O. NUMBER:

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	E coli	Heterotrophic Plate Count	Free Chlorine	
Units:	cts/100mL	cts/100mL	cts/1mL	mg/L	
M.D.L.:	1	1	2		
Reference Method:	MOE E3407	MOE E3407	MOE E3371	n/a	
Date Analyzed:	04-Aug-2004	04-Aug-2004	04-Aug-2004	04-Aug-2004	

Client I.D.	Sample I.D.	Date Collected					
5 Industrial Drive	B04-18962-1	04-Aug-04	< 1 ✓	< 1 ✓	6 ✓	1.06	
Bray SPS	B04-18962-2	04-Aug-04	< 1 ✓	< 1 ✓	< 2 ✓	1.12	
35 Lorc Lane	B04-18962-3	04-Aug-04	< 1 ✓	< 1 ✓	< 2 ✓	0.90	

Aug 6/04
BA

~~REMOVED~~
RESULTS

K. Pipin

Chlorine results provided by client
M.D.L. = Method Detection Limit

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00930

REPORT No. B04-19323

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

Attention: Dave Markell

DATE RECEIVED: 09-Aug-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 11-Aug-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	09-Aug-2004	09-Aug-2004	09-Aug-2004	09-Aug-2004	09-Aug-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-19323-1	09-Aug-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated	B04-19323-2	09-Aug-04	--	--	--	< 1 ✓	< 1 ✓
217 Queen St. W	B04-19323-3	09-Aug-04	--	--	--	< 1 ✓	< 1 ✓
Water St. SPS	B04-19323-4	09-Aug-04	--	--	--	< 1 ✓	< 1 ✓
Post Office	B04-19323-5	09-Aug-04	--	--	--	< 1 ✓	< 1 ✓

*Dave
AUG. 13/04
Adverse
@ 217 Queen St.
Resampled. AUG. 12/04*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00930

REPORT No. B04-19323

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

Attention: Dave Markell

DATE RECEIVED: 09-Aug-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 11-Aug-04

P.O. NUMBER: —

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Heterotrophic Plate Count	Free Chlorine			
Units:	cts/1mL	mg/L			
M.D.L.:	2				
Reference Method:	MOE E3371	n/a			
Date Analyzed:	09-Aug-2004	09-Aug-2004			

Client I.D.	Sample I.D.	Date Collected				
Chesterville Well #5 - Raw	B04-19323-1	09-Aug-04	--	--		
Chesterville Well #5 - Treated	B04-19323-2	09-Aug-04	98	1.22		
217 Queen St. W	B04-19323-3	09-Aug-04	> 500	1.01		
Water St. SPS	B04-19323-4	09-Aug-04		1.03		
Post Office	B04-19323-5	09-Aug-04	--	1.06		

Chlorine results provided by client
M.D.L. = Method Detection Limit

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00931

REPORT No. B04-19762

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

Attention: Dave Markell

DATE RECEIVED: 12-Aug-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 16-Aug-04

P.O. NUMBER: —

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Heterotrophic Plate Count	Free Chlorine			
Units:	cts/1mL	mg/L			
M.D.L.:	2				
Reference Method:	MOE E3371	n/a			
Date Analyzed:	12-Aug-2004	12-Aug-2004			

Client I.D.	Sample I.D.	Date Collected				
5 Industrial Dr K Tap	B04-19762-1	11-Aug-04	< 2 ✓	1.0		
217 Queen St W OS Tap	B04-19762-2	11-Aug-04	< 2 ✓	1.1		
237 Queen St W OS Tap	B04-19762-3	11-Aug-04	< 2 ✓	1.2		

Aug 19/04

EH

Re-sample
~~good~~ good SAMPLE

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00932

REPORT No. B04-19948

Report To:

Ontario Clean Water Agency - Chesterville

5 Industrial Dr.

Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane

Ottawa Ontario K1V 7P1

Tel: 526-0123

Fax 526-1244

DATE RECEIVED: 16-Aug-04

DATE REPORTED: 18-Aug-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: -

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	16-Aug-2004	16-Aug-2004	16-Aug-2004	16-Aug-2004	16-Aug-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-19948-1	16-Aug-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated	B04-19948-2	16-Aug-04	--	--	--	< 1 ✓	< 1 ✓
BeckersKing St.	B04-19948-3	16-Aug-04	--	--	--	< 1 ✓	< 1 ✓
D & D Performance	B04-19948-4	16-Aug-04	--	--	--	< 1 ✓	< 1 ✓
Lannins- Colege St	B04-19948-5	16-Aug-04	--	--	--	< 1 ✓	< 1 ✓

Aug 19/04
BH

K. Pipin

Krystyna Pipin, M. Sc.

Lab Supervisor

Chlorine results provided by client

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00932

REPORT No. B04-19948

Report To:**Ontario Clean Water Agency - Chesterville**

5 Industrial Dr.

Chesterville ON K0C 1H0

Attention: Dave Markell**Caduceon Environmental Laboratories**

2378 Holly Lane

Ottawa Ontario K1V 7P1

Tel: 526-0123

Fax 526-1244

DATE RECEIVED: 16-Aug-04

DATE REPORTED: 18-Aug-04

SAMPLE MATRIX: Drinking Water

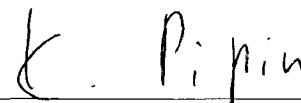
JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: —

WATERWORKS NO. 210000728

Parameter Name:		Heterotrophic Plate Count	Free Chlorine			
Units:		cts/1mL	mg/L			
M.D.L.:		2	0.01			
Reference Method:		MOE E3371	n/a			
Date Analyzed:		16-Aug-2004	16-Aug-2004			
Client I.D.	Sample I.D.	Date Collected				
Chesterville Well #5 - Raw	B04-19948-1	16-Aug-04	--	--		
Chesterville Well #5 - Treated	B04-19948-2	16-Aug-04	< 2 ✓	1.20		
BeckersKing St.	B04-19948-3	16-Aug-04	2 ✓	1.15		
D & D Performance	B04-19948-4	16-Aug-04	--	1.19		
Lannins- Colege St	B04-19948-5	16-Aug-04	--	0.95		

Aug 19/04
BH



Krystyna Pipin, M. Sc.

Lab Supervisor

Chlorine results provided by client

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

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CADUCEON™ CERTIFICATE OF ANALYSIS

ENVIRONMENTAL LABORATORIES

Final Report

C.O.C.: C-00933

REPORT No. B04-20588

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 23-Aug-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 25-Aug-04

P.O. NUMBER: _

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	23-Aug-2004	23-Aug-2004	23-Aug-2004	23-Aug-2004	23-Aug-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-20588-1	23-Aug-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated	B04-20588-2	23-Aug-04	--	--	--	< 1 ✓	< 1 ✓
Community Swimming Pool	B04-20588-3	23-Aug-04	--	--	--	< 1 ✓	< 1 ✓
5 Industrial Drive	B04-20588-4	23-Aug-04	--	--	--	< 1 ✓	< 1 ✓
Mckewen Queen Main St	B04-20588-5	23-Aug-04	--	--	--	< 1 ✓	< 1 ✓

*Dave
PWS. 28/04*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

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C.O.C.: C-00933

REPORT No. B04-20588

Report To:

Ontario Clean Water Agency - Chesterville

5 Industrial Dr.

Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane

Ottawa Ontario K1V 7P1

Tel: 613-526-0123

Fax 613-526-1244

DATE RECEIVED: 23-Aug-04

DATE REPORTED: 25-Aug-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: _

WATERWORKS NO. 210000728

Parameter Name:	Heterotrophic Plate Count	Free Chlorine			
Units:	cts/1mL	mg/L			
M.D.L.:	2	0.01			
Reference Method:	MOE E3371	n/a			
Date Analyzed:	23-Aug-2004	23-Aug-2004			

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-20588-1	23-Aug-04	--	--			
Chesterville Well #5 - Treated	B04-20588-2	23-Aug-04	< 2 ✓	1.16			
Community Swimming Pool	B04-20588-3	23-Aug-04	2 ✓	1.34			
5 Industrial Drive	B04-20588-4	23-Aug-04	--	1.12			
Mckewen Queen Main St	B04-20588-5	23-Aug-04	--	1.17			

Chlorine results provided by client

M.D.L. = Method Detection Limit

K. Pipin

Krystyna Pipin, M. Sc.

Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00977

REPORT No. B04-21235

Report To:

Ontario Clean Water Agency - Chesterville

5 Industrial Dr.

Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane

Ottawa Ontario K1V 7P1

Tel: 613-526-0123

Fax 613-526-1244

DATE RECEIVED: 30-Aug-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 01-Sep-04

P.O. NUMBER: —

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	30-Aug-2004	30-Aug-2004	30-Aug-2004	30-Aug-2004	30-Aug-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-21235-1		< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated	B04-21235-2		--	--	--	< 1 ✓	< 1 ✓
19a Industrial	B04-21235-3		--	--	--	< 1 ✓	< 1 ✓
73 Church	B04-21235-5		--	--	--	< 1 ✓	< 1 ✓
H. Curran Auto	B04-21235-4		--	--	--	< 1 ✓	< 1 ✓

*Dave
Sept 11/04*

K. Pipin

Krystyna Pipin, M. Sc.

Lab Supervisor

Chlorine results provided by client

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

CADUCE NTM CERTIFICATE OF ANALYSIS

ENVIRONMENTAL LABORATORIES

Final Report

C.O.C.: C-00977

REPORT No. B04-21235

Report To:

Ontario Clean Water Agency - Chesterville

5 Industrial Dr.

Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane

Ottawa Ontario K1V 7P1

Tel: 613-526-0123

Fax 613-526-1244

DATE RECEIVED: 30-Aug-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 01-Sep-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Heterotrophic Plate Count	Free Chlorine			
Units:	cts/1mL	mg/L			
M.D.L.:	2	0.01			
Reference Method:	MOE E3371	n/a			
Date Analyzed:	30-Aug-2004	31-Aug-2004			

Client I.D.	Sample I.D.	Date Collected				
Chesterville Well #5 - Raw	B04-21235-1		--	--		
Chesterville Well #5 - Treated	B04-21235-2		< 2 ✓	1.03		
19a Industrial	B04-21235-3		2 ✓	1.13		
73 Church	B04-21235-5		--	1.34		
H. Curran Auto	B04-21235-4		--	1.17		

Chlorine results provided by client

M.D.L. = Method Detection Limit

K. Pipin

Krystyna Pipin, M. Sc.

Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

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C.O.C.: c-00978

REPORT No. B04-21929

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 07-Sep-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 09-Sep-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:			Total Coliform	E coli	Background	Total Coliform	E coli
Units:			cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:			1	1	1	1	1
Reference Method:			MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:			07-Sep-2004	07-Sep-2004	07-Sep-2004	07-Sep-2004	07-Sep-2004
Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-21929-1	07-Sep-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated	B04-21929-2	07-Sep-04	--	--	--	< 1 ✓	< 1 ✓
Dr. D. Performance	B04-21929-3	07-Sep-04	--	--	--	< 1 ✓	< 1 ✓
LCBO	B04-21929-4	07-Sep-04	--	--	--	< 1 ✓	< 1 ✓
M.B.Foster	B04-21929-5	07-Sep-04	--	--	--	< 1 ✓	< 1 ✓

*Sept. 10
Dave*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

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C.O.C.: c-00978

REPORT No. B04-21929

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell**Caduceon Environmental Laboratories**

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 07-Sep-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 09-Sep-04

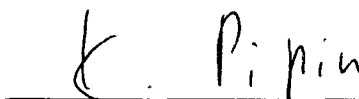
P.O. NUMBER: —

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:			Heterotrophic Plate Count	Free Chlorine			
Units:			cts/1mL	mg/L			
M.D.L.:			2	0.01			
Reference Method:			MOE E3371	n/a			
Date Analyzed:			07-Sep-2004	07-Sep-2004			
Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-21929-1	07-Sep-04	--	--			
Chesterville Well #5 - Treated	B04-21929-2	07-Sep-04	< 2 ✓	1.21			
Dr. D. Performance	B04-21929-3	07-Sep-04	< 2 ✓	1.23			
LCBO	B04-21929-4	07-Sep-04	--	1.11			
M.B.Foster	B04-21929-5	07-Sep-04	--	1.25			

Chlorine results provided by client
M.D.L. = Method Detection Limit


Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

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C.O.C.: C-00979

REPORT No. B04-22538

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 13-Sep-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 15-Sep-04

P.O. NUMBER:

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	13-Sep-2004	13-Sep-2004	13-Sep-2004	13-Sep-2004	13-Sep-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-22538-1	13-Sep-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated	B04-22538-2	13-Sep-04	--	--	--	< 1 ✓	< 1 ✓
Post Office	B04-22538-3	13-Sep-04	--	--	--	< 1 ✓	< 1 ✓
Bray St. SPS	B04-22538-4	13-Sep-04	--	--	--	< 1 ✓	< 1 ✓
125 College St.	B04-22538-5	13-Sep-04	--	--	--	< 1 ✓	< 1 ✓

*Dave
Sept 16/04*

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

CADUCE NTM CERTIFICATE OF ANALYSIS

ENVIRONMENTAL LABORATORIES

Final Report

C.O.C.: C-00979

REPORT No. B04-22538

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

Attention: Dave Markell

DATE RECEIVED: 13-Sep-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 15-Sep-04

P.O. NUMBER:

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:			Heterotrophic Plate Count	Free Chlorine			
Units:			cts/1mL	mg/L			
M.D.L.:			2	0.01			
Reference Method:			MOE E3371	n/a			
Date Analyzed:			13-Sep-2004	13-Sep-2004			
Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-22538-1	13-Sep-04	--	--			
Chesterville Well #5 - Treated	B04-22538-2	13-Sep-04	< 2 ✓	1.21			
Post Office	B04-22538-3	13-Sep-04	6 ✓	1.18			
Bray St. SPS	B04-22538-4	13-Sep-04	--	1.18			
125 College St.	B04-22538-5	13-Sep-04	--	1.04			

Chlorine results provided by client
M.D.L. = Method Detection Limit

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

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C.O.C.: C-00980

REPORT No. B04-23236

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 20-Sep-04

DATE REPORTED: 22-Sep-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: -

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	E coli	Background	Total Coliform	E coli
Units:	cts/100mL	cts/100mL	cts/100mL	cts/100mL	cts/100mL
M.D.L.:	1	1	1	1	1
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3407	MOE E3407
Date Analyzed:	20-Sep-2004	20-Sep-2004	20-Sep-2004	20-Sep-2004	20-Sep-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Raw	B04-23236-1	20-Sep-04	< 1 ✓	< 1 ✓	< 1 ✓	--	--
Chesterville Well #5 - Treated	B04-23236-2	20-Sep-04	--	--	--	< 1 ✓	< 1 ✓
5 Industrial	B04-23236-3	20-Sep-04	--	--	--	< 1 ✓	< 1 ✓
McEwen East South St.	B04-23236-4	20-Sep-04	--	--	--	< 1 ✓	< 1 ✓
Beckers	B04-23236-5	20-Sep-04	--	--	--	< 1 ✓	< 1 ✓

Sept 23/04
BH

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

C.O.C.: C-00980

REPORT No. B04-23236

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 613-526-0123
Fax 613-526-1244

DATE RECEIVED: 20-Sep-04

DATE REPORTED: 22-Sep-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: -

WATERWORKS NO. 210000728

Parameter Name:		Heterotrophic Plate Count				
Units:		cts/1mL				
M.D.L.:		2				
Reference Method:		MOE E3371				
Date Analyzed:		20-Sep-2004				
Client I.D.	Sample I.D.	Date Collected				
Chesterville Well #5 - Raw	B04-23236-1	20-Sep-04	--			
Chesterville Well #5 - Treated	B04-23236-2	20-Sep-04	< 2 ✓	1.13		
5 Industrial	B04-23236-3	20-Sep-04	4 ✓	1.09		
McEwen East South St.	B04-23236-4	20-Sep-04	--	1.00		
Beckers	B04-23236-5	20-Sep-04	--	1.00		

A
from
submission
sheet -
Dave

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Chlorine results provided by client
M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

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SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Works #: 210000728
Project : P.O. No. 008503

OCWA-Chesterville (Chesterville WTP)

Attn : Dave Markell kbaker@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Friday, October 01, 2004

Date Rec. : 28 September 2004
LR Report: CA18315-SEP04

Copy: #1

Phone: 613-448-3098
Fax:pdf

CERTIFICATE OF ANALYSIS

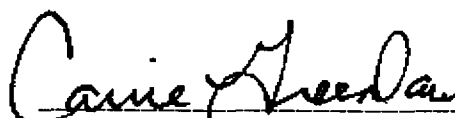
Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	28-Sep-04	28-Sep-04	28-Sep-04
2: *Approved Time		--	--	16:20	16:20	16:20
3: MAC		--	--	0	0	200
4: RW Well #5 Raw CW-01	27-Sep-04 11:02	19.2	---	0 ✓	0 ✓	4 ✓
5: TW Well #5 Treated-Lot 12, Conc. 5, Hwy. 43, Chesterville CW-02	27-Sep-04 12:46	19.2	1.17	0 ✓	0 ✓	0 ✓
6: DW CW-03 109 main St.	27-Sep-04 11:50	19.2	1.09	0 ✓	0 ✓	0 ✓
7: DW CW-04 245 Queen St.	27-Sep-04 11:20	19.2	0.58	0 ✓	0 ✓	--
8: DW CW-05 38 Colege St.	27-Sep-04 11:35	19.2	1.28	0 ✓	0 ✓	--

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Dave
Oct 1/04


Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical



SGS Lakefield Research Limited
P.O. Box 4300 - 185 Concession St.
Lakefield - Ontario - K0L 2H0
Phone: 705-652-2038 FAX: 705-652-6441

Chesterville
Works #: 210000728
Project : P.O. No. 008503

OCWA-Chesterville (Chesterville WTP)

Attn : Dave Markell kbaker@ocwa.com; bhenderson@ocwa.com; dmarkell@ocwa.com

5 Industrial Drive, P.O. Box 460
Chesterville, ON, K0C 1H0

Wednesday, October 06, 2004

Date Rec. : 05 October 2004
LR Report: CA17080-OCT04

Copy: #1

Phone: 613-448-3098
Fax:pdf

CERTIFICATE OF ANALYSIS

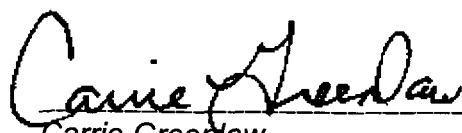
Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	05-Oct-04	05-Oct-04	05-Oct-04
2: *Approved Time		--	--	11:40	11:40	11:40
3: MAC		--	--	0	0	200
4: RW Well #5 Raw CW 01	04-Oct-04 10:15	8.6	--	0✓	0✓	0✓
5: TW Well #5 Treated Lot 12 Conc 5 Hwy 43 Chesterville CW 02	04-Oct-04 10:55	8.6	1.07	0✓	0✓	0✓
6: DW CW 03 M&T Avertizing 19a Ind Dr	04-Oct-04 10:50	8.6	1.18	0✓	0✓	0✓
7: DW CW 04 Mackewan Petrol 20 South S	04-Oct-04 10:35	8.6	1.21	0✓	0✓	0✓
8: DW CW 05 Bray St SPS Lori Lane	04-Oct-04 10:25	8.6	1.21	0✓	0✓	--

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Dave
Oct. 6/04



Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical



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Works #: 210000728

Project : P.O. No. 008503

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Thursday, October 14, 2004

Date Rec. : 13 October 2004

LR Report: CA17464-OCT04

Copy: #1

Phone: 613-448-3098
Fax:pdf

CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	13-Oct-04	13-Oct-04	13-Oct-04
2: *Approved Time		--	--	11:30	11:30	11:30
3: MAC		--	--	0	0	200
4: RW Well #5 Raw CW-01	12-Oct-04 13:15	14.6	--	0 ✓	0 ✓	0 ✓
5: TW Well #5 Treated Lot 12 Conc 5 Hwy 43 Chesterville CW-02	12-Oct-04 13:05	14.6	1.12 ✓	0 ✓	0 ✓	0 ✓
6: DW CW-03 5 Industrial	12-Oct-04 13:50	14.6	1.00 ✓	0 ✓	0 ✓	0 ✓
7: DW CW-04 LCBO	12-Oct-04 13:15	14.6	0.83 ✓	0 ✓	0 ✓	--
8: DW CW-05 D&D Performance	12-Oct-04 13:25	14.6	0.92 ✓	0 ✓	0 ✓	--

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time". as required under the SDWA, 2002.

Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical

Dave
Oct 14/04



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Works #: 210000728
Project : P.O. No. 008503

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Thursday, October 21, 2004

Date Rec. : 19 October 2004
LR Report: CA17828-OCT04

Copy: #1

Phone: 613-448-3098
Fax:pdf

CERTIFICATE OF ANALYSIS

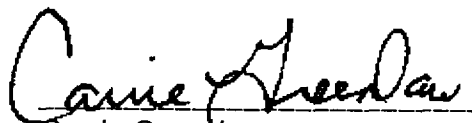
Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	19-Oct-04	19-Oct-04	19-Oct-04
2: *Approved Time		--	--	11:45	11:45	11:45
3: MAC		--	--	0	0	200
4: RW Well #5 Raw CW-01	18-Oct-04 11:50	11.8	--	0 ✓	0 ✓	0 ✓
5: TW Well #5 Treated Lot 12 Conc 5 Hwy 43 Chesterville CW-02	18-Oct-04 11:38	11.8	1.08 ✓	0 ✓	0 ✓	0 ✓
6: DW CW-03 Lanins Auto	18-Oct-04 10:48	11.8	0.97 ✓	0 ✓	0 ✓	0 ✓
7: DW CW-04 Beckers	18-Oct-04 10:55	11.8	1.02 ✓	0 ✓	0 ✓	--
8: DW CW-05 Job Zone	18-Oct-04 11:22	11.8	1.01 ✓	0 ✓	0 ✓	--

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time". as required under the SDWA, 2002.

Pure
Oct. 21/04


Carrie Greenlaw
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Project : P.O. No. 008503

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Wednesday, October 27, 2004

Date Rec. : 26 October 2004
LR Report: CA18151-OCT04

Copy: #1

Phone: 613-448-3098
Fax:pdf

CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		—	—	26-Oct-04	26-Oct-04	26-Oct-04
2: *Approved Time		—	—	11:30	11:30	11:30
3: MAC		—	—	0	0	200
4: RW Well #5 Raw CW-01	25-Oct-04 11:05	15.4	—	0 ✓	0 ✓	0 ✓
5: TW Well #5 Treated-Lot 12, Conc 5, Hwy.43, Chesterville CW-02	25-Oct-04 11:55	15.4	1.15	0 ✓	0 ✓	0 ✓
6: DW CW-03 5 Industrail Dr. Kitchen	25-Oct-04 12:10	15.4	1.02	0 ✓	0 ✓	0 ✓
7: DW CW-04 Water St. SPS	25-Oct-04 11:35	15.4	1.02	0 ✓	0 ✓	—
8: DW CW-05 Community Hall, Victoria St. Men's Washroom	25-Oct-04 11:20	15.4	1.16	0 ✓	0 ✓	—

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time". as required under the SDWA, 2002.

Carrie Greenlaw
Project Coordinator
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Fax:pdf

Works #: 210000728
Project : P.O. No. 008503

Thursday, November 04, 2004

Date Rec. : 02 November 2004
LR Report: CA17049-NOV04

Copy: #1

CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	02-Nov-04	02-Nov-04	02-Nov-04
2: *Approved Time		--	--	11:15	11:15	11:15
3: MAC		--	--	0	0	200
4: RW Well #5 Raw CW-01	01-Nov-04 10:45	13.4	---	0 ✓	0 ✓	0 ✓
5: TW Well #5 Treated- Lot 12, Conc. 5, Hwy. 43, Chesterville CW-02	01-Nov-04 11:50	13.4	1.41 ✓	0 ✓	0 ✓	0 ✓
6: DW CW-03-Post Office	01-Nov-04 11:20	13.4	1.11 ✓	0 ✓	0 ✓	0 ✓
7: DW CW-04-McEwens	01-Nov-04 11:15	13.4	1.07 ✓	0 ✓	0 ✓	---
8: DW CW-05-5 Industrial	01-Nov-04 11:40	13.4	0.89 ✓	0 ✓	0 ✓	---

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.
*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.


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Works #: 210000728
Project : P.O. No. 008503

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Wednesday, November 10, 2004

Date Rec. : 09 November 2004
LR Report: CA17424-NOV04

Copy: #1

Phone: 613-448-3098
Fax:pdf

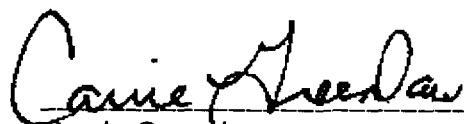
CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	09-Nov-04	09-Nov-04	09-Nov-04
2: *Approved Time		--	--	12:10	12:10	12:10
3: MAC		--	--	0	0	200
4: RW Well #5 Raw CW-01	08-Nov-04 11:30	8.8	--	0 ✓	0 ✓	1 ✓
5: TW Well #5 Treated Lot 12 Conc 5 Hwy 43 Chesterville CW-02	08-Nov-04 12:00	8.8	1.25	0 ✓	0 ✓	0 ✓
6: DW CW-03 Job Zone	08-Nov-04 13:15	8.8	1.24	0 ✓	0 ✓	0 ✓
7: DW CW-04 Lannins	08-Nov-04 13:35	8.8	0.70	0 ✓	0 ✓	--
8: DW CW-05 D&D Performance	08-Nov-04 13:45	8.8	0.97	0 ✓	0 ✓	--

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time". as required under the SDWA, 2002.



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Project Coordinator
Environmental Services, Analytical

Dave
NOV. 10



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Works #: 210000728

Project : P.O. No. 008503

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Thursday, November 18, 2004

Date Rec. : 16 November 2004

LR Report: CA17746-NOV04

Copy: #1

Phone: 613-448-3098

Fax:pdf

CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ok	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	16-Nov-04	16-Nov-04	16-Nov-04
2: *Approved Time		--	--	11:00	11:00	11:00
3: MAC		--	--	0	0	200
4: RW Well #5 Raw CW-01	15-Nov-04 11:20	12.2	---	0 ✓	0 ✓	0 ✓
5: TW Well #5 Treated - Lot 12, Conc. 5, Hwy. 43, Chesterville CW-02	15-Nov-04 10:45	12.2	1.30 ✓	0 ✓	0 ✓	0 ✓
6: DW CW-03 Curan's Main St	15-Nov-04 11:05	12.2	1.06 ✓	0 ✓	0 ✓	0 ✓
7: DW CW-04 Public Schoole	15-Nov-04 11:15	12.2	1.09 ✓	0 ✓	0 ✓	---
8: DW CW-05 LCBO Queen St	15-Nov-04 11:25	12.2	1.03 ✓	0 ✓	0 ✓	---

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time". as required under the SDWA, 2002.

Dave
Nov 18/04

Carrie Greenlaw
Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical



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Project : P.O. No. 008503

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November 25, 2004

Date Rec. : 23 November 2004
LR Report: CA18092-NOV04

Copy: #1

Phone: 613-448-3098
Fax:pdf

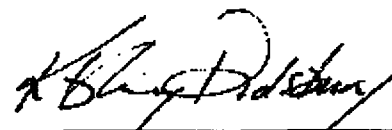
CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	23-Nov-04	23-Nov-04	23-Nov-04
2: *Approved Time		--	--	11:40	11:40	11:40
3: MAC		--	--	0	0	200
4: RW Well No. 5 Raw CW-01	22-Nov-04 13:05	12.6	---	0 ✓	0 ✓	0 ✓
5: TW Well #5 Treated - Log 12, Conc. 5 Hwy. 43, Chesterville CW-02	22-Nov-04 11:50	12.6	0.91 ✓	0 ✓	0 ✓	0 ✓
6: DW CW-03 Bray St SPS	22-Nov-04 13:32	12.6	0.80 ✓	0 ✓	0 ✓	0 ✓
7: DW CW-04 SPS	22-Nov-04 13:42	12.6	1.02 ✓	0 ✓	0 ✓	---
8: DW CW-05 Beckers	22-Nov-04 13:55	12.6	1.09 ✓	0 ✓	0 ✓	---

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.
*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Dave
Nov 25/04



Kimberley Didsbury
Project Coordinator
Environmental Services, Analytical



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Works #: 210000728
Project : P.O. No. 008503

Wednesday, December 01, 2004

Date Rec. : 30 November 2004
LR Report: CA18456-NOV04

Copy: #1

CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	30-Nov-04	30-Nov-04	30-Nov-04
2: *Approved Time		--	--	13:10	13:10	13:10
3: MAC		--	--	0	0	200
4: RW Well #5 Raw CW-01	29-Nov-04 13:20	11.2	---	0 ✓	0 ✓	0 ✓
5: TW Well #5 Treated- Lot 12, Conc. 5, Hwy. 43, Chesterville CW-02	29-Nov-04 09:47	11.2	1.33 ✓	0 ✓	0 ✓	0 ✓
6: DW CW-03- St. Marys School	29-Nov-04 11:15	11.2	0.80 ✓	0 ✓	0 ✓	0 ✓
7: DW CW-04- Library	29-Nov-04 11:25	11.2	1.28 ✓	0 ✓	0 ✓	---
8: DW CW-05-5- McEwen Gas Bar	29-Nov-04 11:30	11.2	1.25 ✓	0 ✓	0 ✓	---

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.
*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Dave
Dec 2/04


Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical



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Fax: pdf

Works #: 210000728
Project : P.O. No. 008503

Wednesday, December 08, 2004

Date Rec. : 07 December 2004
LR Report: CA17128-DEC04

Copy: #1

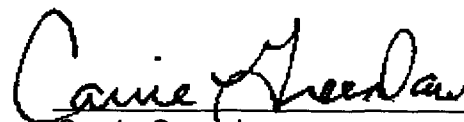
CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	07-Dec-04	07-Dec-04	07-Dec-04
2: *Approved Time		--	--	10:45	10:45	10:45
3: MAC		--	--	0	0	200
4: RW Well #5 Raw CW-01	06-Dec-04 11:08	9.6	---	0✓	0✓	0✓
5: TW Well #5 Treated- Lot 12, Conc. 5, Hwy. 43, Chesterville CW-02	06-Dec-04 11:28	9.6	1.35	0✓	0✓	0✓
6: DW CW-03-5 Industrial	06-Dec-04 11:44	9.6	1.29	0✓	0✓	0✓
7: DW CW-04-McEwens South St.	06-Dec-04 11:51	9.6	1.33	0✓	0✓	---
8: DW CW-05-Post Office	06-Dec-04 12:02	9.6	1.49	0✓	0✓	---

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.
*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Dave
Dec 8/04


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Fax:pdf

Works #: 210000728
Project : P.O. No. 008503

Thursday, December 16, 2004

Date Rec. :
LR Report: CA DEC04

Copy: #1

CERTIFICATE OF ANALYSIS

Final Report

from sub sheet

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		--	--	14-Dec-04	14-Dec-04	14-Dec-04
2: *Approved Time		--	--	11:15	11:15	11:15
3: MAC		--	--	0	0	200
4: RW Well #5 Raw CW-01	13-Dec-04 09:00	6.4	1.8	✓	✓	✓
5: TW Well #5 Treated- Lot 12, Conc. 5, Hwy. 43, Chesterville CW-02	13-Dec-04 10:30	6.4	1.3	✓	✓	✓
6: DW CW-03 St. Mary's	13-Dec-04 10:00	6.4	0.97	✓	✓	✓
7: DW CW-04 Public School	13-Dec-04 09:45	6.4	1.1	✓	✓	---
8: DW CW-05 D&D Performance	13-Dec-04 10:15	6.4	1.15	✓	✓	---

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.
*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Dave
Dec 17

Carrie Greenlaw
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Environmental Services, Analytical



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Chesterville WTP
Works #: 210000728
Project : P.O. No. 008503

Wednesday, December 22, 2004

Date Rec. : ~~2004~~
LR Report: CA 1171-DEC04

Copy: #1

CERTIFICATE OF ANALYSIS

Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date	--	--	--	21-Dec-04	21-Dec-04	21-Dec-04
2: *Approved Time	--	--	--	11:20	11:20	11:20
3: MAC	--	--	--	0	0	200
4: RW Well #5 Raw CW-01	20-Dec-04 11:15	4.8	--	0 ✓	0 ✓	0 ✓
5: TW Well #5 Treated- Lot 12, Conc. 5, Hwy. 43, Chesterville CW-02	20-Dec-04 11:55	4.8	1.33 ✓	0 ✓	0 ✓	0 ✓
6: DW CW-03- Job Zone	20-Dec-04 12:54	4.8	1.33 ✓	0 ✓	0 ✓	0 ✓
7: DW CW-04- McEwens Gas Bar	20-Dec-04 13:00	4.8	1.33 ✓	0 ✓	0 ✓	0 ✓
8: DW CW-05- SPS	20-Dec-04 13:15	4.8	1.33 ✓	0 ✓	0 ✓	--

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.
*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time", as required under the SDWA, 2002.

Dave
Dec 24


Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical



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Works #: 210000728
Project : P.O. No. 008503

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Friday, December 31, 2004

Date Rec. : 30 December 2004
LR Report: CA18139-DEC04

Copy: #1

Phone: 613-448-3098
Fax: pdf

CERTIFICATE OF ANALYSIS

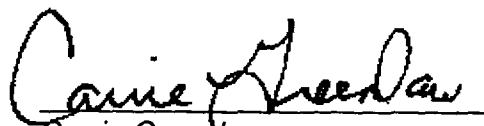
Final Report

Sample ID	Sample Date & Time	Temperature Upon Receipt °C	ResCl Free	Total Coliform cfu/100mL	E.Coli cfu/100mL	Background CFU/100mL
1: *Approved Date		—	—	30-Dec-04	30-Dec-04	30-Dec-04
2: *Approved Time		—	—	11:45	11:45	11:45
3: MAC		—	—	0	0	200
4: RW Well #5 Raw CW-01	29-Dec-04 11:50	9.0	—	0 ✓	0 ✓	0 ✓
5: TW Well #5 Treated- Lot 12, Conc. 5, Hwy. 43, Chesterville CW-02	29-Dec-04 13:15	9.0	1.57 ✓	0 ✓	0 ✓	0 ✓
6: DW CW-04 Bray St SPS	29-Dec-04 13:31	9.0	1.42 ✓	0 ✓	0 ✓	0 ✓
7: DW CW-03 Cotnam True Value	29-Dec-04 13:22	9.0	1.50 ✓	0 ✓	0 ✓	—
8: DW CW-05-Beckers	29-Dec-04 13:40	9.0	1.52 ✓	0 ✓	0 ✓	—

Total and / or Free Residual Chlorine was not analyzed by the analytical laboratory at SGS Lakefield Research.

*Note: For all Microbiological analysis, the "Approved Date" and "Approved Time" reflect the laboratory "Analysis Date" and "Analysis Time". as required under the SDWA, 2002.

*Dave
Dec 31/04*


Carrie Greenlaw
Project Coordinator
Environmental Services, Analytical



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To MoE MoH
Fax Number (800) 268-6061 (800) 267-7120
From Dave Markell
Date May 12/04
Number of Pages 2 (including this page)
Subject: Adverse Water

AWQI# 25922

Chesterville 210000728

Done

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) – WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro ☒ Exceeds Standard	Phys/Chem ☐ Exceeds Standard	Radiological ☐ Exceeds Standard
				CofA/Order ☐ Exceeds Limit
☐ Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)			Details: >500 HPC	
Oral Notification to SPILLS ACTION CENTRE				
Date May 12/04	Time 9:49	AWQI Notification No (s) 25922		
Person Contacted MARY		DWS EMERGENCY CONTACT		
DWS Name Chesterville Waterworks		Name Dave Markell		
DWS (Waterworks) # 210000728		Position Process		
DWS Person Providing Oral Notification Dave Markell		Phone # (613) 448-3098	Fax # (613) 448-1616	
Oral Notification to MEDICAL OFFICER OF HEALTH		CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date May 12/04	Time 9:37	Resample/Re-test		☒ Yes ☐ No
Person Contacted Adalia		Disinfectant Restored/ Increased		☐ Yes ☒ No
		Flushing Mains/Pipes		☐ Yes ☒ No
Position Special Projects		Users Advised to Boil/Seek Alternate		☐ Yes ☒ No
Phone # (800) 267-7120	Fax # (613) 933-7980	OTHER - Describe:		
DWS Person Providing Oral Notification Dave Markell		Other information attached ☐		
Initial DWS Notification Prepared by: Dave Markell				
Signature Dave Markell		Date May 12/04		

SECTION 2 (b) – NOTICE OF ISSUE RESOLUTION – Sect. 16-9 O Reg. 170/03

Date Resolved:	Date Resolution Notice Provided:	
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)		
Prepared By:	Signature:	Date:
For Ministry Use Only:		Report No.

