These Notice forms apply to drinking water system owners and operators (Owners/Operators) and Ministry of the Environment and Climate Change (MOECC) licensed laboratories (Licensed Laboratories) regulated by Drinking Water Systems Regulation, Ontario Regulation 170/03 (O. Reg. 170/03).

Immediate Report of Adverse Results

Section 16-3(3) of Schedule 16 of O. Reg. 170/03 sets out the requirements for Owners/Operators and Licensed Laboratories to make an immediate report of adverse test results under O.Reg. 170/03 by speaking in person or by telephone to the MOECC’s Spills Action Centre (SAC), at 1 800 268-6060 or 416 325-3000, the local Medical Officer of Health/Health Unit (Health Unit) and the Owner/Operator (Immediate Report).

[Adverse test results for trihalomethanes (THMs) do not require an Immediate Report; see section below.]

Written Notice within 24 hours of the Immediate Report

Within 24 hours of an Immediate Report, Section 16-7(3) of Schedule 16 requires that Owners/Operators and Licensed Laboratories must provide written notice to the MOECC and the Health Unit, by fax or e-mail. Licensed Laboratories must complete and submit Sections 1 and 3 of this Notice. Owners/Operators must complete and submit Section 2A of this Notice. Note: Owners/Operators must complete and submit Section 3 of this Notice for any adverse result of an operational parameter.

Notice Within 7 Days of Issue Resolution

Within 7 days after the issue has been resolved, Section 16-9(1) of Schedule 16 requires that Owners/Operators must provide a written notice, Section 2B of this Notice, to SAC and the Health Unit, summarizing the actions taken and the results achieved. This written notice must also be sent to the interested authority for any designated facility (if applicable) within 30 days.

Owners and Operators must follow any additional corrective actions required by the Health Unit.

Total Trihalomethanes (THMs)

As of January 2016, Sections 16-6 and 16-7 of Schedule 16 requires that Owners/Operators calculate the running annual average (RAA) for THMs and report any adverse test result in writing to the MOECC and the Health Unit within 7 calendar days of the end of the calendar quarter that produced the adverse test result. The written notice is submitted using Section 2C of this Notice. RAA calculation is outlined in Schedule 13-5 of O. Reg. 170/03.

Immediate oral notification is no longer required for this parameter.

As of January 2016, Licensed Laboratories that upload THM test results into the Ministry’s data system and report the results to Owners/Operators within 48 hours of the test result being authorized at the laboratory, are exempt from reporting the RAA. If the data is not uploaded, the RAA must be calculated by the laboratory and the laboratory must complete and submit the written notice form and the analytical results (Section 1 and Section 3).

Note: Small municipal residential systems and non-municipal year round residential systems that serve designated facilities also must notify the operator of each designated facility served by their system.

The 'Trihalomethane and Haloacetic Acid Sampling and Reporting Requirements Technical Bulletin' provides full details on the changes to the reporting requirements and provides examples for calculating quarterly and running annual averages. The Technical Bulletin is available on the ministry’s web page via the following link: https://www.ontario.ca/page/total-trihalomethane-thm-reporting-requirements-technical-bulletin

SAC fax: 1 800 268-6061 or 416 325-3011
SAC e-mail: moe_sac.moe@ontario.ca
Provincial standards for water quality are set out in:

Safe Drinking Water Act, 2002
Ontario Regulation 169/03 (Water Quality Standards)
Ontario Regulation 170/03 (Drinking Water Systems)

Failure to notify these parties in accordance with the Regulation constitutes an offence under the Safe Drinking Water Act. A copy of this form may be accessed through the MOECC public web site (www.ontario.ca/drinkingwater) or by contacting any MOECC office.

