



OPTIONAL ANNUAL REPORT TEMPLATE

Drinking-Water System Number:	260025922
Drinking-Water System Name:	Camp NeeKauNis
Drinking-Water System Owner:	Canadian Yearly Meeting of the Religious Society of Friends (Camp NeeKauNis)
Drinking-Water System Category:	Small Non-Municipal Non-Residential
Period being reported:	2021

<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 []</p> <p>Is your annual report available to the public at no charge on a web site on the Internet? Yes [] 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; height: 100px; width: 100%;"></div>	<p><u>Complete for all other Categories.</u></p> <p>Number of Designated Facilities served:</p> <div style="border: 1px solid black; display: inline-block; padding: 2px;">1</div> <p>Did you provide a copy of your annual report to all Designated Facilities you serve? Yes [x] No []</p> <p>Number of Interested Authorities you report to:</p> <div style="border: 1px solid black; display: inline-block; padding: 2px;">1</div> <p>Did you provide a copy of your annual report to all Interested Authorities you report to for each Designated Facility? Yes [x] 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

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 []



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

Deep Drilled Well (127 ft deep) non-GUDI, disinfected by UV after pretreatment by two filtration units.

The disinfected supply then goes to two separate UV disinfection units each with pretreatment by two filtration units that serve (1) the kitchen and (2) a shower and toilet facility.

List all water treatment chemicals used over this reporting period

None

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



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

PLEASE SEE ATTACHED	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					

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	<i>NOTE: For continuous monitors use 8760 as the number of samples.</i>
Turbidity				
Chlorine				
Fluoride (If the DWS provides fluoridation)				

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	<u>Please see attached</u>			
Arsenic				
Barium				
Boron				
Cadmium				



Chromium				
*Lead				
Mercury				
Selenium				
Sodium				
Uranium				
Fluoride				
Nitrite	<u>Please see attached</u>			
Nitrate	“			

*only for drinking water systems testing under Schedule 15.2; this includes large municipal non-residential systems, small municipal non-residential systems, non-municipal seasonal residential systems, large non-municipal non-residential systems, and small non-municipal non-residential systems

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				
Distribution				

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

Parameter <u>PLEASE SEE ATTACHED</u>	Sample Date	Result Value	Unit of Measure	Exceedance
Alachlor				
Atrazine + N-dealkylated metabolites				
Azinphos-methyl				
Benzene				
Benzo(a)pyrene				
Bromoxynil				
Carbaryl				
Carbofuran				
Carbon Tetrachloride				
Chlorpyrifos				
Diazinon				
Dicamba				
1,2-Dichlorobenzene				
1,4-Dichlorobenzene				
1,2-Dichloroethane				
1,1-Dichloroethylene (vinylidene chloride)				



Dichloromethane				
2,4-Dichlorophenol				
2,4-Dichlorophenoxy acetic acid (2,4-D)				
Diclofop-methyl				
Dimethoate				
Diquat				
Diuron				
Glyphosate				
Malathion				
2-Methyl-4-chlorophenoxyacetic acid				
Metolachlor				
Metribuzin				
Monochlorobenzene				
Paraquat				
Pentachlorophenol				
Phorate				
Picloram				
Polychlorinated Biphenyls (PCB)				
Prometryne				
Simazine				
Terbufos				
Tetrachloroethylene (perchloroethylene)				
2,3,4,6-Tetrachlorophenol				
Triallate				
Trichloroethylene				
2,4,6-Trichlorophenol				
Trifluralin				
Vinyl Chloride				
Trihalomethanes (THM) (NOTE: show latest annual average ug/L)				
Haloacetic acids (HAA) (note: show latest annual average ug/L)				

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

Certificate of Analysis

Sample Receipt Date & Time: 2021-06-25 12:07
 Total Number of Samples Received: 4
 Bacterial Analysis Start Date & Time: 2021-06-25 12:38
 Analysis Date & Time: _____