HP OfficeJet K Series K80
Personal Printer/Fax/Copier/Scanner

Log for
OCWA
613 448-1616
May 12 2004 12:34pm

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
May 12	12:31pm	Fax Sent	1 613 933-7930	0:30	2	OK
May 12	12:32pm	Fax Sent	1 800 268-6061	0:31	2	OK
May 12	12:33pm	Fax Sent	1 416 314-5455	0:53	2	OK

HP OfficeJet K Series K80
Personal Printer/Fax/Copier/Scanner

Log for
OCWA
613 448-1616
May 12 2004 3:01pm

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
May 12	2:58pm	Fax Sent	1 613 933-7930	0:30	2	OK
May 12	2:59pm	Fax Sent	1 800 268-6061	0:30	2	OK
May 12	3:00pm	Fax Sent	1 416 314-5455	0:51	2	OK



Ministry of the Environment
Ministère de l'Environnement

Drinking-Water Systems Regulation O. Reg. 170/03

NOTICE OF ADVERSE TEST RESULTS AND OTHER PROBLEMS and NOTICE OF ISSUE RESOLUTION at DRINKING-WATER SYSTEMS

SECTION 1 - WRITTEN NOTICE BY LABORATORY

Indicators of Adverse Water Quality		Micro ☒ Exceeds Standard	Phys/Chem ☐ Exceeds Standard	Radiological ☐ Exceeds Standard	CofA/Order ☐ Exceeds Limit
Oral Notification to SPILLS ACTION CENTRE					
Person Contacted: EMILY STEYARD		Date: May 12, 2004		Time: 9:15	
Person Notifying: Dragana Dzeletovic		AWQI Notification No (s) 25922			
Laboratory Name: Caduceon Environmental Laboratory		Laboratory Emergency Contact Name Krystyna Pipin			
Address 2378 Holly Lane, Ottawa, ON		Position Lab Supervisor			
Telephone # of Lab (613) 526-0123		Phone # (613) 526-0123		Fax # (613) 526-1244	
Drinking-Water System (DWS) Name CHESTERVILLE		DWS Emergency Contact Mr. DAVE MARKELL OCWA			
DWS (Waterworks) # 210000728		Name DAVE MARKELL			
Location CHESTERVILLE WELL #5 TREATED		Position			
Telephone # of DWS (613) 448-3098		Phone # (613) 448-3098		Fax # (613) 448-1616	
Oral Notification to Drinking-Water System Owner			Oral Notification to Local Medical Officer of Health		
Person Contacted DAVE MARKELL		Person Contacted IDALIA			
Position		Position			
Date May 12, 2004		Time 9:02		Date May 12, 2004	
Time 9:02		Time 9:06		Time 9:06	
Laboratory Written Notification Prepared by: Dragana Dzeletovic (Lab Results must be attached using Section 3 of this form)					
Signature M. Dzeletovic		Date May 12, 2004			



Ministry of the Environment
Ministère de l'Environnement

Drinking-Water Systems Regulation O. Reg 170/03 Adverse Analytical Results For Indicators Listed in Drinking-Water Systems Regulation

SECTION 3:

Microbiological Testing

AWQI Notification Record No.	Laboratory Submission ID	Laboratory Sample ID	Date/Time Sample Collected (yyyy/mm/dd)	Sample Type & Sample Location	Membrane Filtration Count / 100 mL			P-A / 100mL Confirmed	HPC / mL	Date - Date Approved (yyyy/mm/dd)
				U: Untreated T: Treated D: Distribution	Total Coliforms	Total Coliform Background	E. Coli	EC	FC	
35922		B04-10605 #22	2004/05/10	CHESTERVILLE WELLS	U D					2004/05/12

For Parameters Listed in Drinking-Water Systems Regulation or cited in MOE CoFA or Order

Physical/Chemical/Radiological Testing

AWQI Notification Record No.	Laboratory Submission ID	Laboratory Sample ID	Date/Time Sample Collected (yyyy/mm/dd)	Sample Type & Sample Location	Parameter	Result(s)	Unit of Measure	Standard	Date - Date Approved (yyyy/mm/dd)
				U: Untreated T: Treated D: Distribution					

Authorization

Signature	Name	Date	YYY	MM	DD
X <i>Dragana Dzeletovic</i>	Dragana Dzeletovic		2004	05	12

* Only for Drinking Water Systems that are not currently required under O. Reg. 170/03 to treat their drinking-water.

** Refers to treatment point or entry point samples.

*** If you are reporting Trihalomethanes, please include the quarterly sample result followed by the calculated running annual average value.

Notice of Adverse Test Results and Other Problems
Notice of Issue Resolution at Drinking Water Systems



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To MoE MoH
Fax Number (800) 268-6061 (800) 267-7120
From Dave Markell

Date May 17/04

Number of Pages 3 (including this page)

Subject: Adverse Water

AWQI# 25922 Issue Resolution

Chesterville 210000728

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro ☒ Exceeds Standard	Phys/Chem ☐ Exceeds Standard	Radiological ☐ Exceeds Standard	CofA/Order ☐ Exceeds Limit
☐ Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)			Details: >500 HPC		
Oral Notification to SPILLS ACTION CENTRE					
Date	May 12/04	Time	9:49	AWQI Notification No (s) 25922	
Person Contacted			DWS EMERGENCY CONTACT		
MARY			Name Dave Markell		
DWS Name Chesterville Waterworks			Position Process		
DWS (Waterworks) # 210000728			Phone # (613) 448-3098		
DWS Person Providing Oral Notification Dave Markell			Fax # (613) 448-1616		
Oral Notification to MEDICAL OFFICER OF HEALTH			CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date	May 12/04	Time	9:37	Resample/Re-test ☒ Yes ☐ No	
Person Contacted Adalia			Disinfectant Restored/ Increased		☐ Yes ☒ No
			Flushing Mains/Pipes		☐ Yes ☒ No
Position Special Projects			Users Advised to Boil/Seek Alternate		☐ Yes ☒ No
Phone # (800) 267-7120		Fax # (613) 933-7980		OTHER - Describe:	
DWS Person Providing Oral Notification Dave Markell			Other information attached ☐		
Initial DWS Notification Prepared by: Dave Markell					
Signature Dave Markell			Date May 12/04		

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved:	May 14/04	Date Resolution Notice Provided:	May 17/04
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)			
- Collected Resamples. - Results attached.			
Prepared By:	Dave Markell	Signature:	Dave Markell
		Date:	May 17/04
For Ministry Use Only:		Report No.	

C.O.C.: C-00743

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-10977

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

DATE SUBMITTED: 12-May-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 14-May-04

P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	12-May-2004	12-May-2004	12-May-2004	12-May-2004	12-May-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Inlet	B04-10977-1	12-May-04	< 1	< 1	< 1	--	0.75
Chesterville Well #5 - Treated	B04-10977-2	12-May-04	< 1	--	< 1	< 2	1.45
5 Industrial	B04-10977-3	12-May-04	< 1	--	< 1	< 2	1.24

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

HP OfficeJet K Series K80
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Log for
OCWA
613 448-1616
May 17 2004 8:42am

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
May 17	8:39am	Fax Sent	1 613 933-7930	0:41	3	OK
May 17	8:40am	Fax Sent	1 800 268-6061	0:44	3	OK
May 17	8:41am	Fax Sent	1 416 314-5455	1:13	3	OK



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To	<u>MoE</u>	<u>MoH</u>
Fax Number	<u>(800) 268-6061</u>	<u>(800) 267-7120</u>
From	<u>Dave Markell</u>	

Date _____

Number of Pages 2 (including this page)
Subject: Adverse Water

AWOI# 26556 Chesterville 21000072B

Don

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro ☒ Exceeds Standard	Phys/Chem ☐ Exceeds Standard	Radiological ☐ Exceeds Standard	CofA/Order ☐ Exceeds Limit
☐ Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)		Details: TC 1			
Oral Notification to SPILLS ACTION CENTRE					
Date	May 26/04	Time	15:07	AWQI Notification No (s) 26556	
Person Contacted Caryen			DWS EMERGENCY CONTACT		
DWS Name Chisterville			Name Dave Markell		
DWS (Waterworks) # 210000728			Position Process Tech.		
DWS Person Providing Oral Notification Dave Markell			Phone # (613) 448-3090	Fax # (613) 448-1616	
Oral Notification to MEDICAL OFFICER OF HEALTH			CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date	May 26/04	Time	15:05	Resample/Re-test ☒ Yes ☐ No	
Person Contacted Adalia			Disinfectant Restored/ Increased		☐ Yes ☒ No
			Flushing Mains/Pipes		☐ Yes ☒ No
Position Special Projects			Users Advised to Boil/Seek Alternate		☐ Yes ☒ No
Phone # (800) 267-7120		Fax # (613) 933-7530		OTHER - Describe:	
DWS Person Providing Oral Notification Dave Markell			Other information attached ☐		
Initial DWS Notification Prepared by: Dave Markell					
Signature Dave Markell			Date May 26/04		

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved:	Date Resolution Notice Provided:	
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)		
Prepared By:		
Signature:		Date:
For Ministry Use Only:		Report No.


 Ministry of the Environment
 Ministère de l'Environnement

Drinking-Water Systems Regulation O. Reg 170/03

Adverse Analytical Results

For Indicators Listed in Drinking-Water Systems Regulation

SECTION 3:

Microbiological Testing

AWQI Notification Record No.	Laboratory Submission ID	Laboratory Sample ID	Date/Time - Sample Collected (yyyy/mm/dd)	Sample Type & Sample Location		Membrane Filtration Count / 100 mL				P-A / 100mL Confirmed	HPC / 1mL	Date - Data Approved (yyyy/mm/dd)
				U Untreated*	T Treated**	Total Coliforms	Total Coliform Background	E. Coli Fecal C.	EC FC			
				D Distribution								
26556		B042070	2004/05/25 at 8:19 am.	CHESTERVILLE MCKEVEN	☒ U ☒ T ☒ D	1		☐ EC ☐ FC	☐ TC ☐ EC ☐ FC		2004/05/26	
					☐ U ☐ T ☐ D			☐ EC ☐ FC	☐ TC ☐ EC ☐ FC			
					☐ U ☐ T ☐ D			☐ EC ☐ FC	☐ TC ☐ EC ☐ FC			

For Parameters Listed in Drinking-Water Systems Regulation or cited in MOE CofA or Order

Physical/Chemical/Radiological Testing

AWQI Notification Record No.	Laboratory Submission ID	Laboratory Sample ID	Date/Time - Sample Collected (yyyy/mm/dd)	Sample Type & Sample Location		Parameter	Result(s)***	Unit of Measure	Standard	Date - Data Approved (yyyy/mm/dd)
				U Untreated*	T Treated**					
				D Distribution						
					☐ U ☐ T ☐ D					
					☐ U ☐ T ☐ D					
					☐ U ☐ T ☐ D					

Authorization

Signature X <i>Dragana Dzelotovic</i>	Name Dragana Dzelotovic	Date May	YYYY 2004	MM 05	DD 26
--	----------------------------	-------------	--------------	----------	----------

* Only for Drinking-Water Systems that are not currently required under O.Reg.170/03 to treat their drinking-water.

** Refers to treatment point or entry point samples.

*** If you are reporting Trihalomethanes, please include the quarterly sample result followed by the calculated running annual average value.

Notice of Adverse Test Results and Other Problems

Notice of Issue Resolution at Drinking Water Systems

Drinking-Water Systems Regulation O. Reg. 170/03

NOTICE OF ADVERSE TEST RESULTS AND OTHER PROBLEMS
and
NOTICE OF ISSUE RESOLUTION at DRINKING-WATER SYSTEMS

SECTION 1 - WRITTEN NOTICE BY LABORATORY

Indicators of Adverse		Micro ☒ Exceeds Standard		Phys/Chem ☐ Exceeds Standard		Radiological ☐ Exceeds Standard	
Water Quality						CofA/Order ☐ Exceeds Limit	
Oral Notification to SPILLS ACTION CENTRE							
Person Contacted: BRANDON WILLIAMS		Date: May 26, 2004		Time: 3:04 pm			
Person Notifying: Dragana Dzeletovic		AWQI Notification No(s) 26556					
Laboratory Name: Caduceon Environmental Laboratory		Laboratory Emergency Contact Name Krystyna Pipin					
Address 2378 Holly Lane, Ottawa, ON		Position Lab Supervisor					
Telephone # of Lab (613) 526-0123		Phone # (613) 526-0123		Fax # (613) 526-1244			
Drinking-Water System (DWS) Name CHESTERVILLE MCKEWEN WEP		DWS Emergency Contact OCWA					
DWS (Waterworks) # 210000728		Name DAVE MARKELL					
Location MCKEWEN		Position					
Telephone # of DWS (613) 448 3098		Phone # (613) 448 3098		Fax # (613) 448 1616			
Oral Notification to Drinking-Water System Owner				Oral Notification to Local Medical Officer of Health			
Person Contacted DAVE MARKELL		Person Contacted IRENE MARCHORD					
Position		Position					
Date May 26, 2004		Time 2:50 p.m.		Date May 26, 2004		Time 3:00 pm	
Laboratory Written Notification Prepared by: Dragana Dzeletovic (Lab Results must be attached using Section 3 of this form)							
Signature Dragana Dzeletovic		Date May 26, 2004					

HP OfficeJet K Series K80
Personal Printer/Fax/Copier/Scanner

Log for
OCWA
613 448-1616
May 26 2004 3:13pm

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
May 26	3:10pm	Fax Sent	1 613 933-7930	0:29	2	OK
May 26	3:11pm	Fax Sent	1 800 268-6061	0:30	2	OK
May 26	3:12pm	Fax Sent	1 416 314-5455	0:50	2	OK



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To MoE MoH
Fax Number (800) 268-6061 (800) 267-7120
From Dave Markell

Date June 1/04

Number of Pages 3 (including this page)

Subject: Adverse Water

AWOI# 26556 Chesterville 210000728
Issue Resolution.

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro ☒ Exceeds Standard	Phys/Chem ☐ Exceeds Standard	Radiological ☐ Exceeds Standard
				CofA/Order ☐ Exceeds Limit
☐ Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)			Details: TC 1	
Oral Notification to SPILLS ACTION CENTRE				
Date	May 26/04	Time	15:07	AWQI Notification No (s)
Person Contacted		DWS EMERGENCY CONTACT		
DWS Name		Name		
Chesterville		Dave Markell		
DWS (Waterworks) #		Position		
210000728		Process Tech.		
DWS Person Providing Oral Notification		Phone # (613) 448-3090	Fax # (613) 448-1616	
Dave Markell				
Oral Notification to MEDICAL OFFICER OF HEALTH		CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date	May 26/04	Time	15:05	Resample/Re-test
Person Contacted		Disinfectant Restored/ Increased		☒ Yes ☐ No
Adalia		Flushing Mains/Pipes		☐ Yes ☒ No
Position		Users Advised to Boil/Seek Alternate		☐ Yes ☒ No
Special Projects		OTHER - Describe:		
Phone # (800) 267-7120	Fax # (613) 933-7930	Other information attached ☐		
DWS Person Providing Oral Notification		Initial DWS Notification Prepared by:		
Dave Markell		Dave Markell		
Signature		Date		
Dave Markell		May 26/04		

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved:	May 31/04	Date Resolution Notice Provided:	June 1/04
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)			
- resamples collected, affected site, significantly up & down stream. - all results clear - results attached.			
Prepared By:	Signature:	Date:	
Dave Markell	Dave Markell	June 1/04	
For Ministry Use Only:		Report No.	

C.O.C.: ---

CERTIFICATE OF ANALYSIS
Final Report

REPORT No. B04-12464

Report To:Ontario Clean Water Agency - Chesterville
5 Industrial Dr.

Chesterville ON K0C 1H0

Attention: Dave Markell**Caduceon Environmental Laboratories**

2378 Holly Lane

Ottawa Ontario K1V 7P1

Tel: (613)526-0123

Fax (613)526-1244

DATE SUBMITTED: 27-May-04

DATE REPORTED: 31-May-04

SAMPLE MATRIX: Drinking Water

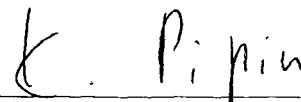
JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: -

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	Background	E coli	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1		1	2	
Reference Method:	MOE E3371	MOE E3371	MOE E3371	MOE E3371	n/a
Date Analyzed:	27-May-2004	27-May-2004	27-May-2004	27-May-2004	27-May-2004

Client I.D.	Sample I.D.	Date Collected					
5 Industrial Dr. Kitchen Tap	B04-12464-1	27-May-04	< 1	--	< 1	2	1.02
King St. Becker's Cash tap	B04-12464-2	27-May-04	< 1	--	< 1	--	1.13
MacEwen Gas Queen St - Wash Tap	B04-12464-3	27-May-04	< 1	--	< 1	--	1.12

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

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Log for
OCWA
613 448-1616
Jun 01 2004 9:20am

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Jun 1	9:15am	Fax Sent	1 613 933-7930	1:43	3	OK
Jun 1	9:17am	Fax Sent	1 800 268-6061	1:37	3	OK
Jun 1	9:19am	Fax Sent	1 416 314-5455	1:21	3	OK



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To MoE MoH
Fax Number (800) 268-6061 (800) 267-7120
From Dave Markell

Date July 20/04

Number of Pages 2 (including this page)
Subject: Adverse Water

AWOI# BW002 Background >200
Chesterville 59 streeten Pete

AWQI # 29667

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) – WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro ☒ Exceeds Standard	Phys/Chem ☐ Exceeds Standard	Radiological ☐ Exceeds Standard	CofA/Order ☐ Exceeds Limit
☐ Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)			Details: Background > 200 Background Overgrown		
Oral Notification to SPILLS ACTION CENTRE					
Date	July 20/04	Time	10:38	AWQI Notification No (s) 32000 29667	
Person Contacted			DWS EMERGENCY CONTACT		
DWS Name			Name		
Chosterville 59 Streeter Rete			Dave Markell		
DWS (Waterworks) #			Position		
210000728			Process Tech		
DWS Person Providing Oral Notification			Phone #		Fax #
Dave Markell			(613) 448-3098		(613) 448-1616
Oral Notification to MEDICAL OFFICER OF HEALTH			CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date	July 20/04	Time	10:09	Resample/Re-test ☒ Yes ☐ No	
Person Contacted			Disinfectant Restored/ Increased		☐ Yes ☒ No
Marion			Flushing Mains/Pipes		☐ Yes ☒ No
Position			Users Advised to Boil/Seek Alternate		☐ Yes ☒ No
Secretary			OTHER - Describe:		
Phone # (800) 267-7720			Fax # (613) 933-7930		
DWS Person Providing Oral Notification			Other information attached ☐		
Dave Markell					
Initial DWS Notification Prepared by: Dave Markell					
Signature			Date		
Dave Markell			July 20/04		

SECTION 2 (b) – NOTICE OF ISSUE RESOLUTION – Sect. 16-9 O Reg. 170/03

Date Resolved:	Date Resolution Notice Provided:	
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)		
Prepared By:	Signature:	Date:
For Ministry Use Only:		Report No.

