



Union Water Supply System Inc.

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SENT BY: EMAIL
January 30, 2025

419 Notre Dame Street
Belle River, Ontario
N8L 0P8

Attention: Mr. Tyson Cragg, Chief Administration Officer

Mr. Cragg,

RE: Annual Report (2023) Requirement Section 11, Reg. 170/03

Attached is the Annual Report (Section 11, Reg. 170/03) for the Lakeshore Water Distribution System supplied by the Union Water Supply System (UWSS) Inc. and prepared on behalf of your distribution system.

The Annual Report must be prepared before February 28, 2025, which requirement is now satisfied. It must also be provided to all members of Council, given at no charge to the public on request and posted on the municipal website.

Please call me if you have any questions or comments.

Yours truly,

A handwritten signature in blue ink, appearing to read 'R. Bouchard', is written over a light blue horizontal line.

Rodney Bouchard, CEO
Union Water Supply System Inc.

kmj
CC: Garry Punt, Krystal Kalbol, Jason Barlow



Ontario Clean Water Agency
Agence Ontarienne Des Eaux



Annual Performance Report

Lakeshore Distribution System (Union WSS)

Drinking Water System # 220004995

2024

Prepared for the Municipality of Lakeshore

By the Ontario Clean Water Agency

ANNUAL REPORT

Drinking Water System Number:	220004995
Drinking Water System Name:	Lakeshore Distribution System (Union WSS)
Drinking Water System Owner:	The Municipality of Lakeshore
Drinking Water System Category:	Large Municipal Residential
Period being reported:	01-January-2024 to 31-December 2024

<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 [] No [X]</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; width: fit-content;"> <p>Municipality of Lakeshore Office 419 Notre Dame, Belle River, ON</p> </div>	<p><u>Complete for all other Categories</u></p> <p>Number of Designated Facilities served: <div style="border: 1px solid black; padding: 2px; display: inline-block;">N/A</div></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: <div style="border: 1px solid black; padding: 2px; display: inline-block;">N/A</div></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 their drinking water from your system:

Drinking Water System Name	Drinking Water System Number
N/A	N/A

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 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 _____

Describe your Drinking Water System

The Lakeshore Distribution System (Union Water Supply System) includes the area of Lakeshore generally bounded by County Rd. 19, County Rd. 8, and Lakeshore Road 245, Rochester Town line Road, Lakeshore Rd. 131 and Highway 401. The Lakeshore Distribution System (Union Water Supply System) supplies approximately 4222 residents located within the Municipality of Lakeshore. The Lakeshore distribution system (UWSS) is comprised of approximately 148 km of water mains ranging in size from 50 to 300 millimeters in diameter.

List all water treatment chemicals used over this reporting period

N/A

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

Water Meter Replacement: \$493,097 (All Systems)
 AMI Antenna Replacement Project: \$195,998 (All Systems)

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 30, 2024	Microbiological	Illegal hookup to fire hydrant	Abnormal observation	Upstream / downstream / at site sampling	June 3, 2024

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 Results (min #)-(max #)	Range of Total Coliform Results (min #)-(max #)	Number of HPC Samples	Range of HPC Results (min #)-(max #)
Raw	Please see the Annual Report for the Union Water Supply System # 210000853				
Treated	Please see the Annual Report for the Union Water Supply System # 210000853				
Distribution	212	0-0	0-0	104	<10 - 30

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 #)	Unit of Measure
Turbidity	Please see the Annual Report for the Union Water Supply System # 210000853		
Chlorine	368	0.61 – 1.56	mg/L
Fluoride (If the DWS provides fluoridation)	N/A		

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

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
None				

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

Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
Nitrite (N)	08-Jan-2024	<0.05	mg/L	No
Nitrate (N)		0.53	mg/L	No
Ammonia N-Total		<0.05	mg/L	No
Nitrite (N)	03-Apr-2024	<0.05	mg/L	No
Nitrate (N)		0.70	mg/L	No
Ammonia N-Total		0.09	mg/L	No
Nitrite (N)	03-July-2024	< 0.05	mg/L	No
Nitrate (N)		0.42	mg/L	No
Ammonia N-Total		<0.05	mg/L	No
Nitrite (N)	02-Oct-2024	<0.05	mg/L	No
Nitrate (N)		0.13	mg/L	No
Ammonia N-Total		<0.05	mg/L	No

Summary of lead testing under Schedule 15.1 during this reporting period

(applicable to the following drinking water systems; large municipal residential systems, small municipal residential systems, and non-municipal year-round residential systems)

Location Type	Number of Samples	Range of Lead Results (min#) – (max #)	Unit of Measure	Number of Exceedances
Plumbing	N/A	N/A	N/A	N/A
Distribution - Lead	N/A	N/A	N/A	N/A
Distribution - Alkalinity	6	83 – 91	mg/L	N/A
Distribution - pH	6	7.36 – 7.58	N/A	N/A

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

Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
THM	Annual Average	51.50	ug/L	No
HAA	Annual Average	21.40	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
None			