**Aquatic & Environmental
 Laboratory** Inc.

3239 Penetanguishene Rd.
 Barrie, ON. L4M 4Y8
 Telephone: 705-722-5227
 Fax: 705-722-5224
 Email: aquaenvirolab@gmail.com

REPORT TO:	Water Works Address:
Client: <u>Camp NeeKaunis</u>	<u>40 NeeKaunis Rd. Waubaushene, ON. L0K 2C0</u>
Address: <u>C/O 91a Fourth Ave.</u>	
<u>Ottawa, ON K1S 2L1</u>	
Contact: <u>Kristine Wilson-Yang</u>	Water Works Number: <u>260025922</u>
Email: <u>wilson_yangk@yahoo.ca; ericjpreston@gmail.com</u>	Health Unit: <u>SMDHU</u>
Phone: <u>613-730-4499 or camp 705-538-2357 (seasonal)</u>	Comments:
Fax: _____	
After Hours Contact:	

Total Coliform, E.coli, Background - Method AELAB01-DC Performed by Membrane Filtration
 HPC - Method AELAB02-HPC Performed by Spread Plate
 pH - Method AELAB05-pH Performed by Electrometric Method
 Turbidity - Method AELAB04-Turbidity Performed by Nephelometric Method
 Microcystin - Method AELAB03-Microcystin Performed by ELISA

Regulation:	<u>170/03</u>	<u>319/08</u>	<u>Private</u>
	<u>493/17</u>	<u>N/A</u>	

Date and Time Sampled	Sample ID, Location and Type: R = Raw; T = Entry/Treated; D = Distribution; RC = Raw Water Consumed; REC = Recreational Swimming	Chlorine mg/L		Temp. of Sample (°C/°F)	Laboratory Number	Total Coliform		E.coli		Background		HPC		pH	Turbidity NTU	Microcystin	
		Free	Total			</>	CFU/100 mL	</>	CFU/100 mL	</>	CFU/100 mL	</>	CFU/1 mL			</>	µg/L
2021-06-25 11:14	NH - D				6841	0		0		0							
2021-06-25 11:35	WH - D				6842	0		0		0							
2021-06-25 11:02	W2 - R				6843	0		0		0							
2021-06-25 11:27	Cooks - D				6844	0		0		0							

Results relate only to the items tested. Results apply to sample as received. CFU = Colony Forming Units HPM = Heavy Particulate Matter
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Sample Collection: Kris Wilson-Yang
 Sample Relinquishment: Kris Wilson-Yang

Date Approved 2021-06-28 Approved By KN

Total Coliform	Detection Limit: 0 - 150	Reportable Limit: 1	Microcystin	Detection Limit: 0.150 µg/L	Reportable Limit: ≥ 1.50 µg/L
E.coli	Detection Limit: 0 - 150	Reportable Limit: 1	pH	Detection Limit: 4 - 10	
HPC	Detection Limit: 300	Indicates Deterioration: >500	Turbidity	Detection Limit: 0.10 - 40.0 NTU	

Certificate of Analysis

Sample Receipt Date & Time: 2021-08-12 15:37
 Total Number of Samples Received: 4
 Bacterial Analysis Start Date & Time: 2021-08-12 15:47
 Analysis Date & Time: _____



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REPORT TO:	Water Works Address:
Client: <u>Camp NeeKaunis</u>	<u>40 NeeKaunis Rd. Waubaushene, ON. L0K 2C0</u>
Address: <u>C/O 91a Fourth Ave.</u>	
<u>Ottawa, ON K1S 2L1</u>	
Contact: <u>Kristine Wilson-Yang</u>	Water Works Number: <u>260025922</u>
Email: <u>wilson_yangk@yahoo.ca; ericjpreston@gmail.com</u>	Health Unit: <u>SMDHU</u>
Phone: <u>613-730-4499 or camp 705-538-2357 (seasonal)</u>	Comments:
Fax: _____	
After Hours Contact:	