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Log for
OCWA
613 448-1616
Jul 20 2004 1:49pm

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Jul 20	1:45pm	Fax Sent	1 800 268-6061	0:32	2	OK
Jul 20	1:46pm	Fax Sent	1 416 314-5455	0:54	2	OK
Jul 20	1:48pm	Fax Sent	1 613 933-7930	0:31	2	OK



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To MoE MoH
Fax Number (800) 268-6061 (800) 267-7120
From Dave Markell

Date July 26/04

Number of Pages 3 (including this page)

Subject: Adverse Water

AWOI# BW002 Background 7200
Chesterville 59 Streeten Pete

AWQI # 29667

Issue Resolution

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro ☒ Exceeds Standard	Phys/Chem ☐ Exceeds Standard	Radiological ☐ Exceeds Standard	CofA/Order ☐ Exceeds Limit
☐ Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)		Details: Background > 200 Background Overgrown.			
Oral Notification to SPILLS ACTION CENTRE					
Date	July 20/04	Time	10:38	AWQI Notification No (s) But 000 29667	
Person Contacted			DWS EMERGENCY CONTACT		
DWS Name			Name		
Chosterville 59 Strater Rete			Dave Markell		
DWS (Waterworks) #			Position		
210000728			Process Tech		
DWS Person Providing Oral Notification			Phone #		Fax #
Dave Markell			(613) 448-3098		(613) 449-1616
Oral Notification to MEDICAL OFFICER OF HEALTH			CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date	July 20/04	Time	10:09	Resample/Re-test ☒ Yes ☐ No	
Person Contacted			Disinfectant Restored/ Increased		☐ Yes ☒ No
Maron			Flushing Mains/Pipes		☐ Yes ☒ No
Position			Users Advised to Boil/Seek Alternate		☐ Yes ☒ No
Secretary			OTHER - Describe:		
Phone #		Fax #		Other information attached ☐	
(800) 267-7720		(613) 533-7930			
DWS Person Providing Oral Notification			Initial DWS Notification Prepared by:		
Dave Markell			Dave Markell		
Signature			Date		
Dave Markell			July 20/04		

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved:	July 26/04	Date Resolution Notice Provided:	July 26/04
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)			
- Resamples collected. - Results Attached.			
Prepared By:	Signature:	Date:	
Dave Markell	Dave Markell	July 26/04	
For Ministry Use Only:		Report No.	

C.O.C.: C-00926

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-17592

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0
Attention: Dave Markell

Caduceon Environmental Laboratories
2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 20-Jul-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 22-Jul-04

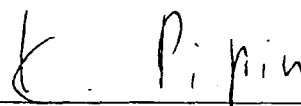
P.O. NUMBER: -

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	E coli	Background	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
Date Analyzed:	20-Jul-2004	20-Jul-2004	20-Jul-2004	20-Jul-2004	20-Jul-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Treated Reservoir	B04-17592-1	20-Jul-04	< 1	< 1	< 1	< 2	1.20
5 Industrial Dr. Kitchen Tap	B04-17592-2	20-Jul-04	< 1	< 1	< 1	< 2	1.13
59 Streeterpete Outside Tap	B04-17592-3	20-Jul-04	< 1	< 1	< 1	< 2	1.17
20 South E. Washroom	B04-17592-4	20-Jul-04	< 1	< 1	< 1	< 2	1.16
2 Riverside	B04-17592-5	20-Jul-04	< 1	< 1	< 1	< 2	1.13



Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

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Log for
OCWA
613 448-1616
Jul 26 2004 11:52am

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Jul 26	11:48am	Fax Sent	1 613 933-7930	0:44	3	OK
Jul 26	11:49am	Fax Sent	1 800 268-6061	0:46	3	OK
Jul 26	11:50am	Fax Sent	1 416 314-5455	1:18	3	OK



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To	<u>MoE</u>	<u>MoH</u>
Fax Number	<u>(800) 268-6061</u>	<u>(800) 267-7120</u>
From	<u>Dave Markell</u>	

Date July 20/04

Number of Pages 2 (including this page)
Subject: Adverse Water

AWOI# ~~BW1003~~ Background > 200
Chesterville 5 Industrial dr.

Aw QI 29668

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro ☒ Exceeds Standard	Phys/Chem ☐ Exceeds Standard	Radiological ☐ Exceeds Standard	CofA/Order ☐ Exceeds Limit
☐ Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)		Details: Background >200 Background Overgrown			
Oral Notification to SPILLS ACTION CENTRE					
Date	July 20/04	Time	10:38	AWQI Notification No (s)	BW003 29668
Person Contacted		DWS EMERGENCY CONTACT			
Brandon					
DWS Name	Chasterville 5 Industrial	Name	Dave Markell		
DWS (Waterworks) #	210000728	Position	Process Tech		
DWS Person Providing Oral Notification	Dave Markell	Phone #	(613) 448-3098	Fax #	(613) 449-1616
Oral Notification to MEDICAL OFFICER OF HEALTH		CORRECTIVE ACTION(S) TAKEN BY OWNER:			
Date	July 20/04	Time	10:09	Resample/Re-test	☒ Yes ☐ No
Person Contacted		Disinfectant Restored/ Increased		☐ Yes ☒ No	
Monon		Flushing Mains/Pipes		☐ Yes ☒ No	
Position		Users Advised to Boil/Seek Alternate		☐ Yes ☒ No	
Secretary					
Phone #	(800) 267-7120	Fax #	(613) 933-7930		
DWS Person Providing Oral Notification		OTHER - Describe:			
Dave Markell					
Initial DWS Notification Prepared by:		Other information attached ☐			
Dave Markell					
Signature	Dave Markell	Date	July 20/04		

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved:	Date Resolution Notice Provided:
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)	
Prepared By:	Signature:
Date:	
For Ministry Use Only:	Report No.

HP OfficeJet K Series K80
Personal Printer/Fax/Copier/Scanner

Log for
OCWA
613 448-1616
Jul 20 2004 1:43pm

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Jul 20	1:41pm	Fax Sent	1 613 933-7930	0:30	2	OK
Jul 20	1:42pm	Fax Sent	1 800 268-6061	0:32	2	OK
Jul 20	1:43pm	Fax Sent	1 416 314-5455	0:53	2	OK



Ministry of the Environment
Ministère de l'Environnement

Drinking-Water Systems Regulation O. Reg. 170/03

NOTICE OF ADVERSE TEST RESULTS AND OTHER PROBLEMS and NOTICE OF ISSUE RESOLUTION at DRINKING-WATER SYSTEMS

SECTION 1 - WRITTEN NOTICE BY LABORATORY

Indicators of Adverse Water Quality		Micro ☒ Exceeds Standard	Phys/Chem ☐ Exceeds Standard	Radiological ☐ Exceeds Standard	CofA/Order ☐ Exceeds Limit
Oral Notification to SPILLS ACTION CENTRE					
Person Contacted: Mary			Date: July 20/04		Time: 9:50
Person Notifying: Irina			AWQI Notification No (s) 29666, 29667, 29668		
Laboratory Name: Caduceon Env. Lab			Laboratory Emergency Contact Name Krystyna Pipin		
Address 2378 Holly Lane, Ottawa			Position Lab. Supervisor		
Telephone # of Lab (613) 526-0123			Phone # (613) 526-0123		Fax # (613) 526-1244
Drinking-Water System (DWS) Name Chesterville			DWS Emergency Contact		
DWS (Waterworks) # 210000728			Name Dave Markell		
Location			Position		
Telephone # of DWS (613) 448-3098			Phone # (613) 448-3098		Fax # (613) 448-1616
Oral Notification to Drinking-Water System Owner			Oral Notification to Local Medical Officer of Health		
Person Contacted Dave			Person Contacted Irina Marchand		
Position			Position		
Date July 20/04		Time 9:40	Date July 20/04		Time 9:45
Laboratory Written Notification Prepared by: (Lab Results must be attached using Section 3 of this form) Irina Okonskala					
Signature Irina			Date July 20/04		



Ministry of the Environment
Ministère de l'Environnement

Drinking-Water Systems Regulation O. Reg 170/03

Adverse Analytical Results

For Indicators Listed in Drinking-Water Systems Regulation

SECTION 3:

Microbiological Testing

AWQI Notification Record No.	Laboratory Submission ID	Laboratory Sample ID	Date/Time - Sample Collected (yyyy/mm/dd)	Sample Type & Sample Location		Membrane Filtration Count / 100 mL				P-A / 100mL Ccnfrmed	HPC / 1mL	Date - Data Approved (yyyy/mm/dd)
				U Untreated*		Total Coliforms	Total Coliform Background	E. Coli Fecal C.	EC FC			
				T Treated**								
				D Distribution								
29666	C-00925	B04-17450	04/07/20	20 South Str.	☐ U ☐ T ☒ D		B6 > 200	☐ EC ☐ FC	☐ TC ☐ EC ☐ FC	> 500	04/07/20	
29667	---	---	---	59 Streetville	☐ U ☐ T ☒ D		B6 > 200	☐ EC ☐ FC	☐ TC ☐ EC ☐ FC		04/07/20	
29668	---	---	---	5 Industrial Dr.	☐ U ☐ T ☒ D		B6 > 200	☐ EC ☐ FC	☐ TC ☐ EC ☐ FC		04/07/20	

For Parameters Listed in Drinking-Water Systems Regulation or cited in MOE CoFA or Order

Physical/Chemical/Radiological Testing

Physical and Microbiological Testing										
AWQI Notification Record No.	Laboratory Submission ID	Laboratory Sample ID	Date/Time - Sample Collected (yyyy/mm/dd)	Sample Type & Sample Location		Parameter	Result(s)***	Unit of Measure	Standard	Date - Data Approved (yyyy/mm/dd)
				U	Untreated*					
				T	Treated**					
				D	Distribution					
					☐ U ☐ T ☐ D					
					☐ U ☐ T ☐ D					
					☐ U ☐ T ☐ D					

Authorization

Signature X <i>[Signature]</i>	Name Irina Okonskaia	Date YYYY 2004	MM 07	DD 20
-----------------------------------	-------------------------	----------------------	----------	----------

* Only for Drinking Water Systems that are not currently required under O Reg. 170/03 to treat their drinking-water.

** Refers to treatment point or entry point samples.

*** If you are reporting Trihalomethanes, please include the quarterly sample result followed by the calculated running annual average value.

Notice of Adverse Test Results and Other Problems
Notice of Issue Resolution at Drinking Water Systems

(PIBS 4444E Version February 3, 2004)

Page 4 of 4

07/20/2004

11:30

6135261244

CADUCED

PAGE 02/06



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To MoE MoH
Fax Number (800) 268-6061 (800) 267-7120
From Dave Markell

Date July 26/04

Number of Pages 3 (including this page)
Subject: Adverse Water

AWOI# Bwt003 Background > 200
Chesterville 5 Industrial dr.

AW QI 29668

ISSUE RESOLUTION.

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro ☒ Exceeds Standard	Phys/Chem ☐ Exceeds Standard	Radiological ☐ Exceeds Standard
				CofA/Order ☐ Exceeds Limit
☐ Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)		Details: Background >200 Background Overgrown.		
Oral Notification to SPILLS ACTION CENTRE				
Date	July 20/04	Time	10:38	AWQI Notification No (s)
Person Contacted		Brandon.		
DWS Name		Chesterville 5 Industrial		
DWS (Waterworks) #		210000728		
DWS Person Providing Oral Notification		Dave Markell		
Oral Notification to MEDICAL OFFICER OF HEALTH		DWS EMERGENCY CONTACT		
Date	July 20/04	Time	10:09	Name
Person Contacted		Monon		
Position		Secretary		
Phone # (800) 367-7720		Fax # (613) 933-7930		
DWS Person Providing Oral Notification		Dave Markell		
Initial DWS Notification Prepared by:		Dave Markell		
Signature		Dave Markell		
Date		July 20/04		
		Resample/Re-test ☒ Yes ☐ No		
		Disinfectant Restored/ Increased ☐ Yes ☒ No		
		Flushing Mains/Pipes ☐ Yes ☒ No		
		Users Advised to Boil/Seek Alternate ☐ Yes ☒ No		
		OTHER - Describe:		
		Other information attached ☐		

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved:	July 26/04	Date Resolution Notice Provided:	July 26/04
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)			
- Resamples Collected. - Results Attached.			
Prepared By:	July 26/04	Signature:	July 26/04
For Ministry Use Only:		Report No.	

C.O.C.: C-00926

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-17592

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 20-Jul-04

DATE REPORTED: 22-Jul-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: -

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	E coli	Background	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
Date Analyzed:	20-Jul-2004	20-Jul-2004	20-Jul-2004	20-Jul-2004	20-Jul-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Treated Reservoir	B04-17592-1	20-Jul-04	< 1	< 1	< 1	< 2	1.20
5 Industrial Dr. Kitchen Tap	B04-17592-2	20-Jul-04	< 1	< 1	< 1	< 2	1.13
59 Streeterpete Outside Tap	B04-17592-3	20-Jul-04	< 1	< 1	< 1	< 2	1.17
20 South E. Washroom	B04-17592-4	20-Jul-04	< 1	< 1	< 1	< 2	1.16
2 Riverside	B04-17592-5	20-Jul-04	< 1	< 1	< 1	< 2	1.13

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

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Log for
OCWA
613 448-1616
Jul 26 2004 11:59am

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Jul 26	11:55am	Fax Sent	1 613 933-7930	0:42	3	OK
Jul 26	11:56am	Fax Sent	1 800 268-6061	0:45	3	OK
Jul 26	11:57am	Fax Sent	1 416 314-5455	1:16	3	OK



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To MoE MoH
Fax Number (800) 268-6061 (800) 267-7120
From Dave Markell

Date July 20/04

Number of Pages 2 (including this page)
Subject: Adverse Water

AWQI# BW001 HPC > 500
Background > 200
Chesterville 20 South st.

AWQI #29666

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro ☒ Exceeds Standard	Phys/Chem ☐ Exceeds Standard	Radiological ☐ Exceeds Standard	CofA/Order ☐ Exceeds Limit
☐ Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)			Details: Background 7200 Background Overstagn		
Oral Notification to SPILLS ACTION CENTRE					
Date	July 20/04	Time	10:38	AWQI Notification No (s)	BWJ001 29666
Person Contacted			Brandon.		
DWS Name			Chosterville 20 South.		
DWS (Waterworks) #			210000728		
DWS Person Providing Oral Notification			Dave Markell		
DWS EMERGENCY CONTACT			Name Dave Markell		
Position			Process Tech		
Phone #			(613) 448-3098		
Fax #			(613) 449-1616		
Oral Notification to MEDICAL OFFICER OF HEALTH			CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date	July 20/04	Time	10:09	Resample/Re-test	☒ Yes ☐ No
Person Contacted			Manon.		
Disinfectant Restored/ Increased			☐ Yes ☒ No		
Flushing Mains/Pipes			☐ Yes ☒ No		
Position			Secretary		
Users Advised to Boil/Seek Alternate			☐ Yes ☒ No		
Phone #			(800) 267-7720		
Fax #			(613) 933-7930		
DWS Person Providing Oral Notification			Dave Markell		
Initial DWS Notification Prepared by:			Dave Markell		
Signature			Dave Markell		
Date			July 20/04		

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved:	Date Resolution Notice Provided:
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)	
Prepared By:	Signature:
Date:	
For Ministry Use Only:	Report No.

HP OfficeJet K Series K80
Personal Printer/Fax/Copier/Scanner

Log for
OCWA
613 448-1616
Jul 20 2004 1:54pm

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Jul 20	1:51pm	Fax Sent	1 613 933-7930	0:30	2	OK
Jul 20	1:52pm	Fax Sent	1 800 268-6061	0:31	2	OK
Jul 20	1:53pm	Fax Sent	1 416 314-5455	0:53	2	OK



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To MoE MoH
Fax Number (800) 268-6061 (800) 267-7120
From Dave Markell

Date July 26/04

Number of Pages 2 (including this page)

Subject: Adverse Water

AWOI# BW001

HPC > 500
Background > 200

Chesterville 20 South st.

AWQE #29666

Issue Resolution

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro ☒ Exceeds Standard	Phys/Chem ☐ Exceeds Standard	Radiological ☐ Exceeds Standard
				CofA/Order ☐ Exceeds Limit
☐ Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)			Details: Background 7200 Background Overstagn.	
Oral Notification to SPILLS ACTION CENTRE HPC 7500				
Date July 20/04	Time 10:38	AWQI Notification No (s) BWT001 29666		
Person Contacted Brandon.		DWS EMERGENCY CONTACT		
DWS Name Chosterville 20 South.		Name Dave Markell		
DWS (Waterworks) # 210000728		Position Process Tech.		
DWS Person Providing Oral Notification Dave Markell		Phone # (613) 448-3098	Fax # (613) 449-1616	
Oral Notification to MEDICAL OFFICER OF HEALTH		CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date July 20/04	Time 10:09	Resample/Re-test		☒ Yes ☐ No
Person Contacted Marion.		Disinfectant Restored/ Increased		☐ Yes ☒ No
		Flushing Mains/Pipes		☐ Yes ☒ No
Position Secretary		Users Advised to Boil/Seek Alternate		☐ Yes ☒ No
Phone # (800) 367-7720	Fax # (613) 933-7930	OTHER - Describe:		
DWS Person Providing Oral Notification Dave Markell		Other information attached ☐		
Initial DWS Notification Prepared by: Dave Markell				
Signature Dave Markell		Date July 20/04		

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved: July 26/04	Date Resolution Notice Provided: July 26/04
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)	
- Resamples collected. - Results Attached.	
Prepared By: Dave Markell	Signature: Dave Markell
	Date: July 26/04
For Ministry Use Only:	Report No.