Collection of information on this form is done in accordance with the Safe Drinking Water Act, 2002 and its Regulations. Information gathered herein, including personal information, is governed by the Freedom of Information and Protection of Privacy Act (FIPPA) and may be disclosed to other government agencies (including municipal health unit employees) pursuant to 'Section 42' of the FIPPA for the consistent purpose of administering any Act or program that pertains to drinking water safety. For questions and concerns, please contact the Ministry of Environment and Climate Change at 1 866 793-2588.
### Notice of Adverse Test Results and Issue Resolution (Schedule 16)

#### Drinking Water Systems Regulation (O. Reg. 170/03)

**Fields marked with an asterisk (*) are mandatory.**

### Section 1 – Written Notice By Licensed Laboratory (For THM reporting see Section 2C)

#### Indicators of Adverse Water Quality

- **AWQI Number:** 138775
- **Is this a re-sample?** Yes
- **Microbiological:**
- **Physical/Chemical:**
- **Radiological:**
- **licence/Order/Certificate Requirement:**

#### Licensed Laboratory Information

- **Licensed Laboratory Name:** Caduceon Environmental Labs
- **MOECC Laboratory License Number:** 2276
- **Unit/Suite Number:** 5
- **Street Number:** 3201
- **Street Name:** Marentette Ave
- **City/Town:** Windsor
- **Province:** ON
- **Telephone Number (including area code):** 519 966-9541
- **Email Address:** sgalijs@caduceonlabs.com

#### Licensed Laboratory Emergency Contact

- **Last Name:** Merko
- **First Name:** Lorina
- **Telephone Number (including area code):** 519 966-9541

#### Drinking Water System (DWS) Information

- **DWS Name:** Town of Tecumseh
- **DWS Number:** 260004969
- **Telephone Number (including area code):** 519 991-7071
- **Location:** Distribution
- **Email Address:** dberthiaume@tecumseh.ca

#### DWS Emergency Contact Name

- **Last Name:** Berthiaume
- **First Name:** Denis
- **Telephone Number (including area code):** 519 991-7071

#### Oral Notification to DWS Owner - Person Contacted

- **Last Name:** Berthiaume
- **First Name:** Denis
- **Position of Person Contacted:** Manager
- **Telephone Number (including area code):** 519 991-7071
- **Fax Number (including area code):**
- **Date (yyyy/mm/dd):** 2018/02/21
- **Time (hh:mm):** 3:30 PM
- **Email Address:** dberthiaume@tecumseh.ca

#### Oral Notification to Health Unit - Person Contacted

- **Health Unit Name:** WECHU
- **Last Name:** Wong
- **First Name:** Philip
Fields marked with an asterisk (*) are mandatory.

Position of Person Contacted *
Manager

<table>
<thead>
<tr>
<th>Telephone Number (including area code)</th>
<th>Fax Number (including area code)</th>
<th>Date (yyyy/mm/dd)</th>
<th>Time (hh:mm)</th>
</tr>
</thead>
<tbody>
<tr>
<td>519 258-2146</td>
<td></td>
<td>2018/02/21</td>
<td>3:33 PM</td>
</tr>
</tbody>
</table>

Email Address
pwong@wechu.org

Oral Notifcation To Spills Action Centre (SAC) - Person Contacted

<table>
<thead>
<tr>
<th>Last Name</th>
<th>First Name</th>
</tr>
</thead>
<tbody>
<tr>
<td>Capicciotti</td>
<td>Brenda</td>
</tr>
</tbody>
</table>

Position of Person Contacted *
Environmental Officer

<table>
<thead>
<tr>
<th>Person Notifying</th>
<th>Date (yyyy/mm/dd)</th>
<th>Time (hh:mm)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Microbiology Analyst</td>
<td>2018/02/21</td>
<td>3:37 PM</td>
</tr>
</tbody>
</table>

Name *
Lana Galijas

Signature
SGalijas

Date (yyyy/mm/dd) *
2018/02/21

Note: Use Section 3 to attach laboratory report.
### Section 3 – Adverse Analytical Results

