DRINKING WATER SYSTEM ANNUAL REPORT	PAGE 1	OF 4

DRINKING WATER SYSTEM ANNUAL REPORT					
Reporting Period:	January 1 st to Decem	ber 31 st , 2021 (year)			
Water System Northside Firehall #2					
Water System Owner qathet Regional Distr	rict				
Primary Contact Name (Operator or Manager) R	egan Keil, Parks and Pr	operties Supervisor			
Phone Number (Operator or Manager) 604-	-485-2260 ext 408				
E-mail (Operator or Manager) rkeil	@qathet.ca				
DESCRIBE YOUR WATER SUPPLY SYSTEM					
What is the Source(s) of Raw Water?					
✓ Deep Well Shallow Well	Surface Water	Other			
If other, specify details:					
Does the Drinking Water System have Prim	nary Disinfection?	✓ Yes	No		
Chlorination	Ozone	Other			
If other, specify details:					
Does the Drinking Water System have Seco	ondary Disinfection?	Yes	No		
Chlorination Other					
If other, specify details:					
Does the Drinking Water System have Filtre	Does the Drinking Water System have Filtration?				
Check all boxes that apply					
✓Cartridge Filter(s) □Carbon Filter	Sand Filtration	Reverse Osmosis	Other		
If other, specify details:					
PUBLIC REPORTING					
Emergency Response & Contingency Plan (ERCP)				
Is your ERCP up to Date?	✓ Yes	No			
How do you Inform the System Users of the	e ERCP?				
Hand Delivered Bulletin Board	Newspaper	Utility Bill Insert	✓ Website		
Other (specify details)					
Drinking Water System Annual Report					
How do you Inform the System Users of the	e Annual Report?				
Hand Delivered Bulletin Board	Newspaper	Utility Bill Insert	✓ Website		
Other (specify details)					

DRINKING WATER SYSTEM ANNUAL REPORT PAGE 2 OF 4

COMPLIANCE WITH OPERATING PERMIT

List the conditions of your Operating Permit (Contact the DWO for a copy if needed):

Minimum bacteriological sampling frequency is monthly.

Review and update the Emergency Response Plan annually.

Wellhead protection plan to be submitted by Nov. 1, 2022.

Are you in compliance with your Operating Permit?

🖌 Yes

No

BACTERIOLOGICAL TESTING AND DRINKING WATER PROTECTION REGULATION WATER QUALITY STANDARDS				
How many bacteriological samples were collected during this reporting period? 1				
What is the minimum required sampling frequency for this system	n? (#samples/month)	1/month		
Additional sampling details:				
Was the minimum required sampling frequency achieved?	✓Yes	No		
Comments:				
Bacteriological summary attached to this report?				
If no. how do the users of the system view the results?				

System did not come online till December. Going forward sample results will be posted online.

WATER QUALITY STANDARDS FOR POTABLE WATER

Parameter:	Standard:	Did this system n	neet standard?
Escherichia coli (for all samples)	No detectable Escherichia coli per 100ml	✓Yes	No
Total Coliform Bacteria (if only 1 sample collected in a 30 day period)	No detectable total coliform bacteria per 100ml	∠ Yes	No
Total Coliform Bacteria (<i>if more than 1 sample collected in a</i> <i>30 day period</i>)	No more than 10% of samples contain total coliform bacteria, and No sample has more than 10 total coliform bacteria per 100ml	∠ Yes	No

If the system did not meet any of above Drinking Water Protection Regulation standards, record the results in the table below; attach additional sheets if necessary.

Date	TC/100ml	E.coli/100ml	Reason	Corrective Action

			DRINKING WATER	SYSTEM ANNUAL REPORT PAGE
CHEMICAL SAME	PLING COMPLETED I	DURING THIS REPORTING PER	IOD	
Was any chen	nical sampling co	onducted during reporting	g period? Ves	No
If no, when w for this systen		nical samples conducted	lf yes, did all water sa Canadian Drinking Wa	mples meet the Guidelines for Iter Quality?
(date)	🗌 Don't Kn	ow Never	✓ Yes	No
the table belo	w; attach additi	onal sheets if necessary.	-	Quality, record the results in
Parameter	Result	Corrective Action / Trea	atment / Comments	
Additional Tes	STING			
		rs for continuous monito	ring? Yes	No
	II boxes that app	-		
Chlorine		-	details)	
Are the result	s available on re	,		
If any addition sheets if neces	•	npling was conducted, re	cord results in the table	below; attach additional
Additional Te	sting & Reason fo	or Sampling Correctiv	ve Action Taken	

WATER	OUALITY	COMPLAINTS
	QUALITY	CONTRACTOR

Were there any water quality complaints in this reporting			
period? (e.g. taste, odour, colour etc.)	Yes	∠ No	

If yes, complete the table below; attach additional sheets if necessary.

Date	Water Quality Complaint	Corrective Action / Treatment

			Drin	KING WATER S	SYSTEM ANNUAL REPORT PAGE 4 OF
OPERATIONAL PR	OBLEMS				
period? (e.g. in	y operational proble sufficient water sup uipment, line breaks	oly, malfuncti	on of	Yes	∠ No
If yes, complete	e the table below; at	tach addition	al sheets if necess	ary.	
Incident Date	Type of Operationa	l Problem	Corrective Actio	n Taken	
MAJOR UPGRADE	ES /R EPAIRS & EXPENSES				
-	y major upgrades/re g this reporting perio	-	najor costs	Yes	No
lf yes, complet	e the table below; at	tach addition	al sheets if necess	ary.	
Major Upgrade	es/Expenses	Details			
Improvements	required by DWO				
Additions/chan	ges to system				
Purchase or ins	tall new equipment				
Equipment rep	air or replacement				
Annual mainter	nance of system				
Specialist repor	rt				
Other					
FUTURE IMPROVE					
Are there any p	plans for future impro	ovements?		Yes	No

If yes, complete the table below; attach additional sheets if necessary.

