

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

Drinking-Water System Number:	260003162
Drinking-Water System Name:	Community of Stouffville
Drinking-Water System Owner:	Town of Whitchurch-Stouffville
Drinking-Water System Category:	WD 1
Period being reported:	January 1 st , 2004 to December 31 st , 2004

<p><u>Complete if your Category is Large Municipal Residential or Small Municipal Residential</u></p> <p>Does your Drinking-Water System serve more than 10,000 people? Yes [X] No []</p> <p>Is your annual report available to the public at no charge on a web site on the Internet? Yes [X] No []</p> <p>Location where Summary Report required under O. Reg. 170/03 Schedule 22 will be available for inspection.</p> <div style="border: 1px solid black; padding: 5px;"> Town of Whitchurch-Stouffville Public Works Department 37 Sandiford Drive 4th Floor Stouffville, ON L4A 7X5 </div>	<p><u>Complete for all other Categories.</u></p> <p>Number of Designated Facilities served: <input style="width: 100px; height: 20px;" type="text"/></p> <p>Did you provide a copy of your annual report to all Designated Facilities you serve? Yes [] No []</p> <p>Number of Interested Authorities you report to: <input style="width: 100px; height: 20px;" type="text"/></p> <p>Did you provide a copy of your annual report to all Interested Authorities you report to for each Designated Facility? Yes [] No []</p>
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Note: For the following tables below, additional rows or columns may be added or an appendix may be attached to the report

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

Drinking Water System Name	Drinking Water System Number
None – Not Applicable	

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 [X] Not applicable

Indicate how you notified system users that your annual report is available, and is free of charge.

Public access/notice via the web

Public access/notice via Government Office

Public access/notice via a newspaper

Public access/notice via Public Request

Public access/notice via a Public Library

Public access/notice via other method _____

Describe your Drinking-Water System

Community of Stouffville Water Distribution System

The water distribution system for the 12,000 residents and businesses of the Community of Stouffville is owned and operated by the Town of Whitchurch-Stouffville. At present this water system consists of approximately 46 kilometres of water main, 500 + water main valves and 340 + hydrants.

The safe operation and maintenance of this system is the responsibility of the Town's Public Works Department staff who have been certified by the Ministry of the Environment of Ontario (M.O.E.).

To ensure that water quality meets provincial standards Town staff routinely collect samples throughout the system. These are sent to the York-Durham Regional Laboratory, an M.O.E. accredited facility, where microbiological, organic and inorganic tests are performed. In addition to these analyses, the Public Works Department ensures the delivery of safe water by checking for the presence of chlorine residuals in the system on a daily basis.

The supply of water to the Stouffville distribution system is the responsibility of The Regional Municipality of York. Currently the Region owns, operates and maintains five (5) ground production wells at three (3) sites, a ground level reservoir and an elevated storage tank for this purpose in accordance with M.O.E. requirements. For additional information contact The Regional Municipality of York, Water and Wastewater Branch, 17250 Yonge Street, Newmarket, Ontario L3Y 6Z1, telephone: 905-895-1200 or visit their website at www.region.york.on.ca.

List all water treatment chemicals used over this reporting period

Not applicable

No chemicals introduced into the Distribution System.

Treatment Chemicals added at sources only by Regional Municipality of York

Were any significant expenses incurred to?

Install required equipment

Repair required equipment

Replace required equipment

Please provide a brief description and a breakdown of monetary expenses incurred

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
April 19, 2004	Free chlorine residual	0	mg/l	Problem on private property only - softener serviced & residuals restored	April 19, 2004
August 16, 2004	Total coliforms	Presence using P-A test	P-A/100 ml confirmed	Flushing and re-sampling	August 19, 2004
August 18, 2004	Total coliforms	1	CFU per 100 ml	Flushing and re-sampling	August 23, 2004
September 1, 2004	Total coliform	P-A/100 ml	CFU	Flush and re-sampling	September 3, 2004

Microbiological testing done under the Schedule 10, 11 or 12 of Regulation 170/03, during this reporting period.

	Number of Samples	Range of E.Coli Or Fecal Results (min #)-(max #)	Range of Total Coliform Results (min #)-(max #)	Number of HPC Samples	Range of HPC Results (min #)-(max #)
Raw					
Treated					
Distribution	425	0 – 0	0 – 1	197	<1 to 220

Operational testing done under Schedule 7, 8 or 9 of Regulation 170/03 during the period covered by this Annual Report.

	Number of Grab Samples	Range of Results (min #)-(max #)
Turbidity		
Chlorine	779	0 – 1.82
Fluoride (If the DWS provides fluoridation)		

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

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

Summary of additional testing and sampling carried out in accordance with the requirement of an approval, order or other legal instrument.

Date of legal instrument issued	Parameter	Date Sampled	Result	Unit of Measure

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

Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
Antimony				
Arsenic				
Barium				
Boron				
Cadmium				
Chromium				
Lead	Jun 14/04	<0.0007	mg/l	
Mercury				
Selenium				
Sodium				
Uranium				
Fluoride				
Nitrite				
Nitrate				

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

Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
Alachlor				
Aldicarb				
Aldrin + Dieldrin				
Atrazine + N-dealkylated metabolites				
Azinphos-methyl				
Bendiocarb				
Benzene				
Benzo(a)pyrene				
Bromoxynil				
Carbaryl				
Carbofuran				
Carbon Tetrachloride				
Chlordane (Total)				
Chlorpyrifos				
Cyanazine				

Diazinon				
Dicamba				
1,2-Dichlorobenzene				
1,4-Dichlorobenzene				
Dichlorodiphenyltrichloroethane (DDT) + metabolites				
1,2-Dichloroethane				
1,1-Dichloroethylene (vinylidene chloride)				
Dichloromethane				
2-4 Dichlorophenol				
2,4-Dichlorophenoxy acetic acid (2,4-D)				
Diclofop-methyl				
Dimethoate				
Dinoseb				
Diquat				
Diuron				
Glyphosate				
Heptachlor + Heptachlor Epoxide				
Lindane (Total)				
Malathion				
Methoxychlor				
Metolachlor				
Metribuzin				
Monochlorobenzene				
Paraquat				
Parathion				
Pentachlorophenol				
Phorate				
Picloram				
Polychlorinated Biphenyls(PCB)				
Prometryne				
Simazine				
THM (NOTE: show latest annual average)	Nov 15/04	0.0201	mg/l	
Temephos				
Terbufos				
Tetrachloroethylene				
2,3,4,6-Tetrachlorophenol				
Triallate				
Trichloroethylene				
2,4,6-Trichlorophenol				
2,4,5-Trichlorophenoxy acetic acid (2,4,5-T)				
Trifluralin				
Vinyl Chloride				

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

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