<table>
<thead>
<tr>
<th>Laboratory Submission ID</th>
<th>Laboratory Sample ID</th>
<th>Date/Time – Sample Collected (yyyy/mm/dd)</th>
<th>Sample Type and Sample Location</th>
<th>Count / 100 mL</th>
<th>P-A / 100mL Confirmed</th>
<th>Date Data Approved (yyyy/mm/dd)</th>
<th>Chlorine Residual (mg/L)</th>
</tr>
</thead>
<tbody>
<tr>
<td>B18-04324</td>
<td>7</td>
<td>2018/02/20 10:45</td>
<td>Manning/County Rd #34/Auto Flusher</td>
<td>Total Coliforms (TC): 32</td>
<td>E. coli (EC): 0</td>
<td>2018/02/21</td>
<td>F: 0.66 mg/L C: mg/L</td>
</tr>
</tbody>
</table>

### Physical or Chemical or Radiological Testing

<table>
<thead>
<tr>
<th>Laboratory Submission ID</th>
<th>Laboratory Sample ID</th>
<th>Date/Time – Sample Collected (yyyy/mm/dd)</th>
<th>Sample Type and Sample Location</th>
<th>Parameter</th>
<th>Result(s)</th>
<th>Units of Measure/Standard</th>
<th>Date Data Approved (yyyy/mm/dd)</th>
</tr>
</thead>
<tbody>
<tr>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td>n/a</td>
<td></td>
<td>2018/02/21</td>
</tr>
</tbody>
</table>
Fields marked with an asterisk (*) are mandatory.

Other Information Attached  Yes  No

<table>
<thead>
<tr>
<th>Attached File Name</th>
<th>Created</th>
<th>Modified</th>
<th>Size (MB)</th>
<th>Remove Selected File</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Number of attachments 0

Please describe any other direction prescribed by Health Unit or additional actions taken/results achieved

---

Provided By *
Lana Galijas

Signature
SGalijas

Date (yyyy/mm/dd) *
2018/02/21

* Only for Drinking Water Systems that obtained exemptions from treatment requirements under O. Reg. 170/03.
** Refers to treated water samples collected downstream of treatment equipment.
*** Indicate Free or Combined Chlorine Residual in mg/l for treated drinking water. Enter N/A if no chlorination is provided.
**** When reporting Trihalomethanes, please include the latest quarterly average result and the calculated running annual average value.
used In place of
Section 2 A Written Notice By Drinking Water System

Ontario Ministry of Health and Long-Term Care

Notice of Adverse Test Results and Issue Resolution
Small Drinking Water Systems Regulation (O.Reg. 319/08) and Transitional - Small Drinking Water Systems Regulation (O.Reg. 318/08)

Instructions

The purpose of this form is to notify the small drinking water system operator, local Public Health Unit and the Ministry of Health and Long-Term Care (MOHLTC) of Adverse Water Quality Incidents (AWQI) under s. 9(1) of O. Reg. 319/08 (Small Drinking Water Systems) and schedule 4 of O. Reg. 318/08 (Transitional – Small Drinking Water Systems).

This notice is being initiated by (please check one):

☐ A laboratory (complete sections 1 and 3)

☑ An drinking water system operator (complete section 2)

Please identify the reason and/or adverse observation below (if applicable)

Caduceon Environmental Labs stated an adverse water sample taken from Manning/County Rd #34 auto flusher. Total Coliforms (TC) 32 were found in the sample.
The sample was taken February 20, 2018 as part of the weekly bacteriological samples within the distribution system.
Section 2 – Corrective Action and Issue Resolution

Section 2 is to be completed and provided to the local Board of Health by the drinking water system operator based on discussions with the local Board of Health, within 24 hours of verbal notification. Section 2 should be updated and resubmitted to the local Board of Health within 7 days of the issue resolution.