C.O.C.: C-00926

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-17592

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 20-Jul-04

DATE REPORTED: 22-Jul-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER: —

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	E coli	Background	Heterotrophic Plate Count	Free Chlorine
Units:	cts/100mL	cts/100mL	cts/100mL	cts/1mL	mg/L
M.D.L.:	1	1	1	2	
Reference Method:	MOE E3407	MOE E3407	MOE E3407	MOE E3371	n/a
Date Analyzed:	20-Jul-2004	20-Jul-2004	20-Jul-2004	20-Jul-2004	20-Jul-2004

Client I.D.	Sample I.D.	Date Collected					
Chesterville Well #5 - Treated Reservoir	B04-17592-1	20-Jul-04	< 1	< 1	< 1	< 2	1.20
5 Industrial Dr. Kitchen Tap	B04-17592-2	20-Jul-04	< 1	< 1	< 1	< 2	1.13
59 Streeterpete Outside Tap	B04-17592-3	20-Jul-04	< 1	< 1	< 1	< 2	1.17
20 South E. Washroom	B04-17592-4	20-Jul-04	< 1	< 1	< 1	< 2	1.16
2 Riverside	B04-17592-5	20-Jul-04	< 1	< 1	< 1	< 2	1.13

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

M.D.L. = Method Detection Limit

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

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Log for
OCWA
613 448-1616
Jul 26 2004 12:07pm

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Jul 26	12:04pm	Fax Sent	1 613 933-7930	0:44	3	OK
Jul 26	12:05pm	Fax Sent	1 800 268-6061	0:47	3	OK
Jul 26	12:06pm	Fax Sent	1 416 314-5455	1:19	3	OK



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To	<u>MoE</u>	<u>MoH</u>
Fax Number	<u>(800) 268-6061</u>	<u>(800) 267-7120</u>
From	<u>Dave Markell</u>	

Date Aug 4/04

Number of Pages 2 (including this page)
Subject: Adverse Water

AWOI# 30527

Chesterville TC 1

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) – WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro ☒ Exceeds Standard	Phys/Chem ☐ Exceeds Standard	Radiological ☐ Exceeds Standard
				CofA/Order ☐ Exceeds Limit
☐ Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)			Details: TC 1	
Oral Notification to SPILLS ACTION CENTRE				
Date	Aug 4/04	Time	8:40	AWQI Notification No (s)
Person Contacted		Mary.		
DWS Name		Chesterville		
DWS (Waterworks) #		210000728		
DWS Person Providing Oral Notification		Dave Markell		
		Phone #	(613) 448-3098	Fax # (613) 448-1616
Oral Notification to MEDICAL OFFICER OF HEALTH		CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date	Aug 4/04	Time	8:35	Resample/Re-test
Person Contacted		Caroline Kucate - (machine)		☒ Yes ☐ No
		Disinfectant Restored/ Increased		☐ Yes ☒ No
		Flushing Mains/Pipes		☐ Yes ☒ No
Position		Health Inspector.		Users Advised to Boil/Seek Alternate
				☐ Yes ☒ No
Phone #	(800) 267-7720	Fax #	(613) 933-7930	OTHER - Describe:
DWS Person Providing Oral Notification		Dave Markell		
Initial DWS Notification Prepared by:		Dave Markell		
Signature		Dave Markell		
		Date		
		Aug. 4/04		

SECTION 2 (b) – NOTICE OF ISSUE RESOLUTION – Sect. 16-9 O Reg. 170/03

Date Resolved:	Date Resolution Notice Provided:
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)	
Prepared By:	Signature:
Date:	
For Ministry Use Only:	Report No.

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Log for
OCWA
613 448-1616
Aug 04 2004 8:50am

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Aug 4	8:47am	Fax Sent	1 613 933-7930	0:30	2	OK
Aug 4	8:48am	Fax Sent	1 800 268-6061	0:31	2	OK
Aug 4	8:49am	Fax Sent	1 416 314-5455	0:51	2	OK



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To	<u>MoE</u>	<u>MoH</u>
Fax Number	<u>(800) 268-6061</u>	<u>(800) 267-7120</u>
From	<u>Dave Markell</u>	

Date Aug 9/04

Number of Pages 3 (including this page)

Subject: Adverse Water

AWOI# 30527

Chosterville TC 1

ISSUE RESOLUTION.

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro ☒ Exceeds Standard	Phys/Chem ☐ Exceeds Standard	Radiological ☐ Exceeds Standard
				CofA/Order ☐ Exceeds Limit
☐ Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)		Details: TC 1		
Oral Notification to SPILLS ACTION CENTRE				
Date Aug 4/04	Time 8:40	AWQI Notification No (s) 30527		
Person Contacted Mary.		DWS EMERGENCY CONTACT		
DWS Name Chesterville		Name Dave Markell		
DWS (Waterworks) # 210000728		Position Process Tech		
DWS Person Providing Oral Notification Dave Markell		Phone # (613) 448-3098	Fax # (613) 448-1616	
Oral Notification to MEDICAL OFFICER OF HEALTH		CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date Aug 4/04	Time 8:35	Resample/Re-test		☒ Yes ☐ No
Person Contacted Caroline Kucet - (machine)		Disinfectant Restored/ Increased		☐ Yes ☒ No
		Flushing Mains/Pipes		☐ Yes ☒ No
Position Health Inspector.		Users Advised to Boil/Seek Alternate		☐ Yes ☒ No
Phone # (800) 267-7120	Fax # (613) 933-7930	OTHER - Describe:		
DWS Person Providing Oral Notification Dave Markell		Other information attached ☐		
Initial DWS Notification Prepared by: Dave Markell				
Signature Dave Markell		Date Aug. 4/04		

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved: Aug. 6/04	Date Resolution Notice Provided: Aug. 9/04
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)	
- Resamples collected. - All good - Results attached.	
Prepared By: Dave Markell	Signature: Dave Markell
	Date: Aug 9/04
For Ministry Use Only:	Report No.

C.O.C.: C-00929

CERTIFICATE OF ANALYSIS Final Report

REPORT No. B04-18962

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Attention: Dave Markell

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: (613)526-0123
Fax (613)526-1244

DATE RECEIVED: 04-Aug-04

DATE REPORTED: 06-Aug-04

SAMPLE MATRIX: Drinking Water

JOB/PROJECT NO.: Chesterville WTP

P.O. NUMBER:

WATERWORKS NO. 210000728

Parameter Name:	Total Coliform	E coli	Heterotrophic Plate Count	Free Chlorine	
Units:	cts/100mL	cts/100mL	cts/1mL	mg/L	
M.D.L.:	1	1	2		
Reference Method:	MOE E3407	MOE E3407	MOE E3371	n/a	
Date Analyzed:	04-Aug-2004	04-Aug-2004	04-Aug-2004	04-Aug-2004	

Client I.D.	Sample I.D.	Date Collected					
5 Industrial Drive	B04-18962-1	04-Aug-04	< 1	< 1	6	1.06	
Bray SPS	B04-18962-2	04-Aug-04	< 1	< 1	< 2	1.12	
35 Lorc Lane	B04-18962-3	04-Aug-04	< 1	< 1	< 2	0.90	

Chlorine results provided by client
M.D.L. = Method Detection Limit

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

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Log for
OCWA
613 448-1616
Aug 09 2004 11:17am

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Aug 9	11:14am	Fax Sent	1 613 933-7930	0:43	3	OK
Aug 9	11:15am	Fax Sent	1 800 268-6061	0:42	3	OK
Aug 9	11:16am	Fax Sent	1 416 314-5455	1:12	3	OK



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To	<u>MoE</u>	<u>MoH</u>
Fax Number	<u>(800) 268-6061</u>	<u>(800) 267-7120</u>
From	<u>Dave Markell</u>	

Date AUG 11/04

Number of Pages 2 (including this page)
Subject: Adverse Water

AWOI# 30984

CHESTERVILLE WATER - #217 QUEEN ST WEST
RESULT - HPC > 500

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) – WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro ☒ Exceeds Standard	Phys/Chem ☐ Exceeds Standard	Radiological ☐ Exceeds Standard
				CofA/Order ☐ Exceeds Limit
☐ Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)			Details: <i>HPC > 500</i>	
Oral Notification to SPILLS ACTION CENTRE				
Date <i>AUG 11/04</i>	Time <i>09:41</i>	AWQI Notification No (s) <i>30984</i>		
Person Contacted <i>MARY</i>		DWS EMERGENCY CONTACT		
DWS Name <i>CHESTERVILLE WATER</i>		Name <i>DAVE MARKELL</i>		
DWS (Waterworks) # <i>210000728</i>		Position <i>PROCESS TECH</i>		
DWS Person Providing Oral Notification <i>BLAIR HENDERSON</i>		Phone # <i>(613) 448-3098</i>	Fax # <i>(613) 448-1616</i>	
Oral Notification to MEDICAL OFFICER OF HEALTH		CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date <i>AUG 11/04</i>	Time <i>09:38</i>	Resample/Re-test	☒ Yes ☐ No	
Person Contacted <i>IDALIA</i>		Disinfectant Restored/ Increased	☐ Yes ☒ No	
		Flushing Mains/Pipes	☐ Yes ☒ No	
Position <i>SPECIAL PROJECTS</i>		Users Advised to Boil/Seek Alternate	☐ Yes ☒ No	
Phone # <i>(800) 267-7120</i>	Fax # <i>(613) 933-7930</i>	OTHER - Describe:		
DWS Person Providing Oral Notification <i>BLAIR HENDERSON</i>		Other information attached ☐		
Initial DWS Notification Prepared by: <i>BLAIR HENDERSON</i>				
Signature <i>Blair Hender</i>		Date <i>AUG 11/04</i>		

SECTION 2 (b) – NOTICE OF ISSUE RESOLUTION – Sect. 16-9 O Reg. 170/03

Date Resolved:	Date Resolution Notice Provided:	
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)		
Prepared By:	Signature:	Date:
For Ministry Use Only:		Report No.

HP OfficeJet K Series K80
Personal Printer/Fax/Copier/Scanner

Log for
OCWA
613 448-1616
Aug 11 2004 10:27am

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Aug 11	10:23am	Fax Sent	1 613 933-7930	0:32	2	OK
Aug 11	10:24am	Fax Sent	1 800 268-6061	0:32	2	OK
Aug 11	10:26am	Fax Sent	1 416 314-5455	0:53	2	OK



Ministry of the Environment
Ministère de l'Environnement

Drinking-Water Systems Regulation O. Reg. 170/03

NOTICE OF ADVERSE TEST RESULTS AND OTHER PROBLEMS and NOTICE OF ISSUE RESOLUTION at DRINKING-WATER SYSTEMS

SECTION 1 - WRITTEN NOTICE BY LABORATORY

Indicators of Adverse Water Quality		Micro ☒ Exceeds Standard	Phys/Chem ☐ Exceeds Standard	Radiological ☐ Exceeds Standard	CofA/Order ☐ Exceeds Limit
Oral Notification to SPILLS ACTION CENTRE					
Person Contacted: Mary		Date: 2004/08/11		Time: 10:35	
Person Notifying: Yuliana Kang		AWQI Notification No (s) 30984			
Laboratory Name: Caduceon Environmental Labs		Laboratory Emergency Contact Name Krystyna Pipin			
Address 2378 Holly Lane Ottawa		Position Lab Supervisor			
Telephone # of Lab (613) 526-0123		Phone # (613) 526-0123		Fax # (613) 526-1244	
Drinking-Water System (DWS) Name Chesterville		DWS Emergency Contact Dave Markell OCHA			
DWS (Waterworks) # 210000728		Name Dave Markell			
Location 217 Queen St. W.		Position			
Telephone # of DWS (613) 448-3098		Phone # (613) 448-3098		Fax # (613) 448-1616	
Oral Notification to Drinking-Water System Owner			Oral Notification to Local Medical Officer of Health		
Person Contacted Blair Henderson			Person Contacted Idalia		
Position			Position		
Date 2004/08/11		Time 9:30		Date 2004/08/11	
Time 10:00		Laboratory Written Notification Prepared by: Yuliana Kang			
(Lab Results must be attached using Section 3 of this form)		Date 2004/08/11			
Signature [Signature]		Date 2004/08/11			


 Ministry of the Environment
 Ministère de l'Environnement

Drinking-Water Systems Regulation O. Reg 170/03

Adverse Analytical Results

For Indicators Listed in Drinking-Water Systems Regulation

SECTION 3:

Microbiological Testing

AWQI Notification Record No.	Laboratory Submission ID	Laboratory Sample ID	Date/Time - Sample Collected (yyyy/mm/dd)	Sample Type & Sample Location		Membrane Filtration Count / 100 mL				P-A / 100mL Confirmed	HPC / 1mL	Date - Data Approved (yyyy/mm/dd)
						Total Coliforms	Total Coliform Background	E. Coli Fecal C.	EC FC			
				U) Untreated*	T) Treated**							
				D) Distribution								
30984		B04-1923-3	2004/08/09	Chesterville	217 Queen St. W.							

For Parameters Listed in Drinking-Water Systems Regulation or cited in MOE CofA or Order

Physical/Chemical/Radiological Testing

AWQI Notification Record No.	Laboratory Submission ID	Laboratory Sample ID	Date/Time - Sample Collected (yyyy/mm/dd)	Sample Type & Sample Location		Parameter	Result(s)***	Unit of Measure	Standard	Date - Data Approved (yyyy/mm/dd)
				D) Distribution						

Authorization

Signature X	Name Yuliana Kang	Date my 2004	NM c8	DD 11
----------------	----------------------	-----------------	----------	----------

* Only for Drinking Water Systems that are not currently required under O. Reg. 170/03 to treat their drinking-water.

** Refers to treatment point or entry point samples.

*** If you are reporting Trihalomethanes, please include the quarterly sample result followed by the calculated running annual average value.

 Notice of Adverse Test Results and Other Problems
 Notice of Issue Resolution at Drinking Water Systems



Ontario Clean Water Agency
Agence Ontarienne Des Eaux

Chesterville Hub
5 Industrial Drive,
Chesterville, Ontario K0C 1H0
Tel: (613) 448-3098
Fax: (613) 448-1616
kbaker@ocwa.com

Fax

To MoE MoH
Fax Number (800) 268-6061 (800) 267-7120
From Dave Markell
Date AUG 19/04
Number of Pages 3 (including this page)
Subject: Adverse Water - ISSUE RESOLUTION

AWOI# 30984

ISSUE RESOLUTION FOR CHESTERVILLE WATER

DWS # 210000728

Drinking-Water Systems Regulation O. Reg 170/03

SECTION 2 (a) - WRITTEN NOTICE BY DRINKING-WATER SYSTEM (DWS) OWNER

Indicators of Adverse Water Quality		Micro ☒ Exceeds Standard	Phys/Chem ☐ Exceeds Standard	Radiological ☐ Exceeds Standard
				CofA/Order ☐ Exceeds Limit
☐ Indicator of Adverse Water Quality (operational / on-site observations or test result; no associated lab notification)			Details: <i>HPC > 500</i>	
Oral Notification to SPILLS ACTION CENTRE				
Date <i>AUG 11/04</i>	Time <i>09:41</i>	AWQI Notification No (s) <i>30984</i>		
Person Contacted <i>MARY</i>		DWS EMERGENCY CONTACT		
DWS Name <i>CHESTERVILLE WATER</i>		Name <i>DAVE MARKELL</i>		
DWS (Waterworks) # <i>210000728</i>		Position <i>PROCESS TECH</i>		
DWS Person Providing Oral Notification <i>BLAIR HENDERSON</i>		Phone # <i>(613) 448-3098</i>	Fax # <i>(613) 448-1616</i>	
Oral Notification to MEDICAL OFFICER OF HEALTH		CORRECTIVE ACTION(S) TAKEN BY OWNER:		
Date <i>AUG 11/04</i>	Time <i>09:38</i>	Resample/Re-test	☒ Yes ☐ No	
Person Contacted <i>IDELIA</i>		Disinfectant Restored/ Increased	☐ Yes ☒ No	
		Flushing Mains/Pipes	☐ Yes ☒ No	
Position <i>SPECIAL PROJECTS</i>		Users Advised to Boil/Seek Alternate	☐ Yes ☒ No	
Phone # <i>(800) 267-7120</i>	Fax # <i>(613) 933-7930</i>	OTHER - Describe:		
DWS Person Providing Oral Notification <i>BLAIR HENDERSON</i>		Other information attached ☐		
Initial DWS Notification Prepared by: <i>BLAIR HENDERSON</i>				
Signature <i>Blair Henderson</i>		Date <i>AUG 11/04</i>		

SECTION 2 (b) - NOTICE OF ISSUE RESOLUTION - Sect. 16-9 O Reg. 170/03

Date Resolved: <i>AUG 16/04</i>	Date Resolution Notice Provided: <i>AUG 19/04</i>
Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse)	
<i>- RESAMPLE COLLECTED</i> <i>- RESULTS ATTACHED - (GOOD)</i>	
Prepared By: <i>BLAIR HENDERSON</i>	Signature: <i>Blair Henderson</i>
	Date: <i>AUG 19/04</i>
For Ministry Use Only:	Report No.

C.O.C.: C-00931

REPORT No. B04-19762

Report To:

Ontario Clean Water Agency - Chesterville
5 Industrial Dr.
Chesterville ON K0C 1H0

Caduceon Environmental Laboratories

2378 Holly Lane
Ottawa Ontario K1V 7P1
Tel: 526-0123
Fax 526-1244

Attention: Dave Markell

DATE RECEIVED: 12-Aug-04

JOB/PROJECT NO.: Chesterville WTP

DATE REPORTED: 16-Aug-04

P.O. NUMBER: —

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 210000728

Parameter Name:	Heterotrophic Plate Count	Free Chlorine			
Units:	cts/1mL	mg/L			
M.D.L.:	2				
Reference Method:	MOE E3371	n/a			
Date Analyzed:	12-Aug-2004	12-Aug-2004			

Client I.D.	Sample I.D.	Date Collected				
5 Industrial Dr K Tap	B04-19762-1	11-Aug-04	< 2	1.0		
217 Queen St W OS Tap	B04-19762-2	11-Aug-04	< 2	1.1		
237 Queen St W OS Tap	B04-19762-3	11-Aug-04	< 2	1.2		

Chlorine results provided by client
M.D.L. = Method Detection Limit

K. Pipin

Krystyna Pipin, M. Sc.
Lab Supervisor

Accredited by the Standards Council of Canada and CAEAL for specific tests.

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior written consent from Caduceon Environmental Laboratories.

