

Well Water

Annual Report
2021

Valley Central

563 Candy Mountain Drive
Slate River ON P7J 0A8

Drinking Water System Number
260009945



Lakehead
Public
Schools

Committed to the success of every student
www.lakeheadschoos.ca



Integrity Acceptance Empathy Respect Responsibility

You belong here

ANNUAL WELL WATER REPORT

LAKEHEAD DISTRICT SCHOOL BOARD

VALLEY CENTRAL PUBLIC SCHOOL

563 Candy Mountain Road

Slate River ON, P7J 0B8

Drinking-water System Number: **260009945**

The Period being reported: **January 1 2021 TO December 31, 2021**

Waterworks Type (O. Reg. 170/03): **SMALL NON-MUNICIPAL NON-RESIDENTIAL DESIGNATED FACILILTY**

Population Served: **247**

Maximum flow rate Capacity: **2.00 Litres per second**

Is this drinking-water system seasonally operated? **NO**

Area serviced by the Drinking-water system: **SCHOOL**

The following questions about designated and public facilities are for Small municipal non residential systems only.

Number of designated facilities served by the drinking-water system: **ONE**

Name of each designated facility: **VALLEY CENTRAL PUBLIC SCHOOL**

Address of each designated facility **563 Candy Mountain Rd.**

Slate River ON, P7J 0B8

Interested Authority for each designated facility served: **MINISRTY OF EDUCATION**

Number of Public facilities served by the drinking-water system: **N/A**

Name of each public facility served by the drinking-water system: **N/A**

1. DESCRIPTION OF THE SYSTEM:

Source(s) of raw water:

✓ **Trucked city water**

Groundwater

Surface

Ground water under direct influence of surface water

If the source is groundwater or GUDI:

Groundwater: **NO**

GUDI: **NO**

Number of wells: **Zero**

Sample location names:

Raw: **RESIVOIR OUTLET**

Treated Water: **PUMP ROOM**

List of chemicals used: **Chlorine**

Does the Drinking-water system have disinfection: **YES**

Disinfection methods: (Check the boxes that apply)

- Chloramination
- Chlorination
- Chlorine Dioxide
- Ozonation
- UltraViolet
- Others – Specify

Treatment type: (Check the boxes that apply)

- Coagulation
- Flocculation
- Sedimentation
- Filtration
- Filter Medium
- Membrane Filtration
- Membrane Filtration Type
- Alkalinity Adjustment
- pH Adjustment
- Clarifier- Sludge Blanket
- Clarifier – Upflow
- Dissolved Air Flotation
- Fluoridation
- Iron Sequestering
- Softening
- Stripping
- Taste and Odour Control
- Zebra Mussel Control

2. Adverse Results

Total number of adverse results during this reporting period for microbiological, chemical, chlorine residual, malfunction of other disinfection equipment, turbidity: For each incident of adverse result please list the following:

No adverse conditions for this reporting period.

3. Summary of results

Microbiological parameters:

LOCATION	Number taken	Range of E. coli or Fecal results (Min-Max)	Range of Total coliform results (Min-Max)	Range of Background or HPC results (Min – Max)
Raw	12	0	0	ABSENT
Distribution	24	ABSENT	ABSENT	0 TO 96

4) Chemical testing done under Schedule 13 or 14 or 15 during the period covered by the report.

a) INORGANIC PARAMETERS (including lead and nitrate and nitrite)

Parameter	Sampling date in this reporting period	Result Value mg/L
Nitrate and Nitrite as N	June	0.350
Nitrate-N		0.350
Nitrite-N		<0.010
Nitrate and Nitrite as N	September	0.303
Nitrate-N		0.303
Nitrite-N		<0.010
Nitrate and Nitrite as N	December	0.380
Nitrate-N		0.380
Nitrite-N		<0.010
Nitrate and Nitrite as N	March	0.365
Nitrate-N		0.365
Nitrite-N		<0.010
Lead (Pb) Standing	May 2021	4A <1.0
Lead (Pb) Flushed		4B <1.0
		5A <1.0
		5B <1.0
		6A 5.5
		6B 2.0

**5 Year sampling results were completed in 2020.
Next 60 month tests are due in 2025.**

5. For a parameter not required during this reporting period, please report the most recent results for that parameter:

5.1 Parameter Name: **Fluoride**

New water system commissioned Sept 2015 uses trucked city water and has eliminated this parameter.

5.2 Parameter Name: **Sodium**

New water system commissioned Sept 2015 uses trucked city water and has eliminated this parameter.

6. Major Expenses incurred during the period covered by the report

To install required equipment: **N/A**

To repair equipment: **N/A**

To replace equipment: **N/A**

7. Providing information relating to compliance with the regulation:

A copy of the annual report given to each designated facility served by the drinking-water system;

Yes

A copy of the annual report given to each Interested Authority of each designated facility served by the drinking-water system

Yes, the Ministry of Education

A copy of the annual report will be provided to every person who requests a copy

Yes, by contacting the school office or the Board's web site.

Means that were used to share the information in this annual report:

Web www.lakeheadschoools.ca

Date of the report: May 5, 2022

Name of the Author: Kyle Ulvang

Address of the author: 2135 SILLS ST. THUNDER BAY, ONT.

Telephone number of the author: 625-5177

Email address of the author: Kyle_Ulvang@lakeheadschoools.ca