Future Upgrades or Improvements	Estimated Date of Completion
	·

Click here to enter a date.	
A 11.00 0000	COMPLETED BY: Regan Keil

1



Small Water System Emergency Response Plan

Name of Water System: Northside Volunteer Fire Department - #2 Hall

Date Prepared: November 1, 2021

Prepared By: Regan Keil

Emergency Contact Information

Contact Name(s)	Phone #	Cell #	Fax # or other #'s	Email
Operator If certified operator give EOCP #: Regan Keil - #9197	604-487-1380	604-223-7856	604-487- 1380 (f)	rkeil@qathet.ca
Owner's Name & Address: qathet Regional District 202 – 4675 Marine Ave. Powell River, BC V8A 2L2	604-487-1380	604-483-8201		operations@qathet.ca
Electrician: Foxtrot Electrical Solutions	604-414-3929			
Plumber: Target Plumbing	604-483-5192	604-414-8450		
Equipment Supplier(s): Pete's Plumbing Fred Surridge	604-485-9761 250-954-0368			
Other: Jim Brown, Chief	604-483-9303	604-483-1371		
Public Health Contact Information				
Drinking Water Officer: Michael Nguyen, DWO	604-485-3324	604-414-5545	778-317-8567	Michael.nguyen@vch.ca
Back-up Health Contact Darren Molder, SEHO	604-885-8711	604-989-1357	604-885-5200	Darren.molder@vch.ca
Back-up Health Contact Jack Davidson, EHO	604-485-3335	604-483-1981	604-314-0596	Jack.davidson@vch.ca
Medical Health Officer: Dr. Geoff McKee, MHO	604-983-6701	604-842-2357	604-983-6715	geoff.mckee@vch.ca

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Location of Water Source(s)

Directions to Site: 1.2 KM SE of Lund Harbour along Highway 101

Attach photo's: see next page

GPS settings: (if Known) 49.976832 N 124.748450 W

IN CASE OF EMERGENCY: Enter name of the person responsible for tasks.

If the water in the water system becomes contaminated or you receive an unsatisfactory water result, or in the event of an interruption in the treatment process:

- 1. Shut off water supply, if appropriate.
- 2. **Regan Keil** will notify DWO or back-up health contact.
- 3. Contact other appropriate person(s) from the list of emergency numbers.
- 4. **Regan Keil** will notify any affected water users. Please keep a phone and address list of users and warning signs handy. May need to phone or hand-deliver the notice (and water disinfection procedures) to the users.
- 5. **Regan Keil** will post warning signs.
- 6. **Regan Keil** will coordinate repair.
- 7. Organize alternate source of safe drinking water (if available).

Start-up Procedure

- 1. Identify and correct source of contamination.
- 2. Entire system should be flushed and disinfected. Follow attached guideline.
- 3. Submit water sample(s) to appropriate approved Lab for testing. For bacteriological contamination three negative successive samples are usually required. Contact your DWO to confirm the number of samples necessary.
- 4. Contact DWO for approval to resume use of water supply.

Posting the Emergency Response Plan

The ERP must be posted in a conspicuous location that is easily accessible to the operator and management of the water supply.

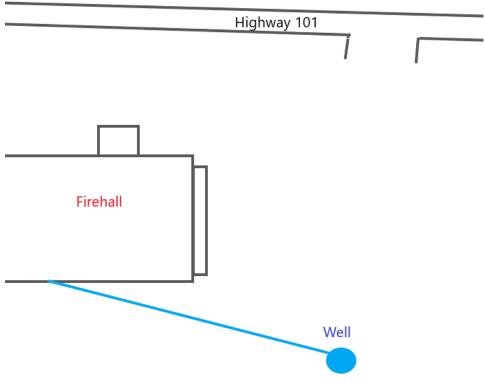
Location of ERP: Upstairs of fire hall by kitchen sink with a copy at the qathet Regional District Maintenance Facility.

Additional Information

- 1. Include a schematic drawing of the water supply system; from the source to the tap. Include all sources, storage, reservoirs, treatment and distribution system.
- 2. Include public notices which may be required in the event of a "boil advisory" or "do not consume" notice. Templates are attached.







DO NOT USE WATER NOTICE

NORTHSIDE VOLUNTEER FIRE DEPARTMENT (qathet Regional District) IS ADVISING ALL USERS THAT THE DOMESTIC WATER SUPPLY IS NOT SAFE FOR DRINKING OR DOMESTIC USE.

**DUE TO THE NATURE OF THE CONTAMINATION, BOILING MAY NOT ACHIEVE SAFE DRINKING WATER

BOIL WATER ADVISORY

Northside Volunteer Fire Department (qathet Regional District) is advising all users to boil their water before using it for drinking, cooking, washing food, or brushing teeth, due to a potential problem with the water system.

The water can be made safe by boiling it for one minute at a rolling boil. Boiled water should be stored in a clean container in the refrigerator.

Alternatively, bottled water can be used.

You will be notified when service is returned to normal and the water is again safe to drink. Thank you for your co-operation in this matter.