Verbal Notification to Local Medical Officer of Health

<table>
<thead>
<tr>
<th>Name of Person Contacted</th>
<th>Last Name</th>
<th>First Name</th>
<th>Position Title</th>
<th>Date (yyyy/mm/dd)</th>
<th>Time (hh:mm)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Wong</td>
<td>Philip</td>
<td>Manager</td>
<td></td>
<td>2018/02/21</td>
<td>3:35 AM</td>
</tr>
</tbody>
</table>

Drinking Water Systems Contact

<table>
<thead>
<tr>
<th>Name of Person Contacted</th>
<th>Last Name</th>
<th>First Name</th>
<th>Position Title</th>
<th>Telephone Number</th>
<th>Fax Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Berthiaume</td>
<td>Denis</td>
<td>Manager, water &amp; wastewater</td>
<td>519-735-2184 ext. 141</td>
<td>519-735-1895</td>
<td></td>
</tr>
</tbody>
</table>

Adverse Water Quality Test Results Corrective Action and Issue Resolution

<table>
<thead>
<tr>
<th>Name of Drinking Water System</th>
<th>Town of Tecumseh water distribution</th>
<th>Date of Resolution (yyyy/mm/dd)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial AWQI Notification Number(s)</td>
<td>All Resample AWQI Numbers</td>
<td>138775</td>
</tr>
</tbody>
</table>

Corrective Actions to be taken by Owner/Operator

<table>
<thead>
<tr>
<th>Corrective Actions</th>
<th>Required</th>
<th>Completed</th>
<th>Comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>Warning notice posted</td>
<td>□ Yes □ No</td>
<td>□ Yes □ No □ No □ N/A</td>
<td></td>
</tr>
<tr>
<td>Resample and test</td>
<td>□ Yes □ No</td>
<td>□ Yes □ No □ No □ N/A</td>
<td></td>
</tr>
<tr>
<td>Disinfectant restored / increased</td>
<td>□ Yes □ No</td>
<td>□ Yes □ No □ No □ N/A</td>
<td></td>
</tr>
<tr>
<td>Mains / pipes flushed</td>
<td>□ Yes □ No</td>
<td>□ Yes □ No □ No □ N/A</td>
<td></td>
</tr>
<tr>
<td>Users advised to boil water / seek alternate source</td>
<td>□ Yes □ No</td>
<td>□ Yes □ No □ No □ N/A</td>
<td></td>
</tr>
</tbody>
</table>

Health Unit's boil water advisory letter was delivered by town operator Vern. Brad spoke with Nikola Racakovic (home owner) informing him of boil water advisory. Nikola advised Brad that no one is living at that residence.

Summary of Action Taken and Results Achieved (include test results showing drinking water quality is no longer adverse) Flush and re-sample as per Ministry of Health. (Philip Wong - manager environmental health)
(3) samples to be collected. (1) up-stream, (1) down-stream, and (1) at point source where adverse sample found. See attached map for reference.

Brad Contacted the Ministry of Environment Spills Action Centre and spoke with Aaron Daya (environmental officer) at 4:30pm advising him of the adverse condition.

The watermain on County Rd #34 has been flushed.
1st set of samples were taken to Caduceon Environmental Laboratories Feb 21, 2018 at 5:30pm by water operator Reg Morin

(1) service is downstream of the adverse sample (6255 Manning Rd). As a precaution, the Windsor-Essex County Health Unit advised that a boil-water advisory is required to that residence. Public notification has been issued to the affected property advising of the adverse water sample and the need for boiling the water prior to human consumption. Notification letter was deliver to residence of 6255 Manning Rd.
When resolving an AWQI state all resample AWQI Numbers associated with the initial AWQI. For example, if there is an adverse test result of Total Coliform one of the corrective actions is to resample. If the resample came back adverse then you resample again. If the second resample test results are clear and the incident is then resolved, include all AWQI Numbers (Initial AWQI Number and Resample AWQI Numbers) on the same Section 3 form. This eliminates the requirement to submit a Section 3 form for every adverse test result associated with one incident. If the first resample test result is clear then this section does not apply.