Total Coliform, E.coli, Background - Method AELAB01-DC Performed by Membrane Filtration
 HPC - Method AELAB02-HPC Performed by Spread Plate
 pH - Method AELAB05-pH Performed by Electrometric Method
 Turbidity - Method AELAB04-Turbidity Performed by Nephelometric Method
 Microcystin - Method AELAB03-Microcystin Performed by ELISA

Regulation:	<input checked="" type="checkbox"/>	170/03	<input type="checkbox"/>	319/08	<input type="checkbox"/>	Private
		493/17		N/A		

Date and Time Sampled	Sample ID, Location and Type: R = Raw; T = Entry/Treated; D = Distribution; RC = Raw Water Consumed; REC = Recreational Swimming	Chlorine mg/L		Temp. of Sample (°C/°F)	Laboratory Number	Total Coliform		E.coli		Background		HPC		pH	Turbidity NTU	Microcystin	
		Free	Total			</>	CFU/100 mL	</>	CFU/100 mL	</>	CFU/100 mL	</>	CFU/1 mL			</>	µg/L
2021-08-12 15:00	NH - D				9518		0		0		0						
2021-08-12 15:00	WH - D				9519		0		0		0						
2021-08-12 15:00	King - D				9521		0		0		0						
2021-08-12 15:00	W2 - R				9520		0		0		0						

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Sample Collection: Eric Preston

Date Approved 2021-08-13

Approved By KN

Sample Relinquishment: _____

Total Coliform	Detection Limit: 0 - 150	Reportable Limit: 1	Microcystin	Detection Limit: 0.150 µg/L	Reportable Limit: ≥ 1.50 µg/L
E.coli	Detection Limit: 0 - 150	Reportable Limit: 1	pH	Detection Limit: 4 - 10	
HPC	Detection Limit: 300	Indicates Deterioration: >500	Turbidity	Detection Limit: 0.10 - 40.0 NTU	

Subcontracting Certificate of Analysis



**Aquatic & Environmental
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Barrie, ON. L4M 4Y8

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Email: aquaenvirolab@gmail.com

Regulation:			
<input checked="" type="checkbox"/> 170/03	<input type="checkbox"/> 319/08	<input type="checkbox"/> Private	
<input type="checkbox"/> 493/17	<input type="checkbox"/> N/A		

Date Sampled: 2021-06-25

Sample Receipt Date: 2021-06-25

REPORT TO:		Water Works Address:		Water Type:	
Client: <u>Camp NeeKaunis</u>		40 NeeKaunis Rd. Waubaushene, ON. L0K 2C0		<input checked="" type="checkbox"/> Drinking Water	
Address: <u>C/O 91a Fourth Ave.</u>				<input type="checkbox"/> Sewage/ Waste Water	
<u>Ottawa, ON K1S 2L1</u>				<input type="checkbox"/> Soil	
Contact: <u>Kristine Wilson-Yang</u>		Water Works Number: <u>260025922</u>		<input type="checkbox"/> Other:	
Email: <u>wilson_yangk@yahoo.ca; ericjpreston@gmail.com</u>		Health Unit: <u>SMDHU</u>			
Phone: <u>613-730-4499 or camp 705-538-2357 (seasonal)</u>		Comments:			
Fax: _____					
After Hours Contact:					

Parameter	Reference Method	Reported Detection Limit	Unit	Guideline/ Standard	Lab # and Location	NM-222 NKN	Lab # and Location
					Result	Result	
Nitrate as N	INOR-93-6004	0.05	mg/L	10	< 0.05		
Nitrite as N	INOR-93-6004	0.05	mg/L	1	< 0.05		

Analysis subcontracted to and performed by a lab accredited and/or licenced to perform this specific analysis. Results relate only to the items tested. Results apply to sample as received. Report not to be reproduced, except in full, without written approval of Aquatic and Environmental Laboratory Inc.

