



February 25, 2008

The Corporation of the Municipality of Huron East
 72 Main St. S
 P.O.Box 610
 Seaforth, ON
 N0K 1W0

Attention: Jack McLachlan, Administrator, Clerk-Treasurer

**RE: Vanastra Drinking Water System
 2007 Annual Report**

Dear Jack,

Please find attached the 2007 Annual Operations Report for the Vanastra drinking water system, in accordance with Section 11(1) of O.Reg 170/03. This report covers the period from January 1 to December 31 and meets the requirement of being prepared by February 28 of this year.

Please ensure that a copy of this report is given, without charge, to every person who requests a copy. In addition, please make certain that effective steps are taken to advise residents that copies of the report are available, and of how a copy can be obtained.

Finally, as per Schedule 22 of O.Reg 170/03, please ensure that a copy of the report is given to the members of municipal council no later than March 31, 2008.

If you have any questions regarding the report, we would be pleased to address them and you should contact the undersigned accordingly.

Sincerely,

AMERICAN WATER CANADA CORP.

A handwritten signature in black ink, appearing to read "G Prangley".

Greg Prangley
 QA/QC Compliance Manager, Ontario Region

American Water
 Canada Corp
 701 Main Street West,
 Suite 100
 Hamilton, Ontario
 L8S 1A2

T 905-521-4605
 F 905-521-9613
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 E gprangley@amwater.com

- c. B. Mills, Municipality of Huron East;
- G. Mayhew, AWC Huron East
- J. Wilson, AWC

2007 ANNUAL REPORT FOR WATER SYSTEMS

Part 1 – ANNUAL REPORT (as required by O.Reg. 170/03, Section 11)	
Drinking Water System Number:	210001585
Drinking Water System Name:	Vanastra Water Works
Drinking Water System Owner:	The Corporation of the Municipality of Huron East
Drinking Water System Category:	Large Municipal Residential
Period being reported:	January 1-December 31, 2007

Complete if your Category is Large Municipal Residential or Small Municipal Residential	Complete for all other Categories
Does your Drinking Water System serve more than 10,000 people? <input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	Number of Designated Facilities served:
Is your annual report available to the public at no charge on a web site on the Internet? <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	Did you provide a copy of your annual report to all Designated Facilities you serve? <input type="checkbox"/> Yes <input type="checkbox"/> No
Location where Summary Report required under O. Reg. 170/03 Schedule 22 will be available for inspection. Town Office 72 Main St. S Seaforth, ON	Number of Designated Facilities served: Did you provide a copy of your annual report to all Interested Authorities you report to for each Designated Facility? <input type="checkbox"/> Yes <input type="checkbox"/> No

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

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?

Indicate how you notified system users that your annual report is available, and is free of charge:		
<input checked="" type="checkbox"/> Public access/notice via the web	<input checked="" type="checkbox"/> Public access/notice via Government Office	<input type="checkbox"/> Public access/notice via a newspaper
<input type="checkbox"/> Public access/notice via Public Request	<input type="checkbox"/> Public access/notice via a Public Library	<input type="checkbox"/> Public access/notice via a Public Library

Describe your Drinking Water System
Water Distribution System Class 2 including one underground reservoir and booster station.
The underground single cell reservoir is located at #12, 5 th Avenue, Vanastra. It has a capacity of 1135 m ³ . 3 electric distribution high lift pumps are located on this site. Pump #1 is rated at 6.6 L/s at 48.8 m TDH, pump #2 is rated at 44.2 L/s at 40.2 m TDH, and pump #3 is rated at 105 L/s at 25 m TDH.

This system receives treated water from the Clinton Well Supply distribution system. Chlorine residual is boosted on the inlet side of the reservoir by sodium hypochlorite injection.