The personal information that you provide on this form is collected by the (Insert name of Public Health Unit): Philip Wong

pursuant to section 5(1) of O.Reg. 319/08 and section 13(1) of O. Reg. 318/08 under the Health Protection and Promotion Act, and may be used and disclosed to other government institutions for the purpose of administering any Act or program that pertains to drinking water safety. If you have any questions about the collection of your personal information on this form, you can contact:

<table>
<thead>
<tr>
<th>Title of Public Health Unit Contact</th>
<th>Telephone Number</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manager</td>
<td>519-258-2146</td>
</tr>
<tr>
<td></td>
<td>ext. 3159</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Business Address</th>
</tr>
</thead>
<tbody>
<tr>
<td>Unit Number</td>
</tr>
<tr>
<td>-------------</td>
</tr>
<tr>
<td></td>
</tr>
<tr>
<td>City/Town</td>
</tr>
<tr>
<td>Windsor</td>
</tr>
</tbody>
</table>
Good morning Brad, just a FYI.

The form submitted for completing the owner/operating authority written notification for the adverse TC result appears to be the form for small drinking water systems regulated by the MOHLTC under O. Reg. 319 under the Health Promotion and Protection Act (HPPA).

The written notice required for the Tecumseh Distribution system is made under O. Reg. 170/03 under the SDWA. The content and details required are similar so the O. Reg. 319 form used for this incident is fine in lieu, but I've attached the correct form for you to use when completing the follow-up Notice of Issue Resolution (Form 2b) and for any future adverse incident reports.

Thanks,

Al Petersen
Water Inspector
Ministry of the Environment and Climate Change Ministère de l'Environnement et de l'Action en matière de changement climatique Safe Drinking Water Branch, Sarnia District
Phone: 519-383-3785
Fax: 519-336-4280
al.petersen@ontario.ca

--------------------

-----Original Message-----
From: Ng, Simon (MOECC)
Sent: February 22, 2018 2:22 PM
To: AWQI-SDW-WIN (MOECC)
Subject: AWQI 138775

Your message is ready to be sent with the following file or link attachments:

WD_138775_170_2a_2018_02_22_

Note: To protect against computer viruses, e-mail programs may prevent sending or receiving certain types of file attachments. Check your e-mail security settings to determine how attachments are handled.
Good morning all, Tecumseh’s re-sampling plan appears to be in accordance with the corrective action requirements under O. Reg. 170/03 sub-section 17-6. Para 1 for adverse Total Coliforms, and the definition of “resample and test” under sub-section 1(1).

Al Petersen
Water Inspector
Ministry of the Environment and Climate Change
Ministère de l’Environnement et de l’Action en matière de changement climatique
Safe Drinking Water Branch, Sarnia District
Phone: 519-383-3785
Fax: 519-336-4280
al.petersen@ontario.ca

Good afternoon Philip,

I have attached a map of the area where the Town of Tecumseh received an adverse sample. The adverse sample was taken on Tuesday Feb 20/18 from an auto flusher/sample station located on County Road 34 just west of Manning Road.

As per are conversation today it has been recommended that the auto flusher/sample station will be resampled along with 1 sample upstream and 1 sample downstream. Because the auto flusher/sample station is located near the end of a dead end main it has been decided that a water adverse advisory to the residents upstream would not be required. The Town of Tecumseh will take 3 samples; 1 from a fire hydrant directly upstream and a 2nd sample from a fire hydrant located downstream and the 3rd sample from the auto flusher/sample station.

The Town will take a second set of water samples tomorrow from the same location and will keep you informed of the lab results. I can be reached anytime @ 519-818-9611 or the Town DWQMS Rep Brad Dupuis @ 519-791-0838.

Please confirm you have received this email and concur with the sampling plan in this email.

Thanks
Denis
*** DISCLAIMER ***
This e-mail and any attachment(s) are confidential and may be privileged. If you are not the intended recipient please notify me immediately by return e-mail, delete this e-mail and do not copy, use or disclose it. Messages sent to and from us may be monitored.