Sample Collection: Kris Wilson-Yang Date Approved 2021-07-02 Approved By AF
 Sample Relinquishment: Kris Wilson-Yang

Subcontracting Certificate of Analysis



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Barrie, ON. L4M 4Y8

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Email: aquaenvirolab@gmail.com

Regulation:			
<input checked="" type="checkbox"/>	170/03	<input type="checkbox"/>	318/08;319/08
<input type="checkbox"/>	Private	<input type="checkbox"/>	N/A

Date Sampled: 2019-09-10 Sample Receipt Date: 2019-09-10

REPORT TO:		Water Works Address:		Water Type:	
Client: <u>Camp NeeKaunis</u>		40 NeeKaunis Rd. Waubaushene, ON. L0K 2C0		<input checked="" type="checkbox"/>	Drinking Water
Address: <u>C/O 91a Fourth Ave.</u>				<input type="checkbox"/>	Sewage/ Waste Water
Contact: <u>Kristine Wilson-Yang</u>				<input type="checkbox"/>	Soil
Email: <u>wilson_yangk@yahoo.ca; ericjpreston@gmail.</u>		Water Works Number: <u>260025922</u>		<input type="checkbox"/> Other:	
Phone: <u>613-730-4499 or camp 705-538-2357 (seasonal)</u>		Health Unit: <u>SMDHU</u>			
Fax: _____		Comments:			
After Hours Contact: _____					

Parameter	Reference Method	Reporting Limit	Unit	Guideline/Standard	Lab # and Location	NM-491 Kitchen	Lab # and Location	
					Result	Result		
Schedule 24 - Volatile Organic Compunds								
Chlorobenzene	VOL 5001	0.10	µg/L		< 0.10			

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Date Approved: 2021-03-10 Approved By: KN

Subcontracting Certificate of Analysis

3239 Penetanguishene Rd.

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Fax: 705-722-5224

Email: aquaenvirolab@gmail.com



Aquatic & Environmental Laboratory Inc.

Regulation:			
<input checked="" type="checkbox"/>	170/03	<input type="checkbox"/>	318/08;319/08
<input type="checkbox"/>	Private	<input type="checkbox"/>	N/A

Date Sampled: 2019-09-10

Sample Receipt Date: 2019-09-10

REPORT TO:	Water Works Address:	Water Type:
Client: <u>Camp NeeKaunis</u>	40 NeeKaunis Rd. Waubaushene, ON. L0K 2C0	<input checked="" type="checkbox"/> Drinking Water
Address: <u>C/O 91a Fourth Ave.</u>		<input type="checkbox"/> Sewage/ Waste Water
Contact: <u>Kristine Wilson-Yang</u>		<input type="checkbox"/> Soil
Email: <u>wilson_yangk@yahoo.ca; ericjpreston@gmail.</u>	Water Works Number: <u>260025922</u>	<input type="checkbox"/> Other:
Phone: <u>613-730-4499 or camp 705-538-2357 (seasonal)</u>	Health Unit: <u>SMDHU</u>	
Fax:	Comments:	
After Hours Contact:		