List all water treatment chemicals used over this reporting period

12% Sodium hypochlorite solution

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

New VFD pumps purchased (approx. \$14,000)

Provide details of 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	Units	Corrective Action	Corrective Action Date
None					

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	NA	NA	NA	NA	NA
Treated	52	0	0	52	0-45
Distribution	104	0	0	104	0-38

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 #)	Units
Turbidity	365	0.08-0.71	NTU
Chlorine	8760	0.61-5.18	mg/L
Fluoride (If the DWS provides fluoridation)	NA		

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 on the most recent sample results				
Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
Antimony	NA			
Arsenic	NA			
Barium	NA			
Boron	NA			
Cadmium	NA			
Chromium	NA			
Lead	Jan 15/07	ND	mg/L	No
Mercury	NA			
Selenium	NA			
Sodium	Feb 21/05	15	mg/L	NA
Uranium	NA			
Fluoride	NA			
Nitrite	NA			
Nitrate	NA			

Summary of Organic parameters tested during this reporting period on the most recent sample results				
Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
Alachlor	NA			
Aldicarb	NA			
Aldrin + Dieldrin	NA			
Atrazine + N-dealkylated metabolites	NA			
Azinphos-methyl	NA			
Bendiocarb	NA			
Benzene	NA			
Benzo(a)pyrene	NA			
Bromoxynil	NA			
Carbaryl	NA			
Carbofuran	NA			
Carbon Tetrachloride	NA			
Chlordane (Total)	NA			
Chlorpyrifos	NA			
Cyanazine	NA			
Diazinon	NA			
Dicamba	NA			
1,2-Dichlorobenzene	NA			
1,4-Dichlorobenzene	NA			
Dichlorodiphenyltrichloroethane (DDT) + metabolites	NA			
1,2-Dichloroethane	NA			
1,1-Dichloroethylene (vinylidene chloride)	NA			
Dichloromethane	NA			
2,4-Dichlorophenol	NA			
2,4-Dichlorophenoxy acetic acid (2,4-D)	NA			
Diclofop-methyl	NA			
Dimethoate	NA			
Dinoseb	NA			
Diquat	NA			
Diuron	NA			
Glyphosate	NA			

Summary of Organic parameters tested during this reporting period or the most recent sample results				
Heptachlor + Heptachlor Epoxide	NA			
Lindane (Total)	NA			
Malathion	NA			
Methoxychlor	NA			
Metolachlor	NA			
Metribuzin	NA			
Monochlorobenzene	NA			
Paraquat	NA			
Parathion	NA			
Pentachlorophenol	NA			
Phorate	NA			
Picloram	NA			
Polychlorinated Biphenyls(PCB)	NA			
Prometryne	NA			
Simazine	NA			
THM (NOTE: show latest annual average)	2007	9.4	µg/L	No
Temephos	NA			
Terbufos	NA			
Tetrachloroethylene	NA			
2,3,4,6-Tetrachlorophenol	NA			
Triallate	NA			
Trichloroethylene	NA			
2,4,6-Trichlorophenol	NA			
2,4,5-Trichlorophenoxy acetic acid (2,4,5-T)	NA			
Trifluralin	NA			
Vinyl Chloride	NA			

List any Inorganic or Organic parameter(s) that exceeded half the standard prescribed in Schedule 2 of Ontario Drinking Water Quality Standards				
Parameter	Sample Date	Result Value	Unit of Measure	ODWS Criteria

Part 2 – SUMMARY REPORT (as required by O.Reg. 170/03, Schedule 22)

Non-Compliance with Legislations, Regulations, Approvals & Orders

During this period, the Facility was operated in full compliance with the Act, the regulations and the Facility's approval, save and except for the following:

Requirement	Duration of Failure	Measures to Correct the Failure

System Capability Assessment

Comparison of Flow Rates (m³/d):

Month	Average Flow	Maximum Flow
January	251	371
February	269	556
March	215	300
April	217	285
May	253	391
June	254	344
July	239	328
August	231	315
September	221	307
October	253	652
November	215	301
December	200	292
AVERAGE	235	-
MAXIMUM	269	652
SYSTEM CAPACITY	1210	1210
% CAPACITY	19.4%	53.9%