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Log for
OCWA
613 448-1616
Aug 19 2004 5:34pm

Last Transaction

<u>Date</u>	<u>Time</u>	<u>Type</u>	<u>Identification</u>	<u>Duration</u>	<u>Pages</u>	<u>Result</u>
Aug 19	5:31pm	Fax Sent	1 613 933-7930	0:44	3	OK
Aug 19	5:32pm	Fax Sent	1 800 268-6061	0:44	3	OK
Aug 19	5:33pm	Fax Sent	1 416 314-5455	1:14	3	OK

RECEIVED, SUBJECT TO THE CLASSIFICATIONS AND TARIFFS IN EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL BILL OF LADING, OR RECEIVED, SUBJECT TO THE RULES FOR THE CARRIAGE OF EXPRESS AND NON-CARLOAD FREIGHT, AND TARIFFS IN EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL SHIPPING CONTRACT (BILL OF LADING), GOODS DESCRIBED BELOW, IN APPARENT GOOD ORDER, EXCEPT AS NOTED (CONTENTS AND CONDITIONS OF PACKAGES UNKNOWN), MARKED, CONSIGNED AND DESTINED AS INDICATED BELOW, WHICH SAID COMPANY AGREES TO CARRY TO ITS USUAL PLACE OF DELIVERY AT SAID DESTINATION, IF ON ITS ROAD, OTHERWISE TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION.

REÇU SOUS RÉSERVE DES CLASSIFICATIONS ET TARIFFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONNAISSEMENT ORIGINAL, OU SOUS RÉSERVE DES RÈGLEMENTS RÉGISSANT LE TRANSPORT DES MESSAGERIES ET MARCHANDISES DE DÉTAIL ET DES TARIFFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONTRAT DE TRANSPORT (CONNAISSEMENT), LES MARCHANDISES DÉSIGNÉES CI-DESSOUS, APPAREMMENT EN BON ÉTAT, SAUF LES REMARQUES FAITES DANS LA PRÉSENTE (LE CONTENU ET L'ÉTAT DU CONTENU DES COLIS ÉTANT INCONNUS), MARQUÉES ET CONSIGNÉES TEL QU'INDIQUÉ CI-DESSOUS, ET QUE LA COMPAGNIE S'ENGAGE À TRANSPORTER À DESTINATION À SON LIEU HABITUEL DE LIVRAISON, POURVU QUE TELLE DESTINATION SOIT SUR SON PARCOURS, SINON À LES LIVRER À UN AUTRE TRANSPORTEUR FAISANT ROUTE VERS CETTE DESTINATION.

CONSIGNEE DESTINATAIRE OCWA CHESTERTVILLE RESERVOIR	SHIPPER EXPÉDITEUR Lachine Warehouse Brenntag Canada Inc.
STREET ADDRESS ADDRESS (N° RUE) BRANNEN ROAD (OFF INDUSTRIAL DR)	STREET ADDRESS ADDRESS (N° RUE) 3000 Jean Baptiste Deschamps
DESTINATION CHESTERTVILLE, ON	DESTINATION Lachine, PQ
PROVINCE OR STATE PROVINCE OU ÉTAT KOC 2K0 Canada	PROVINCE OR STATE PROVINCE OU ÉTAT H8T 1E2 Canada

POINT OF ORIGIN / POINT D'EXPÉDITION Lachine PQ	CUSTOMER ORDER NO. N° DE COMMANDE DU CLIENT 11136	ORDER NO. N° DE COMMANDE 1394163	INVOICE NUMBER N° DE FACTURE 26280555
CARRIER NAME / NOM DU TRANSPORTEUR LE GROUPE GUILBAULT LTD.	REQUIRED / DEMANDÉE 21 01 2004	DATE SHIPPED EXPÉDIÉ LE 21 01 2004	CONSOLIDATED BL NO. CONNAISSEMENT CONS. 45328364
TRANSPORTATION MODE / MODE DE TRANSPORT Less Than Truck Load	INVOICE TO / BUYER-FACTURE À / ACHETEUR OCWA	VEHICLE T/C NO. / MARQUE DU WAGON 45328364	
ROUTING / ITINÉRAIRE	PAGE NO. N° DE PAGE 1		

NO. AND DESCRIPTION OF PACKS Nbre et description de colis 1.00 each	DESCRIPTION OF ARTICLES AND SPECIAL MARKS DESCRIPTION DES ARTICLES ET INDICATIONS SPÉCIALES PALLET WOODEN RETURNABLE	ACTUAL WEIGHT POIDS REEL 0 KILOGRAMS
32.00 DELCAN	X HYPOCHLORITE SOLUTIONS, CLASS 8, UN1781, PKG III	773 KILOGRAMS
	SODIUM HYPO10.8% (12% TR) DCN RET18 9L NSF	773 KILOGRAMS
	TOTAL WEIGHT	773 KILOGRAMS
4 *CLASS 8 CORROSIVE* PLACARDS REQUIRED		
***** CAMION AVEC UNE TAIL GATE REQUIS *****		
***** IMPORTANT *****		
*APPELER AVANT LA LIVRAISON AU 1-613-448-3098 *		

ERAP 2-0985 AND 24 HOUR NUMBER: 514-861-1211		

GROSS BRUT 40	TOTAL NO. OF PIECES/PKGS. Nbre total de colis 33	THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, MARKED AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION, ACCORDING TO THE APPLICABLE REGULATIONS OF THE TRANSPORTATION OF DANGEROUS GOODS ACT, 1992. LA PRÉSENTE CERTIFIE QUE LES MATIÈRES CI-DESSUS MENTIONNÉES SONT PROPREMENT CLASSIFIÉES, DÉCRITES, IDENTIFIÉES ET ÉTIQUETÉES, ET QU'ELLES SONT EN BON ÉTAT POUR LE TRANSPORT CONFORMÉMENT AUX RÈGLEMENTS ADOPTÉS EN VERTU DE LA LOI SUR LE TRANSPORT DES MARCHANDISES DANGEREUSES (1992).	DECLARED VALUE OF SHIPMENT VALEUR DÉCLARÉE \$
TARE 5	IF CHARGES ARE TO BE PREPAID (WRITE OR STAMP HERE "TO BE PREPAID") INDIQUER ICI SI L'ENVOI SE FAIT EN "PORT-PAYÉ"		
NET 35	PREPAID		

FORWARD INVOICE FOR PREPAID FREIGHT QUOTING OUR B/L NO. TO: FAIRE SUIVRE FACTURE POUR EXPÉDITION PORT AVANT EN RÉFÉRENCE À NOTRE NUMÉRO DE BL N°:	BRENTAG CANADA INC. 2900 JEAN BAPTISTE DESCHAMPS LACHINE, PQ H8T 1C3	MAXIMUM LIABILITY FOR LOSS OR DAMAGE: \$2.00 PER POUND OR \$4.41 PER KILOGRAM UNLESS DECLARED VALUE STATES OTHERWISE. RESPONSABILITÉ MAXIMALE POUR PERTE OU DOMMAGE: 2 \$ LA LIVRE OU 4,41 \$ LE KILO, SAUF STIPULATION AU CONTRAIRE PAR LA VALEUR DÉCLARÉE.
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SHIPPER EXPÉDITEUR Brenntag Canada Inc.	AGENT Mario Sauthier	DESTINATAIRE/CONSIGNEE
PER PAR Uicini Lu	PER PAR	PER PAR

RECEIVED, SUBJECT TO THE CLASSIFICATIONS AND TARIFFS IN EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL BILL OF LADING, OR RECEIVED, SUBJECT TO THE RULES FOR THE CARRIAGE OF EXPRESS AND MAIL MATTER, EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL SHIPPING CONTRACT (BILL OF LADING), GOODS DESCRIBED BELOW, IN APPARENT GOOD ORDER, EXCEPT AS NOTED (CONTENTS AND CONDITIONS OF CONTAINER, IF ANY, AND DESTINATIONS AS INDICATED BELOW, WHICH SAID COMPANY AGREES TO CARRY TO ITS USUAL PLACE OF DELIVERY AT SAID DESTINATION, IF NOT OTHERWISE NOTED TO DELIVER TO ANOTHER CARRIER ON THE DATE OF DELIVERY.

RECU SOUS RÉSERVE DES CLASSIFICATIONS ET TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONNaissement ORIGINAL, OU SOUS RÉSERVE DES RÈGLEMENTS RÉGISSANT LE TRANSPORT DES MARCHANDISES EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONTRAT DE TRANSPORT (CONNaissement), LES MARCHANDISES DÉSIGNÉES CI-DESSOUS, APPARENTMENT EN BON ÉTAT, SAUF LES REMARQUES FAITES DANS LA PRÉSENTE, SONT À LIVRER À UN AUTRE TRANSPORTEUR FAISANT ROUTE VERS CETTE DESTINATION, ET QUE LA COMPAGNIE S'ENGAGE À TRANSPORTER À DESTINATION À SON LIEU HABITUEL DE LIVRAISON, POURVU QUE TELLE DESTINATION NE SOIT PAS DÉSIGNÉE AUTREMENT.

CONSIGNEE DESTINATAIRE OCWA CHESTERTVILLE RESERVOIR		SHIPPER / EXPÉDITEUR Lachine Warehouse Brenntag Canada Inc.	
STREET ADDRESS / ADRESSE (N° RUE) BRANNEN ROAD (OFF INDUSTRIAL DRIVE) CHESTERTVILLE, ON K0C 2K0 Canada		SHIPPER ADDRESS / ADRESSE (N° RUE) 3000 Jean Baptiste Deschamps Lachine, PQ H8T 1E2 Canada	
POINT OF ORIGIN / POINT D'EXPÉDITION Lachine		CUSTOMER ORDER NO. / N° DE COMMANDE DU CLIENT 11136	
CARRIER NAME / NOM DU TRANSPORTEUR LE GROUPE GUILBAULT LTD.		ORDER NO. / N° DE COMMANDE 1306292	
TRANSPORTATION MODE / MODE DE TRANSPORT Less Than Truck Load		DATE SHIPPED / DATE D'EXPÉDITION 15.03.2004	
ROUTING / ITINÉRAIRE OCWA		VEHICLE NO. / N° DU VÉHICULE 4532836	

NO. AND DESCRIPTION OF PACKS N° ET DESCRIPTION DE COLIS	D.G.	DESCRIPTION OF ARTICLES AND SPECIAL MARKS DESCRIPTION DES ARTICLES ET INDICATIONS SPÉCIALES		ACTUAL WEIGHT POIDS RÉEL
		HYPOCHLORITE SOLUTIONS, CLASS 8, UN1791, PK GP II SODIUM HYPO 10.8% (12% TR) DCN RET 18.9% NSF <i>Pallette retournerable</i> TOTAL WEIGHT <i>77 KILOGRAM</i>		
***** *** CAMION AVEC UNE TAIL GATE REQUIS *** IMPORTANT APPELER AVANT LA LIVRAISON AU 1-613-448-3098 *** *****				
<i>60-033018-3 778065</i>				
ERAP 2-0985 AND 24 HOUR NUMBER: 514-861-1211				

GROSS BRUT	TOTAL NO. OF PIECES/PKGS. N°RE TOTAL DE COLIS	THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, MARKED AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION, ACCORDING TO THE APPLICABLE REGULATIONS OF THE TRANSPORTATION OF DANGEROUS GOODS ACT, 1992. LA PRÉSENTE CERTIFIE QUE LES MATIÈRES CI-DESSUS MENTIONNÉES SONT PROPREMENT CLASSIFIÉES, DÉCRITES, IDENTIFIÉES ET ÉTIQUETÉES, ET QU'ELLES SONT EN BON ÉTAT POUR LE TRANSPORT CONFORMÉMENT AUX RÈGLEMENTS ADOPTÉS EN VERTU DE LA LOI SUR LE TRANSPORT DES MARCHANDISES DANGEREUSES (1992).	DECLARED VALUE OF SHIPMENT VALEUR DÉCLARÉE
TARE	IF CHARGES ARE TO BE PREPAID WRITE OR STAMP HERE "TO BE PREPAID" INDIQUER ICI SI L'ENVOI SE FAIT EN "PORT-PAYÉ"		
NET	PREPAID		
FORWARD INVOICE FOR PREPAID FREIGHT QUOTING OUR B/L NO. TO: LIVRE FACTURE POUR EXPÉDITION PORT N° RÉFÉRANT À NOTRE NUMÉRO DE		BRENNTAG CANADA INC. 2900 JEAN BAPTISTE DESCHAMPS LACHINE, PQ H8T 1C8	
SHIPPER / EXPÉDITEUR Brenntag Canada Inc.		MAXIMUM LIABILITY FOR LOSS OR DAMAGE: \$2.00 PER POUND OR \$4.41 PER KILOGRAM UNLESS DECLARED VALUE STATES OTHERWISE. RESPONSABILITÉ MAXIMALE POUR PERTE OU DOMMAGE: 2 \$ LA LIVRE OU 4,41 \$ LE KILO, SAUF STIPULATION AU CONTRAIRE PAR LA VALEUR DÉCLARÉE.	

REV. (07/00)

353566

TO Lansdowne Wells DATE March 25/03

ADDRESS From Chesterville Water FOR

SHIP TO Lansdowne Wells DATE REQUIRED

QUANTITY	PLEASE SUPPLY	PRICE	AMOUNT
1	10 20L radium hypo = 200L		
2			
3	Return Empty to Chesterville	10.	
4			
5			
6			
7			
8			
9			

REF NO. 13 ORDERED BY B. Hinkley APPROVED BY

REQUISITION
(NOT A PURCHASE ORDER)

CEIVED, SUBJECT TO THE CLASSIFICATIONS AND TARIFFS IN EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL BILL OF LADING, OR, RECEIVED, SUBJECT TO THE RULES FOR THE CARRIAGE OF EXPRESS AND NON-CARLOAD FREIGHT TRAFFIC AND TARIFFS IN EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL SHIPPING CONTRACT (BILL OF LADING), GOODS DESCRIBED BELOW, IN APPARENT GOOD ORDER, EXCEPT AS NOTED (CONTENTS AND CONDITIONS OF PACKAGES UNKNOWN), MARKED, CONSIGNED AND DESTINED AS INDICATED BELOW, WHICH SAID COMPANY AGREES TO CARRY TO ITS USUAL PLACE OF DELIVERY AT SAID DESTINATION, IF ON ITS ROAD, OTHERWISE TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION.

OU SOUS RÉSERVE DES CLASSIFICATIONS ET TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONNAISSEMENT ORIGINAL, OU SOUS RÉSERVE DES RÈGLEMENTS RÉGISSANT LE TRANSPORT DES MESSAGERIES ET MARCHANDISES DE DÉTAIL ET DES TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONTRAT DE TRANSPORT (CONNAISSEMENT), LES MARCHANDISES DESIGNÉES CI-DESSOUS, APPAREMMENT EN BON ÉTAT, SAUF LES REMARQUES FAITES DANS LA PRÉSENTE (LE CONTENU ET L'ÉTAT DU CONTENU DES COLIS ÉTANT INCONNUS), MARQUÉES ET CONSIGNÉES TEL QU'INDIQUÉ CI-DESSOUS, ET QUE LA COMPAGNIE S'ENGAGE À TRANSPORTER À DESTINATION À SON LIEU HABITUEL DE LIVRAISON, POURVU QUE TELLE DESTINATION SOIT SUR SON PARCOURS, SINON À LIVRER À UN AUTRE TRANSPORTEUR FAISANT ROUTE VERS CETTE DESTINATION.

CONSIGNEE ESTIMATEUR O C W A - CHESTERTVILLE - WT ONTARIO CLEAN WATER AGENCY		SHIPPER EXPÉDITEUR Lachine Warehouse Brenntag Canada Inc.	
DÉPART RESSER (N° RUE) ESTINATION PROVINCE OR STATE PROVINCE OU ÉTAT 5 INDUSTRIAL DRIVE CHESTERTVILLE, ON K0C 1H0 Canada		STREET ADDRESS ADRESSE (N° RUE) DESTINATION PROVINCE OR STATE PROVINCE OU ÉTAT 3000 Jean Baptiste Deschamps Lachine, PQ H8T 1E2 Canada	
POINT OF ORIGIN / POINT D'EXPÉDITION Lachine PQ		CUSTOMER ORDER NO. N° DE COMMANDE DU CLIENT 13905	ORDER NO. N° DE COMMANDE 1431622
PRIER NAME / NOM DU TRANSPORTEUR Guilbault		REQUIRED / DEMANDÉE	B/L NUMBER N° DE CONN. 26322666
TRANSPORTATION MODE / MODE DE TRANSPORT Less Than Truck Load		DATE SHIPPED EXPÉDIÉ LE 02.06.2004	CONSOLIDATED B/L NO. CONNAISSEMENT CONS.
ROUTING / MINÉRAIRE		VEHICLE TC NO. / MARQUE DU WAGON	

QUANTITY / QUANTITÉ 32.00 DEL CAN	DESCRIPTION OF ARTICLES AND SPECIAL MARKS DESCRIPTION DES ARTICLES ET INDICATIONS SPÉCIALES X HYPOCHLORITE SOLUTIONS. CLASS 8. UN1791. PK GP I SODIUM HYPO10.8%(12% TR)DCN RET18.9L NSF Palitte TOTAL WEIGHT 50-774767-8	ACTUAL WEIGHT POIDS REEL 773 KILOGRAMS 773 KILOGRAMS

ERAP 2-0985 AND 24 HOUR NUMBER: 514-861-1211		

ROSS TUT RE ET	TOTAL NO. OF PIECES/PKGS. NBR TOTAL DE COLIS 33 IF CHARGES ARE TO BE PREPAID WRITE OR STAMP HERE "TO BE PREPAID" INDIQUER ICI SI L'ENVOI SE FAIT EN "PORT-PAYÉ" PREPAID	THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, MARKED AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION, ACCORDING TO THE APPLICABLE REGULATIONS OF THE TRANSPORTATION OF DANGEROUS GOODS ACT, 1992. LA PRÉSENTE CERTIFIE QUE LES MATIÈRES CI-DESSUS MENTIONNÉES SONT PROPREMENT CLASSIFIÉES, DÉCRITES, IDENTIFIÉES ET ÉTIQUETÉES, ET QU'ELLES SONT EN BON ÉTAT POUR LE TRANSPORT CONFORMÉMENT AUX RÈGLEMENTS/ADOPTÉS EN VERTU DE LA LOI SUR LE TRANSPORT DES MARCHANDISES DANGEREUSES (1992).	DECLARED VALUE OF SHIPMENT VALEUR DÉCLARÉE 1
WARD INVOICE FOR PREPAID FREIGHT OTTING OUR B/L NO. TO: RE SUITE FACTURE POUR EXPÉDITION PORT É ÉMISSANT À NOTRE NUMÉRO DE		BRENTAG CANADA INC. 2900 JEAN BAPTISTE DESCHAMPS LACHINE, PQ H8T 1C8	
SHIPPER ÉDITEUR Brenntag Canada Inc.		DESTINATAIRE/CONSIGNÉE Virginie	

REQUISITION
(NOT A PURCHASE ORDER)

TO		Hardsdane Water		127428	
ADDRESS		May 5/04		DATE	
SHIP TO				FOR	
QUANTITY		PLEASE SUPPLY		DATE REQUIRED	
1	10 7	jugs of sed. type for Hardsdane water.	PRICE	AMOUNT	
2					
3	3	jugs of sed. type for Hill Island.			
4					
5					
6		taken from			
7		Chastorville			
8					
9					
REF. NO.		ORDERED BY		APPROVED BY	

REQUISITION
(NOT A PURCHASE ORDER)

		127433	
TO		Landsdowne Hill Is. DATE June 27/07	
ADDRESS		FOR	
SHIP TO		DATE REQUIRED	
QUANTITY	PLEASE SUPPLY	PRICE	AMOUNT
1	7 7 Landsdowne W.		
2			
3	1 Hill Island		
4			
5	8 - returns		
6			
7	Sod Type		
8			
9			
REF. NO.	ORDERED BY	APPROVED BY	
	<i>AM</i>		

CLASSIFICATIONS ET TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONNAISSEMENT ORIGINAL, OU SOUS RÉSERVE DES RÈGLEMENTS RÉGISSANT LE TRANSPORT DES MESSAGERIES ET MARCHANDISES DE DÉTAIL ET DES TARIFS
SUE OF THIS ORIGINAL SHIPPING CONTRACT (BILL OF LADING), GOODS DESCRIBED BELOW, IN APPARENT GOOD ORDER, EXCEPT AS NOTED (CONTENTS AND CONDITIONS OF PACKAGES UNKNOWN), MARKED, CONSIGNED
ED BELOW, WHICH SAID COMPANY AGREES TO CARRY TO ITS USUAL PLACE OF DELIVERY AT SAID DESTINATION, IF ON ITS ROAD, OTHERWISE TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION.