Parameter	Reference Method	Reporting Limit	Unit	Guideline/ Standard	Lab # and Location	NM-491 Kitchen	Lab # and Location
					Result	Result	
Schedule 23 - Metals							
Total Antimony	MET-93-6103	0.60	µg/L	6	< 0.60		
Total Arsenic	MET-93-6103	0.60	µg/L	25	< 0.60		
Total Barium	MET-93-6103	0.50	µg/L	1000	25.7		
Total Boron	MET-93-6103	10.0	µg/L	5000	866		
Total Cadmium	MET-93-6103	0.20	µg/L	5	< 0.20		
Total Chromium	MET-93-6103	0.60	µg/L	50	0.93		
Total Selenium	MET-93-6103	0.80	µg/L	50	< 0.80		
Total Uranium	MET-93-6103	0.20	µg/L	20	0.95		
Total Mercury	MET-93-6100	0.10	µg/L	1	< 0.10		
Schedule 24 - Volatile Organic Compounds							
Vinyl Chloride	VOL-91-5001	0.17	µg/L	2	< 0.17		
1,1 Dichloroethene	VOL-91-5001	0.30	µg/L	14	< 0.30		
Dichloromethane	VOL-91-5001	0.30	µg/L	50	< 0.30		
1,2- Dichloroethane	VOL-91-5001	0.20	µg/L	5	< 0.20		
Carbon Tetrachloride	VOL-91-5001	0.20	µg/L	5	< 0.20		
Benzene	VOL-91-5001	0.20	µg/L	5	< 0.20		
Trichloroethylene	VOL-91-5001	0.20	µg/L	5	< 0.20		
Toluene	VOL-91-5001	0.20	µg/L	60	< 0.20		
Tetrachloroethene	VOL-91-5001	0.20	µg/L	10	< 0.20		
Ethylbenzene	VOL-91-5001	0.10	µg/L	140	< 0.10		
Xylenes (Total)	VOL-91-5001	0.22	µg/L	90	< 0.22		
1,2- Dichlorobenzene	VOL-91-5001	0.10	µg/L	200	< 0.10		
1,4- Dichlorobenzene	VOL-91-5001	0.10	µg/L	5	< 0.10		

Analysis subcontracted to and performed by a lab accredited and/or licenced to perform this specific analysis.

Results relate only to aliquot submitted.

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Date Approved: 2019-09-23

Approved By:  _____

Subcontracting Certificate of Analysis



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 Barrie, ON. L4M 4Y8
 Telephone: 705-722-5227
 Fax: 705-722-5224
 Email: aquaenvirolab@gmail.com

Regulation:			
<input checked="" type="checkbox"/>	170/03	<input type="checkbox"/>	318/08;319/08
<input type="checkbox"/>	Private	<input type="checkbox"/>	N/A

Date Sampled: 2019-09-10 Sample Receipt Date: 2019-09-10

REPORT TO:	Water Works Address:	Water Type:
Client: <u>Camp NeeKaunis</u>	40 NeeKaunis Rd. Waubauskene, ON. L0K 2C0	<input checked="" type="checkbox"/> Drinking Water
Address: <u>C/O 91a Fourth Ave.</u>		<input type="checkbox"/> Sewage/ Waste Water
Contact: <u>Kristine Wilson-Yang</u>		<input type="checkbox"/> Soil
Email: <u>wilson_yangk@yahoo.ca; ericjpreston@gmail.</u>	Water Works Number: <u>260025922</u>	<input type="checkbox"/> Other:
Phone: <u>613-730-4499 or camp 705-538-2357 (seasonal)</u>	Health Unit: <u>SMDHU</u>	
Fax:	Comments:	
After Hours Contact:		

Parameter	Reference Method	Reporting Limit	Unit	Guideline/Standard	Lab # and Location	NM-491 Kitchen	Lab # and Location
					Result	Result	
Glyphosate in Water							
Glyphosate	TO-1320	20	µg/L		< 20		
Schedule 24 - Benzo(a)pyrene							
Benzo(a)pyrene	ORG-91-5105	0.01	µg/L	0.01	< 0.01		
Schedule 24 - Pesticides & PCBs							
Carbofuran	ORG-91-5101	2.5	µg/L	90	< 2.5		
Carbaryl	ORG-91-5101	5	µg/L	90	< 5		
Diuron	ORG-91-5101	10	µg/L	150	< 10		
Triallate	ORG-91-5101	1	µg/L	230	< 1		
Diquat	ORG-91-5102	5	µg/L	70	< 5		
Paraquat	ORG-91-5102	1	µg/L	10	< 1		
PCB's	ORG-91-5112	0.1	µg/L	3	< 0.1		
Bromoxynil	ORG-91-5110	0.3	µg/L	5	< 0.3		
Diacamba	ORG-91-5110	0.5	µg/L	120	< 0.5		
2,4-D	ORG-91-5110	0.2	µg/L	100	< 0.2		
2,4-Dichlorophenol	ORG-91-5110	0.5	µg/L		< 0.5		
Diclofop-methyl	ORG-91-5110	0.5	µg/L	9	< 0.5		
Pentachlorophenol	ORG-91-5110	0.5	µg/L	60	< 0.5		
Picloram	ORG-91-5110	0.5	µg/L		< 0.5		
2,3,4,6- Tetrachlorophenol	ORG-91-5110	0.1	µg/L		< 0.1		
2,4,6- Trichlorophenol	ORG-91-5110	0.5	µg/L		< 0.5		