Please consider the environment before printing this e-mail.
Please see attached.
Any questions please contact myself at 519-791-6509 or Denis Berthiaume at 519-818-9611
Notices of Adverse Test Results and Issue Resolution (Schedule 16)
Drinking Water Systems Regulation (O. Reg. 170/03)

Instructions

These Notice forms apply to drinking water system owners and operators (Owners/Operators) and Ministry of the Environment and Climate Change (MOECC) licensed laboratories (Licensed Laboratories) regulated by Drinking Water Systems Regulation, Ontario Regulation 170/03 (O. Reg. 170/03).

Immediate Report of Adverse Results

Section 16-3(3) of Schedule 16 of O. Reg. 170/03 sets out the requirements for Owners/Operators and Licensed Laboratories to make an immediate report of adverse test results under O.Reg. 170/03 by speaking in person or by telephone to the MOECC’s Spills Action Centre (SAC), at 1 800 268-6060 or 416 325-3000, the local Medical Officer of Health/Health Unit (Health Unit) and the Owner/Operator (Immediate Report).

[Adverse test results for trihalomethanes (THMs) do not require an Immediate Report; see section below.]

Written Notice within 24 hours of the Immediate Report

Within 24 hours of an Immediate Report, Section 16-7(3) of Schedule 16 requires that Owners/Operators and Licensed Laboratories must also provide written notice to the MOECC and the Health Unit, by fax or e-mail. Licensed Laboratories must complete and submit Sections 1 and 3 of this Notice. Owners/Operators must complete and submit Section 2A of this Notice. Note: Owners/Operators must complete and submit Section 3 of this Notice for any adverse result of an operational parameter.

Notice Within 7 Days of Issue Resolution

Within 7 days after the issue has been resolved, Section 16-9(1) of Schedule 16 requires that Owners/Operators must provide a written notice, Section 2B of this Notice, to SAC and the Health Unit, summarizing the actions taken and the results achieved. This written notice must also be sent to the interested authority for any designated facility (if applicable) within 30 days.

Owners and Operators must follow any additional corrective actions required by the Health Unit.

Total Trihalomethanes (THMs)

As of January 2016, Sections 16-6 and 16-7 of Schedule 16 requires that Owners/Operators calculate the running annual average (RAA) for THMs and report any adverse test result in writing to the MOECC and the Health Unit within 7 calendar days of the end of the calendar quarter that produced the adverse test result. The written notice is submitted using Section 2C of this Notice. RAA calculation is outlined in Schedule 13-6 of O. Reg. 170/03.

Immediate oral notification is no longer required for this parameter.

As of January 2016, Licensed Laboratories that upload THM test results into the Ministry’s data system and report the results to Owners/Operators within 48 hours of the test result being authorized at the laboratory, are exempt from reporting the RAA. If the data is not uploaded, the RAA must be calculated by the laboratory and the laboratory must complete and submit the written notice form and the analytical results (Section 1 and Section 3).

Note: Small municipal residential systems and non-municipal year round residential systems that serve designated facilities also must notify the operator of each designated facility served by their system.

The ‘Trihalomethane and Haloacetic Acid Sampling and Reporting Requirements Technical Bulletin’ provides full details on the changes to the reporting requirements and provides examples for calculating quarterly and running annual averages. The Technical Bulletin is available on the ministry’s web page via the following link: https://www.ontario.ca/page/total-trihalomethane-thm-reporting-requirements-technical-bulletin

SAC fax: 1 800 268-6061 or 416 325-3011
SAC e-mail: moe.sac.moe@ontario.ca

 Provincial standards for water quality are set out in:

Safe Drinking Water Act, 2002
Ontario Regulation 169/03 (Water Quality Standards)
Ontario Regulation 170/03 (Drinking Water Systems)

Failure to notify these parties in accordance with the Regulation constitutes an offence under the Safe Drinking Water Act. A copy of this form may be acquired through the MOECC public web site (www.ontario.ca/drinkingwater) or by contacting any MOECC office.