DES CLASSIFICATIONS ET TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONNAISSEMENT ORIGINAL, OU SOUS RÉSERVE DES RÈGLEMENTS RÉGISSANT LE TRANSPORT DES MESSAGERIES ET MARCHANDISES DE DÉTAIL ET DES TARIFS
JATE DE DÉLIVRANCE DE CE CONTRAT DE TRANSPORT (CONNAISSEMENT), LES MARCHANDISES DÉSIGNÉES CI-DESSOUS, APPAREMMENT EN BON ÉTAT, SAUF LES REMARQUES FAITES DANS LA PRÉSENTE (LE CONTENU ET L'ÉTAT DU CONTENU DES
CONNUIS), MARQUÉES ET CONSIGNÉES TEL QU'INDIQUE CI-DESSOUS, ET QUE LA COMPAGNIE S'ENGAGE À TRANSPORTER À DESTINATION À SON LIEU HABITUEL DE LIVRAISON, POURVU QUE TELLE DESTINATION SOIT SUR SON PARCOURS, SINON À
UN AUTRE TRANSPORTEUR FAISANT ROUTE VERS CETTE DESTINATION.

AGNEE KATAIRE		OCWA CHESTERVILLE RESERVOIR		SHIPPER EXPÉDITEUR Lachine Warehouse Brenntag Canada Inc.	
ADDRESS ADRESSE (N° RUE) DESTINATION PROVINCE OR STATE PROVINCE OU ÉTAT		BRANNEN ROAD (OFF INDUSTRIAL DRIVE) CHESTERVILLE, ON K0C 2K0 Canada		STREET ADDRESS ADRESSE (N° RUE) DESTINATION PROVINCE OR STATE PROVINCE OU ÉTAT 3000 Jean Baptiste Deschamps Lachine, PQ H8T 1E2 Canada	
POINT OF ORIGIN / POINT D'EXPÉDITION Lachine		CUSTOMER ORDER NO. N° DE COMMANDE DU CLIENT 11136		ORDER NO. N° DE COMMANDE 1444603	
CARRIER NAME / NOM DU TRANSPORTEUR BRENNTAG CANADA INC. Québec Intercit		REQUIRED / DEMANDÉE		DATE SHIPPED EXPÉDIÉ LE 19.07.2004	
TRANSPORTATION MODE / MODE DE TRANSPORT Less Than Truck Load		INVOICE TO/BUYER-FACTURE À / ACHETEUR OCWA		VEHICLE T/C NO. / MARQUE DU WAGON	
ROUTING / ITINÉRAIRE		45328364		PAGE NO. N° DE PAGE 1	
NO. AND DESCRIPTION OF PACKS NBR ET DESCRIPTION DE COLIS		D.G.		DESCRIPTION OF ARTICLES AND SPECIAL MARKS DESCRIPTION DES ARTICLES ET INDICATIONS SPÉCIALES	
1.00 each		PALLET WOODEN RETURNABLE		0 KILOGRAMS	
32.00 DELCAN		X HYPOCHLORITE SOLUTIONS; CLASS 8. UN1791. PK GP II SODIUM HYPO10.8%(12% TR)DCN RET18.9% NSF		773 KILOGRAMS	
TOTAL WEIGHT		773 KILOGRAMS		773 KILOGRAMS	
***** * *** CAMION AVEC UNE TAIL GATE REQUIS * ***** IMPORTANT ***** * APPELER AVANT LA LIVRAISON AU 1-613-448-3098 *** *****					
ERAP 2-0985 AND 24 HOUR NUMBER: 514-861-1211					
GROSS BRUT		32 TOTAL NO. OF PIECES/PKGS. NBR TOTAL DE COLIS		THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, MARKED AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION, ACCORDING TO THE APPLICABLE REGULATIONS OF THE TRANSPORTATION OF DANGEROUS GOODS ACT, 1992.	
TARE		IF CHARGES ARE TO BE PREPAID WRITE OR STAMP HERE "TO BE PREPAID" INDIQUER ICI SI L'ENVOI SE FAIT EN "PORT-PAYÉ"		LA PRÉSENTE CERTIFIE QUE LES MATIÈRES CI-DESSUS MENTIONNÉES SONT PROPREMENT CLASSIFIÉES, DÉCRITES, IDENTIFIÉES ET ÉTIQUETÉES, ET QUELLES SONT EN BON ÉTAT POUR LE TRANSPORT CONFORMÉMENT AUX RÈGLEMENTS ADOPTÉS EN VERTU DE LA LOI SUR LE TRANSPORT DES MARCHANDISES DANGEREUSES (1992).	
NET		PREPAID		DECLARED VALUE OF SHIPMENT VALEUR DÉCLARÉE \$	

FORWARD INVOICE FOR PREPAID FREIGHT
QUOTING OUR B/L NO. TO:
FAIRE SUIVRE FACTURE POUR EXPÉDITION PORT
EN RÉFÉRANT À NOTRE NUMÉRO DE
N° A:

BRENNTAG CANADA INC.
2900 JEAN BAPTISTE DESCHAMPS
LACHINE, PQ H8T 1C8

MAXIMUM LIABILITY FOR LOSS OR DAMAGE:
\$2.00 PER POUND OR \$4.41 PER KILOGRAM
UNLESS DECLARED VALUE STATES OTHERWISE.
RESPONSABILITÉ MAXIMALE POUR PERTE OU DOMMAGE:
2 \$ LA LIVRE OU 4,41 \$ LE KILO, SAUF STIPULATION AU
CONTRAIRE PAR LA VALEUR DÉCLARÉE.

SHIPPER
EXPÉDITEUR

Brenntag Canada Inc.

AGENT

DESTINATAIRE/CONSIGNÉE

PER
PAR

PER
PAR

PER
PAR

3

MEMORANDUM
MÉMOIRE

(THIS BILL OF LADING-EXPRESS SHIPPING CONTRACT IS TO BE SIGNED BY THE
SHIPPER AND CARRIER)
(CE CONNAISSEMENT CONTRAT D'EXPÉDITION PAR MESSAGERIES DOIT ÊTRE
SIGNÉ PAR L'EXPÉDITEUR ET LE TRANSPORTEUR)

THESE PRODUITS SONT VENDUS ET
EXPÉDIÉS CONFORMÉMENT AUX CONDITIONS
APPARAISSANT AU VERSO DE LA PRÉSENTE.

THESE PRODUITS SONT VENDUS ET
EXPÉDIÉS CONFORMÉMENT AUX CONDITIONS
APPARAISSANT AU VERSO DE LA PRÉSENTE.

RECEIVED, SUBJECT TO THE CLASSIFICATIONS AND TARIFFS IN EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL BILL OF LADING, OR, RECEIVED, SUBJECT TO THE RULES FOR THE CARRIAGE OF EXPRESS AND NON-CARLOAD FREIGHT TRAFFIC AND TARIFFS IN EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL SHIPPING CONTRACT (BILL OF LADING). GOODS DESCRIBED BELOW, IN APPARENT GOOD ORDER, EXCEPT AS NOTED (CONTENTS AND CONDITIONS OF PACKAGES UNKNOWN), MARKED, CONSIGNED AND DESTINED AS INDICATED BELOW, WHICH SAID COMPANY AGREES TO CARRY TO ITS USUAL PLACE OF DELIVERY AT SAID DESTINATION, IF ON ITS ROAD, OTHERWISE TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION.

REQU SOUS RÉSERVE DES CLASSIFICATIONS ET TARIFFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONNAISSEMENT ORIGINAL, OU SOUS RÉSERVE DES RÈGLEMENTS RÉGISSANT LE TRANSPORT DES MESSAGERIES ET MARCHANDISES DE DÉTAIL ET DES TARIFFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONTRAT DE TRANSPORT (CONNAISSEMENT), LES MARCHANDISES DÉSIGNÉES CI-DESSOUS, APPAREMMENT EN BON ÉTAT, SAUF LES REMARQUES FAITES DANS LA PRÉSENTE (LE CONTENU ET L'ÉTAT DU CONTENU DES COLIS ÉTANT INCONNUS), MARQUÉES ET CONSIGNÉES TEL QU'INDIQUÉ CI-DESSOUS, ET QUE LA COMPAGNIE S'ENGAGE À TRANSPORTER À DESTINATION À SON LIEU HABITUEL DE LIVRAISON, POURVU QUE TELLE DESTINATION SOIT SUR SON PARCOURS, SINON À LES LIVRER À UN AUTRE TRANSPORT, FAISANT ROUTE VERS CETTE DESTINATION.

CONSIGNEE DESTINATAIRE OCWA WINCHESTER WTP WELL#7	SHIPPER EXPÉDITEUR Lachine Warehouse Brenntag Canada Inc.
ADDRESS ADRESSE (N° RUE) 13224 THOMPSON ROAD CHESTERTVILLE, ON KOC 2K0 Canada	STREET ADDRESS ADRESSE (N° RUE) 3000 Jean Baptiste Deschamps Lachine, PQ H8T 1E2 Canada

POINT OF ORIGIN / POINT D'EXPÉDITION Lachine PQ	CUSTOMER ORDER NO. N° DE COMMANDE DU CLIENT 13905	ORDER NO. N° DE COMMANDE 1453478	B/L NUMBER N° DE CONN. 26346599
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CARRIER NAME / NOM DU TRANSPORTEUR LE GROUPE GUILBAULT LTD.	REQUIRED / DEMANDÉE	DATE SHIPPED EXPÉDIÉ LE 23.08.2004	CONSOLIDATED B/L NO. CONNAISSEMENT CONS. 45328192
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TRANSPORTATION MODE / MODE DE TRANSPORT Less Than Truck Load	INVOICE TO/BUYER-FACTURE À / ACHETEUR OCWA	VEHICLE T/C NO. / MARQUE DU WAGON
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ROUTING / ITINÉRAIRE	PAGE NO. N° DE PAGE 1
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NO. AND DESCRIPTION OF PACKS NBR ET DESCRIPTION DE COLIS D.G.	DESCRIPTION OF ARTICLES AND SPECIAL MARKS DESCRIPTION DES ARTICLES ET INDICATIONS SPÉCIALES	ACTUAL WEIGHT POIDS REEL
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64.00 DELCAN	X HYPOCHLORITE SOLUTIONS. CLASS 8. UN1791. PK GP II SODIUM HYPO10.8% (12% TR) DCN RET18.9L NSF	1.546 KILOGRAMS
32-WW 32-CW	TOTAL WEIGHT taken from well 7. w/ 20 MT CW 1 pallet CW	1.546 KILOGRAMS

*** TRES IMPORTANT *** NE PAS LIVRER SUR PALETTE		
*** CAMION TAIL GATE REQUIS/ TRUCK WITH HYDRAULIC TAIL GATE REQUIRED		
* APPELER AVANT LA LIVRAISON AU 1-613-448-3098 ***		
* 64 DELCAN VIDES A RAMASSER		
* LIVRAISON MARDI 24 AOUT MATIN SVP		

ERAP 2-0985 AND 24 HOUR NUMBER: 514-861-1211		

GROSS BRUT	TOTAL NO. OF PIECES/PKGS. NBR TOTAL DE COLIS	THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, MARKED AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION, ACCORDING TO THE APPLICABLE REGULATIONS OF THE TRANSPORTATION OF DANGEROUS GOODS ACT, 1992.	DECLARED VALUE OF SHIPMENT VALEUR DÉCLARÉE
TARE	IF CHARGES ARE TO BE PREPAID WRITE OR STAMP HERE "TO BE PREPAID" INDIQUER ICI SI L'ENVOI SE FAIT EN "PORT-PAYÉ"	LA PRÉSENTE CERTIFIE QUE LES MATIÈRES CI-DESSUS MENTIONNÉES SONT PROPREMENT CLASSIFIÉES, DÉCRITES, IDENTIFIÉES ET ÉTIQUETÉES, ET QU'ELLES SONT EN BON ÉTAT POUR LE TRANSPORT CONFORMÉMENT AUX RÈGLEMENTS ADOPTÉS EN VERTU DE LA LOI SUR LE TRANSPORT DES MARCHANDISES DANGEREUSES (1992).	
NET	PREPAID		

FORWARD INVOICE FOR PREPAID FREIGHT
QUITTING OUR B/L NO. TO:
LIVRE FACTURE POUR EXPÉDITION PORT
N° RÉFÉRANT À NOTRE NUMÉRO DE

BRENTAG CANADA INC.
2900 JEAN BAPTISTE DESCHAMPS
LACHINE, PQ H8T 1C8

MAXIMUM LIABILITY FOR LOSS OR DAMAGE:
\$2.00 PER POUND OR \$4.41 PER KILOGRAM
UNLESS DECLARED VALUE STATES OTHERWISE.
RESPONSABILITÉ MAXIMALE POUR Perte OU DOMMAGE:
2 \$ LA LIVRE OU 4,41 \$ LE KILO. SAUF STIPULATION AU
CONTRAIRE PAR LA VALEUR DÉCLARÉE.

SHIPPER EXPÉDITEUR Brenntag Canada Inc.	AGENT	DESTINATAIRE/CONSIGNEE
PER PAR	PER PAR	PER PAR

EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL SHIPPING CONTRACT (BILL OF LADING), GOODS DESCRIBED BELOW, IN APPARENT GOOD ORDER, EXCEPT AS NOTED (CONTENTS AND CONDITIONS OF PACKAGES UNKNOWN), MARKED, CONSIGNED AND DESTINED AS INDICATED BELOW, WHICH SAID COMPANY AGREES TO CARRY TO ITS USUAL PLACE OF DELIVERY AT SAID DESTINATION, IF ON ITS ROAD, OTHERWISE TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION.

REÇU SOUS RÉSERVE DES CLASSIFICATIONS ET TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONNAISSEMENT, OU SOUS RÉSERVE DES RÈGLEMENTS RÉGISSANT LE TRANSPORT DES MESSAGERIES ET MARCHANDISES DE DÉTAIL ET DES TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONTRAT DE TRANSPORT (CONNAISSEMENT), LES MARCHANDISES DÉSIGNÉES CI-DESSOUS, APPAREMMENT EN BON ÉTAT, SAUF LES REMARQUES FAITES DANS LA PRÉSENTE (LE CONTENU ET L'ÉTAT DU CONTENU DES COLIS ÉTANT INCONNUS), MARQUÉES ET CONSIGNÉES TEL QU'INDIQUÉ CI-DESSOUS, ET QUE LA COMPAGNIE S'ENGAGE À TRANSPORTER À DESTINATION À SON LIEU HABITUEL DE LIVRAISON, POURVU QUE TELLE DESTINATION SOIT SUR SON PARCOURS, SINON A LES LIVRER À UN AUTRE TRANSPORTEUR FAISANT ROUTE VERS CETTE DESTINATION.

CONSIGNEE DESTINATAIRE OCWA CHESTERVILLE RESERVOIR		SHIPPER EXPÉDITEUR Lachine Warehouse Brenntag Canada Inc.	
STREET ADDRESS (N° RUE) BRANNEN ROAD (OFF INDUSTRIAL DR CHESTERVILLE, ON K0C 2K0 Canada		STREET ADDRESS (N° RUE) 3000 Jean Baptiste Deschamps Lachine, PQ H8T 1E2 Canada	
POINT OF ORIGIN / POINT D'EXPÉDITION Lachine PQ		CUSTOMER ORDER NO. N° DE COMMANDE DU CLIENT 11136	ORDER NO. N° DE COMMANDE 1470755
CARRIER NAME / NOM DU TRANSPORTEUR LE GROUPE GUILBAULT LTD.		REQUIRED / DEMANDÉE 21.10.2004	B/L NUMBER N° DE CONN. 26365315
TRANSPORTATION MODE / MODE DE TRANSPORT Less Than Truck Load		VEHICLE T/C NO. / MARQUE DU WAGON OCWA	
ROUTING / ITINÉRAIRE OCWA		PAGE NO. N° DE PAGE 45328364 1	
NO. AND DESCRIPTION OF PACKS NBRE ET DESCRIPTION DE COLIS D.G.		DESCRIPTION OF ARTICLES AND SPECIAL MARKS DESCRIPTION DES ARTICLES ET INDICATIONS SPÉCIALES	
32.00 DELCAN		X HYPOCHLORITE SOLUTIONS. CLASS 8. UN1791. PK GP II SODIUM HYPO10.8%(12% TR)DCN RET18.9L NSF	
TOTAL WEIGHT		773 KILOGRAMS	
*****		*****	
* ** CAMION AVEC UNE TAIL GATE REQUIS		*	
* NE PAS EXPÉDIER SUR PALETTE		*	
***** IMPORTANT *****		*	
* APPELER AVANT LA LIVRAISON AU 1-613-448-3098 ***		*	
*****		*****	
ERAP 2-0985 AND 24 HOUR NUMBER: 514-861-1211		54 MT J. HARTLE OCT 22/04	
GROSS BRUT	TOTAL NO. OF PIECES/PKGS. NBRE TOTAL DE COLIS	THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, MARKED AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION, ACCORDING TO THE APPLICABLE REGULATIONS OF THE TRANSPORTATION OF DANGEROUS GOODS ACT, 1992.	
TARE	IF CHARGES ARE TO BE PREPAID WRITE OR STAMP HERE "TO BE PREPAID" INDIQUER ICI SI L'ENVOI SE FAIT EN "PORT-PAYÉ"	LA PRÉSENTE CERTIFIE QUE LES MATIÈRES CI-DESSUS MENTIONNÉES SONT PROPREMENT CLASSIFIÉES, DÉCRITES, IDENTIFIÉES ET ÉTIQUETÉES, ET QU'ELLES SONT EN BON ÉTAT POUR LE TRANSPORT CONFORMÉMENT AUX RÈGLEMENTS ADOPTÉS EN VERTU DE LA LOI SUR LE TRANSPORT DES MARCHANDISES DANGEREUSES (1992).	
NET	PREPAID	DECLARED VALUE OF SHIPMENT VALEUR DÉCLARÉE \$	

FORWARD INVOICE FOR PREPAID FREIGHT
QUOTING OUR B/L NO. TO:
FAIRE SUIVRE FACTURE POUR EXPÉDITION PORT
PAYÉ EN RÉFÉRENCE À NOTRE NUMÉRO DE

BRENTAG CANADA INC.
2900 JEAN BAPTISTE DESCHAMPS
LACHINE, PQ H8T 1C8

MAXIMUM LIABILITY FOR LOSS OR DAMAGE:
\$2.00 PER POUND OR \$4.41 PER KILOGRAM
UNLESS DECLARED VALUE STATES OTHERWISE.
RESPONSABILITÉ MAXIMALE POUR PERTE OU DOMMAGE:
2 \$ LA LIVRE OU 4,41 \$ LE KILO, SAUF STIPULATION AU
CONTRAIRE PAR LA VALEUR DÉCLARÉE.