Analysis subcontracted to and performed by a lab accredited and/or licenced to perform this specific analysis.
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Date Approved: 2019-09-23 Approved By:

Subcontracting Certificate of Analysis

3239 Penetanguishene Rd.

Barrie, ON. L4M 4Y8

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Fax: 705-722-5224

Email: aquaenvirolab@gmail.com



Aquatic & Environmental Laboratory Inc.

Regulation:			
<input checked="" type="checkbox"/>	170/03	<input type="checkbox"/>	318/08;319/08
<input type="checkbox"/>	Private	<input type="checkbox"/>	N/A

Date Sampled: 2019-09-10

Sample Receipt Date: 2019-09-10

REPORT TO:	Water Works Address:	Water Type:
Client: <u>Camp NeeKaunis</u>	40 NeeKaunis Rd. Waubaushene, ON. L0K 2C0	<input checked="" type="checkbox"/> Drinking Water
Address: <u>C/O 91a Fourth Ave.</u>		<input type="checkbox"/> Sewage/ Waste Water
Contact: <u>Kristine Wilson-Yang</u>		<input type="checkbox"/> Soil
Email: <u>wilson_yangk@yahoo.ca; ericjpreston@gmail.</u>	Water Works Number: <u>260025922</u>	<input type="checkbox"/> Other:
Phone: <u>613-730-4499 or camp 705-538-2357 (seasonal)</u>	Health Unit: <u>SMDHU</u>	
Fax:	Comments:	
After Hours Contact:		

Parameter	Reference Method	Reporting Limit	Unit	Guidelien/ Standard	Lab # and Location	NM-491 Kitchen	Lab # and Location
					Result	Result	
Schedule 24 - Pesticides & PCBs							
MCPA	ORG-91-5110	5.0	µg/L		< 500		
Phorate	ORG-91-5103	0.5	µg/L	2	< 0.5		
Dimethoate	ORG-91-5103	2.5	µg/L	20	< 2.5		
Terbufos	ORG-91-5103	0.5	µg/L	1	< 0.5		
Diazinon	ORG-91-5103	1.0	µg/L	20	< 1.0		
Malathion	ORG-91-5103	5.0	µg/L	190	< 5.0		
Chlorpyrifos	ORG-91-5103	1.0	µg/L	90	< 1.0		
Azinphos-methyl	ORG-91-5103	2.0	µg/L	20	< 2.0.		
De-ethylated Atrazine	ORG-91-5104	0.5	µg/L		< 0.5		
Atrazine + N-dealkylated metabolites	ORG-91-5104	0.5	µg/L	5	< 0.5		
Trifluralin	ORG-91-5104	2.0	µg/L	45	< 2.0		
Simazine	ORG-91-5104	1.0	µg/L	10	< 1.0		
Atrazine	ORG-91-5104	0.5	µg/L		< 0.5		
Metribuzin	ORG-91-5104	0.25	µg/L	80	< 0.25		
Alachlor	ORG-91-5104	0.25	µg/L	5	< 0.25		
Prometryne	ORG-91-5104	0.25	µg/L	1	< 0.25		
Metolachlor	ORG-91-5104	0.11	µg/L	50	< 0.11		

Analysis subcontracted to and performed by a lab accredited and/or licenced to perform this specific analysis.

Results relate only to aliquot submitted.

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Date Approved: 2019-09-23

Approved By: 