Collection of information on this form is done in accordance with the Safe Drinking Water Act, 2002 and its Regulations. Information gathered herein, including personal information, is governed by the Freedom of Information and Protection of Privacy Act (FIPPA) and may be disclosed to other government agencies (including municipal health unit employees) pursuant to ‘Section 42’ of the FIPPA for the consistent purpose of administering any Act or program that pertains to drinking water safety. For questions and concerns, please contact the Ministry of Environment and Climate Change at 1 866 793-2588.
Fields marked with an asterisk (*) are mandatory.

Section 2B – Notice Of Issue Resolution – Section 16-9 (O. Reg. 170/03)

DWS Information
DWS Number *
260004969

DWS Name *
Town of Tecumseh water distribution

DWS Contact Name
Last Name *
Dupuis
First Name *
Brad

Telephone Number (including area code) *
519 791-6509
Fax Number (including area code) *
519 735-1895

Email Address
bdupuis@tecumseh.ca

Initial AWQI Number1 *
138775
Date Resolved (yyyy/mm/dd) *
2018/02/23

Date Resolution Notice Provided (yyyy/mm/dd) *
2018/02/23

Are there previous re-sample AWQI Numbers? *
☑ Yes  ☐ No

If known, please provide All Other Resample AWQI Numbers2

Summary of Action Taken and Results Achieved (include test results showing water quality is no longer adverse) *
Flush and re-sample as per Ministry of Health. (Philip Wong- manager environmental health)
(3) samples to be collected. (1) up-stream, (1) down-stream, and (1) at point source where adverse sample found.
See attached map for reference.

Brad Contacted the Ministry of Environment Spills Action Centre and spoke with Aaron Daya (environmental officer) at 4:30pm advising him of the adverse condition. (Feb 21, 2018)

The watermain on County Rd #34 has been flushed.
1st set of samples were taken to Caduceon Environmental Laboratories Feb 21, 2018 at 5:30pm by water operator Reg Morin

(1) service is downstream of the adverse sample (6255 Manning Rd). As a precaution, the Windsor-Essex County Health Unit advised that a boil-water advisory is required to that residence. Public notification has been issued to the affected property advising of the adverse water sample and the need for boiling the water prior to human consumption. Notification letter was deliver to residence of 6255 Manning Rd by water operator Vern Rorai.
Brad spoke with Nikola Radakovic (home owner) informing him of boil water advisory. Nikola advised Brad that no one is living at that residence. (Feb 22, 2018)

Caduceon Environmental Laboratories stated on Feb 22, 2018 that the 1st set of samples was found to be clear (nothing found)

2nd set of samples were collected and delivered to Caduceon Environmental Laboratories Feb 22, 2018 at 5:35pm by water operator Vern Rorai

Caduceon Environmental Laboratories stated on Feb 23, 2018 that the 2nd set of samples was found to be clear (nothing found).

Brad Contact the Windsor-Essex County Health Unit, advised Philip Wong that two consecutive samples came back clear (nothing found). Notification letter was created by the WECHU informing the residence of 6255 Manning Rd.
that they may discontinue the Boil Water Advisory precautions.

Brad delivered the notification letter to residence of 6255 Manning Rd and informed Nikola Radakovic (home owner) the precautionary boil water advisory has been lifted by the WECHU.

**Was an Advisory Issued by the Health Unit?**

- [x] Yes
- [ ] No
- [ ] Self Imposed Advisory

**Advisory Type**

- [x] Boil Water

**Date Issued (yyyy/mm/dd)**

2018/02/22

If Rescinded, please select date the advisory was rescinded

**Date Rescinded (yyyy/mm/dd)**

2018/02/23

**Other (Include Health Unit Directions and any additional attachments)**

Under the direction of the Windsor Essex County Health Unit, the (1) resident that was effected by the adverse sample has been informed that the precautionary boil water has been lifted.