PER
EXPÉDITEUR
Brenntag Canada Inc.

AGENT

DESTINATAIRE/CONSIGNEE

PER
PAR

PER
PAR

PER
PAR

4 MEMORANDUM
MÉMOIRE

THESE PRODUITS SONT VENDUS ET
EXPÉDIÉS CONFORMÉMENT AUX CONDITIONS
APPARAISSANT AU VERSO DE LA PRÉSENTE.

CES PRODUITS SONT VENDUS ET
EXPÉDIÉS CONFORMÉMENT AUX CONDITIONS
APPARAISSANT AU VERSO DE LA PRÉSENTE.

1176344

TO Lonsdowne Wells. 353597
 ADDRESS Church St.
 SHIP TO _____ DATE Oct 15/04.
 FOR 5973 DATE REQUIRED _____

QUANTITY	PLEASE SUPPLY	PRICE	AMOUNT
1 <u>3</u>	<u>18.9 Liter Sodium Hypo</u>		<u>75.36</u>
2	<u>Note:</u>		
3	<u>Returned 10-18.9L carbap-</u>		<u>(100.00)</u>
4	<u>from Chest. Water</u>		<u>\$ (24.64)</u>
5			
6			
7			
8			
9			

REF. NO. _____ ORDERED BY Brian H. APPROVED BY _____

REQUISITION
(NOT A PURCHASE ORDER)

COST TRANSFER:

Dec 21, 2004

Sodium Hypo

5 jugs from Chesterville Water to Lansdowne Water

$$25.12 \times 5 = 125.60$$

LDW +5973

CW -5708

5500543

ENTERED
EC

Dave

EFFECT ON THE DATE OF ISSUE OF THIS ORIGINAL SHIPPING CONTRACT (BILL OF LADING), GOODS DESCRIBED BELOW, IN APPARENT GOOD ORDER, EXCEPT AS NOTED (CONTENTS AND CONDITIONS OF PACKAGES UNKNOWN, MARKED, CONSIGNED AND DESTINED AS INDICATED BELOW, WHICH SAID COMPANY AGREES TO CARRY TO ITS USUAL PLACE OF DELIVERY AT SAID DESTINATION, IF ON ITS ROAD, OTHERWISE TO DELIVER TO ANOTHER CARRIER ON THE ROUTE TO SAID DESTINATION.

REÇU SOUS RÉSERVE DES CLASSIFICATIONS ET TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONNAISSEMENT ORIGINAL, OU SOUS RÉSERVE DES RÈGLEMENTS RÉGISSANT LE TRANSPORT DES MESSAGERIES ET MARCHANDISES DE DÉTAIL ET DES TARIFS EN VIGUEUR À LA DATE DE DÉLIVRANCE DE CE CONTRAT DE TRANSPORT (CONNAISSEMENT), LES MARCHANDISES DÉSIGNÉES CI-DESSOUS, APPAREMMENT EN BON ÉTAT, SAUF LES REMARQUES FAITES DANS LA PRÉSENTE (LE CONTENU ET L'ÉTAT DU CONTENU DES COLIS ÉTANT INCONNUS), MARQUÉES ET CONSIGNÉES TEL QU'INDIQUÉ CI-DESSOUS, ET QUE LA COMPAGNIE S'ENGAGE À TRANSPORTER À DESTINATION À SON LIEU HABITUEL DE LIVRAISON, POURVU QUE TELLE DESTINATION SOIT SUR SON PARCOURS, SINON À LES LIVRER À UN AUTRE TRANSPORTEUR FAISANT ROUTE VERS CETTE DESTINATION.

CONSIGNEE DESTINATAIRE OCWA CHESTERVILLE RESERVOIR		SHIPPER EXPÉDITEUR Lachine Warehouse Brenntag Canada Inc.	
STREET ADDRESS RUE BRANNEN ROAD (OFF INDUSTRIAL DRIVE) CHESTERVILLE, ON K0C 2K0 Canada		STREET ADDRESS RUE 3000 Jean Baptiste Deschamps Lachine, PQ H8T 1E2 Canada	
POINT OF ORIGIN / POINT D'EXPÉDITION Lachine PQ		CUSTOMER ORDER NO. N° DE COMMANDE DU CLIENT 13905	ORDER NO. N° DE COMMANDE 1482656
CARRIER NAME / NOM DU TRANSPORTEUR LE GROUPE GUILBAULT LTD.		REQUIRED / DEMANDÉE 03.12.2004	B/L NUMBER N° DE CONN. 26379880
TRANSPORTATION MODE / MODE DE TRANSPORT Less Than Truck Load		VEHICLE T/C NO. / MARQUE DU WAGON	
ROUTING / ITINÉRAIRE		PAGE NO. N° DE PAGE 45328364 1	
NO. AND DESCRIPTION OF PACKS Nbre et description de colis D.G.		DESCRIPTION OF ARTICLES AND SPECIAL MARKS DESCRIPTION DES ARTICLES ET INDICATIONS SPÉCIALES	
1.00 each 32.00 DELCAN		PALLET WOODEN RETURNABLE X HYPOCHLORITE SOLUTIONS, CLASS 8, UN1791, PK GP II SODIUM HYPO10.8%(12% TR) DCN RET18.9L NSF TOTAL WEIGHT ***** ***** CAMION AVEC UNE TAIL GATE REQUIS ***** ***** NE PAS EXPÉDIER SUR PALETTE ***** ***** IMPORTANT ***** ***** APPELER AVANT LA LIVRAISON AU 1-613-448-3098 ***** ***** ERAP 2-0985 AND 24 HOUR NUMBER: 514-861-1211	
TOTAL NO. OF PIECES/PKGS. Nbre total de colis IF CHARGES ARE TO BE PREPAID WRITE OR STAMP HERE "TO BE PREPAID" INDIQUER ICI SI L'ENVOI SE FAIT EN "PORT-PAYÉ" PREPAID		THIS IS TO CERTIFY THAT THE ABOVE NAMED MATERIALS ARE PROPERLY CLASSIFIED, DESCRIBED, MARKED AND LABELLED AND ARE IN PROPER CONDITION FOR TRANSPORTATION, ACCORDING TO THE APPLICABLE REGULATIONS OF THE TRANSPORTATION OF DANGEROUS GOODS ACT, 1992. LA PRÉSENTE CERTIFIE QUE LES MATIÈRES CI-DESSUS MENTIONNÉES SONT PROPREMENT CLASSIFIÉES, DÉCRITES, IDENTIFIÉES ET ÉTIQUETÉES, ET QU'ELLES SONT EN BON ÉTAT POUR LE TRANSPORT CONFORMÉMENT AUX RÈGLEMENTS ADOPTÉS EN VERTU DE LA LOI SUR LE TRANSPORT DES MARCHANDISES DANGEREUSES (1992).	
INVOICE FOR PREPAID FREIGHT UR B/L NO. TO: DE FACTURE POUR EXPÉDITION PORT FÉRANT À NOTRE NUMÉRO DE		MAXIMUM LIABILITY FOR LOSS OR DAMAGE: \$2.00 PER POUND OR \$4.41 PER KILOGRAM UNLESS DECLARED VALUE STATES OTHERWISE. RESPONSABILITÉ MAXIMALE POUR PERTE OU DOMMAGE: 2 \$ LA LIVRE OU 4,41 \$ LE KILO. SAUF STIPULATION AU CONTRAIRE PAR LA VALEUR DÉCLARÉE.	

Brenntag Canada Inc.

AGENT

DESTINATAIRE/CONSIGNEE

PER
PAR

PER
PAR

MEMORANDUM
MEMORANDUM

THESE PRODUITS SONT VENDUS ET EXPÉDIÉS EN
CONFORMITÉ AVEC LES CONDITIONS

CES PRODUITS SONT



Flowmeter Calibration Verification Certificate

Customer

WTP

Date Performed

Wednesday 16 June 2004 10:36

Date Certificate Printed

Tuesday 14 September 2004 12:21

Site Details

Location

WTP

Tag

Operator

Tom K.

Results :

Transmitter Zero	Pass
Transmitter Span	Pass
Transmitter Pulse Output	Not Tested
Transmitter Analogue Output	Pass
Sensor Electrode Integrity	Pass
Sensor Energising Coil Integrity	Pass
Declared "FULL" pipe status appears to be FULL.	

Accuracy :

The above tests and results verify that the flowmeter is functioning within normal working limits, and is within $\pm 2\%$ of original calibration certificate.

Transmitter Settings

Sensor Calibration Factor	1.0144/-6/5/1.000
Flow Range	25.0 l/s
Response Time Constant	8 seconds
Probe Factors	ins 1.00000, prof 1.00000
Analogue Output	4-20 Forward
Second Analogue Range	100.0% (25.0 l/s)
Pulse Output	Not Tested
Totaliser Units	m ³

Calmaster Details

Instrument, Serial No.	CM0186, P/27130/5/1
Last Calibrated	Tue 24 Feb 2004
Next Calibration Date	Thu 24 Feb 2005
Firmware Version	CalMaster v1.0 36/96
PC Software Version	v2.10 13/03/2000
DVM Serial No.	
Resistor Serial No.	(Not Used)

Flowmeter Details

Type	MagMaster, Electromagnetic
Sensor S/No.	P/25104/5/1
Transmitter S/No.	*****
Tag No.	*****
Meter Size	100 mm

CalMaster is fully traceable to National and International Standards.
For details please refer to CalMaster Traceability Documentation.

ABB Instrumentation World Flow Technology Centres

ABB Instrumentation Ltd.,
Oldends Lane, Stonehouse
Gloucestershire
England, GL10 3TA

+44 (0) 1453 85 3422
+44 (0) 1453 82 1121

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125 E County Line Road,
Warminster. PA 18974.
USA

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Fax +61-2-540-0001

ABB Instrumentation,
Dranselder Str2
37070 Gottingen
Germany

Tel +49 0551 905 0
Fax +49 0551 905 777

CALMASTER HELPLINE

Email : calmaster@gb.abb.com or calmaster@us.abb.com

QSTA1138 Iss. 6



Flowmeter Calibration Verification Certificate

Customer: Chesterville WTP
Date Performed: Wednesday 16 June 2004 10:36
Date Certificate Printed: Wednesday 21 July 2004 13:15

Site Details

Location: Well # 5
Tag: *****
Operator: Tom K.

Results :

Transmitter Zero	Pass
Transmitter Span	Pass
Transmitter Pulse Output	Not Tested
Transmitter Analogue Output	Pass
Sensor Electrode Integrity	Pass
Sensor Energising Coil Integrity	Pass
Declared "FULL" pipe status appears to be FULL.	

Accuracy :

The above tests and results verify that the flowmeter is functioning within normal working limits, and is within $\pm 2\%$ of original calibration certificate.

Transmitter Settings

Sensor Calibration Factor	1.0144/-6/5/1.000
Flow Range	25.0 l/s
Response Time Constant	8 seconds
Probe Factors	ins 1.00000, prof 1.00000
Analogue Output	4-20 Forward
Second Analogue Range	100.0% (25.0 l/s)
Pulse Output	Not Tested
Totaliser Units	m ³

Calmaster Details

Instrument, Serial No.	CM0186, P/27130/5/1
Last Calibrated	Tue 24 Feb 2004
Next Calibration Date	Thu 24 Feb 2005
Firmware Version	CalMaster v1.0 36/96
PC Software Version	v2.10 13/03/2000
DVM Serial No.	
Resistor Serial No.	(Not Used)

Flowmeter Details

Type	MagMaster, Electromagnetic
Sensor S/No.	P/25104/5/1
Transmitter S/No.	*****
Tag No.	*****
Meter Size	100 mm

CalMaster is fully traceable to National and International Standards.
For details please refer to CalMaster Traceability Documentation.

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Fax +61-2-540-0001

ABB Instrumentation,
Dranselder Str2
37070 Gottingen
Germany
Tel +49 0551 905 0
Fax +49 0551 905 777



Flowmeter Calibration Verification Certificate

Customer

Date Performed

Friday 6 August 2004 11:51

Date Certificate Printed

Tuesday 14 September 2004 12:18

Site Details

Location

Tag

Operator

Tom K.

Results :

Transmitter Zero	Pass
Transmitter Span	Pass
Transmitter Pulse Output	Not Tested
Transmitter Analogue Output	Pass
Sensor Electrode Integrity	Pass
Sensor Energising Coil Integrity	Pass
Declared "FULL" pipe status appears to be FULL.	

Accuracy :

The above tests and results verify that the flowmeter is functioning within normal working limits, and is within $\pm 2\%$ of original calibration certificate.

Transmitter Settings

Sensor Calibration Factor	1.2660/-3/8/1.000
Flow Range	100.0 l/s
Response Time Constant	? seconds
Probe Factors	ins 1.00000, prof 1.00000
Analogue Output	4-20 Forward
Second Analogue Range	100.0% (100.0 l/s)
Pulse Output	Not Tested
Totaliser Units	m ³

Calmaster Details

Instrument, Serial No.	CM0186, P/27130/5/1
Last Calibrated	Tue 24 Feb 2004
Next Calibration Date	Thu 24 Feb 2005
Firmware Version	CalMaster v1.0 36/96
PC Software Version	v2.10 13/03/2000
DVM Serial No.	
Resistor Serial No.	(Not Used)

Flowmeter Details

Type	MagMaster, Electromagnetic
Sensor S/No.	V/82985/1/1
Transmitter S/No.	vk012534
Tag No.	*****
Meter Size	250 mm

CalMaster is fully traceable to National and International Standards.
For details please refer to CalMaster Traceability Documentation.

ABB Instrumentation World Flow Technology Centres

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CALMASTER HELPLINE

Email : calmaster@gb.abb.com or calmaster@us.abb.com

QSTA1138 Iss. 6



Flowmeter Calibration Verification Certificate

Customer Chesterville WTP
 Date Performed Wednesday 16 June 2004 11:39
 Date Certificate Printed Tuesday 14 September 2004 12:18

Site Details

Location Treated Line
 Tag *****
 Operator Tom K.

Results :

Transmitter Zero Pass
 Transmitter Span FAIL
 Transmitter Pulse Output Pass
 Transmitter Analogue Output Pass
 Sensor Electrode Integrity Pass
 Sensor Energising Coil Integrity Pass
 Declared "FULL" pipe status appears to be FULL.

Accuracy :

The meter has not passed calibration checks.
 Export data using option on 'Review Tests' screen
 and despatch to factory for helpline advice.

Transmitter Settings

Sensor Calibration Factor 1.2660/-3/8/1.000
 Flow Range 100.0 l/s
 Response Time Constant ? seconds
 Probe Factors ins 1.00000, prof 1.00000
 Analogue Output 4-20 Forward
 Second Analogue Range 100.0% (100.0 l/s)
 Pulse Output 1.00000 pulses/l
 Totaliser Units m³

Calmaster Details

Instrument, Serial No. CM0186, P/27130/5/1
 Last Calibrated Tue 24 Feb 2004
 Next Calibration Date Thu 24 Feb 2005
 Firmware Version CalMaster v1.0 36/96
 PC Software Version v2.10 13/03/2000
 DVM Serial No.
 Resistor Serial No. (Not Used)

Flowmeter Details

Type MagMaster, Electromagnetic
 Sensor S/No. V/82985/1/1
 Transmitter S/No. VKE020181
 Tag No. *****
 Meter Size 250 mm

CalMaster is fully traceable to National and International Standards.
 For details please refer to CalMaster Traceability Documentation.

ABB Instrumentation World Flow Technology Centres

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 Fax +49 0551 905 777

No. 3960 P. 2
Apr. 27. 2004 9:29AM Township of North Dundas

THE CORPORATION OF THE TOWNSHIP OF NORTH DUNDAS

MOVED BY: Bill Smith

SESSION April 26 2004

SECONDED BY: Estella Rose

RESOLUTION NO. (6)

THAT the 2003 Annual Compliance Reports for the Winchester and Chesterville Water Treatment Facilities were presented by OCWA and reviewed by Council of the Township of North Dundas this 26th day of April, 2004.

DIVISION	FOR	AGAINST
VOTE		

CARRIED ☒ DEFEATED ☐ DEFERRED ☐

SIGNATURE: PRESIDING OFFICER
Alvin Runnels

DECLARATION CONFLICT OF INTEREST

- (a) DISCLOSED HIS (THEIR) HER INTEREST(S).
(b) VACATED HIS (THEIR) HER SEAT.
(c) ABSTAINED FROM DISCUSSION AND DID NOT VOTE ON THIS QUESTION
Clerk _____



Dave Markell
07/20/2004 04:29 PM

To: jan.franssen@ene.gov.on.ca
cc:

Subject: Chesterville Data Gap

Jan, we had a scada problem and are missing required data for Chesterville CL2 residual at Reservoir. Attached is the print-out. During the period everything was normal.



chesterville data gap 07-19-04.jpg

dave