Brad Dupuis informed resident (Feb 23, 2018)

See attached letter for reference

<table>
<thead>
<tr>
<th>Attached File Name</th>
<th>Created</th>
<th>Modified</th>
<th>Size (MB)</th>
<th>Remove Selected File</th>
</tr>
</thead>
<tbody>
<tr>
<td>WECHU precautionary boil water 6255 Manning</td>
<td>02/23/2018 13:49:43</td>
<td>02/23/2018 13:49:46</td>
<td>0.27</td>
<td>□</td>
</tr>
<tr>
<td>1st set of samples.pdf</td>
<td>02/23/2018 13:57:33</td>
<td>02/23/2018 13:57:34</td>
<td>0.2</td>
<td>□</td>
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<tr>
<td>Map of area for reference.pdf</td>
<td>02/23/2018 14:10:38</td>
<td>02/23/2018 14:10:38</td>
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<td>□</td>
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<tr>
<td>2nd set of samples.pdf</td>
<td>02/23/2018 16:19:42</td>
<td>02/23/2018 16:19:42</td>
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<td>□</td>
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<tr>
<td>WECHU precautionary boil water 6255 Manning</td>
<td>02/23/2018 16:21:11</td>
<td>02/23/2018 16:21:13</td>
<td>0.04</td>
<td>□</td>
</tr>
</tbody>
</table>

**Prepared By**

Brad Dupuis

**Signature**

Bradley Dupuis

**Date (yyyy/mm/dd)**

2018/02/23

Additional Comments
Do you have another adverse to report?  

☐ Yes  ☑ No

1 The original adverse test result.

2 When resolving an AWQI state all resample AWQI number’s associated with the initial AWQI. For example, if there is an adverse test result of Total Coliform one of the corrective actions is to resample. If the resample came back adverse then you resample again. You need to continue to resample until the test results for two consecutive sets of samples taken 24 to 48 hours apart are clear or as directed by the Health Unit. At this point, the incident is resolved. Submit the AWQI form and include all related AWQI number’s (Initial AWQI number and any Resample AWQI number) on the same Section 2B. This eliminates the requirement to submit a Section 2B form for every adverse test result associated with one incident. If the first resample test result is clear then this section does not apply. For THM’s, drinking water system owners/operators are not required to take resamples as part of the prescribed corrective actions; unless directed by the Health Unit.
Occupants of:

6255 Manning Rd.

Dear Occupant(s),

The Town of Tecumseh Public Works Department has informed you that the water line serving your residence has been possibly contaminated.

As a precaution, I am advising you to use bottled water or water that has been brought to a rolling boil for at least one minute for drinking or food preparation.

Attached to this letter is an information sheet which provides more detailed instructions on precautionary measures.

Your water service will be flushed and tested to ensure your safety. The Town of Tecumseh Public Works Department will notify you when this has been completed.

If you have any questions, please contact the Environmental Health Department at 519-258-2146, ext. 4475.

Sincerely,

Philip Wong, Manager
Environmental Health Department

PW/1a
SAFE WATER DRINKING

BOIL WATER ADVISORY (BWA)
PRECAUTIONARY MEASURES FOR RESIDENTIAL SETTINGS

What do you do during a BWA?
Windsor-Essex County Health Unit advises that all water used for consumption must be either boiled or be commercially bottled water. Home filtration devices (filters) do not kill bacteria. In your home, these devices could be portable, plumbed-in, or faucet mounted.

- To boil, water must be heated to a rolling boil for at least one (1) minute to kill all disease-causing microorganisms prior to use. The water should then be cooled and stored in a clean, covered container and refrigerated until you are ready to use it.

  In addition to using boiled water for people and pets to drink, you must also use it for making ice cubes, preparing foods and beverages, washing fruits and vegetables, and brushing teeth.

You can continue to use your tap water for...

- Handwashing
- Laundry
- Showering/Bathing

Adults may continue to use the supply, as long as the water is not swallowed.

  Young children, immunocompromised, as well as individuals with skin lesions or open wounds should take sponge baths with boiled water.

Why has this BWA been issued?
A BWA has been issued because recent conditions or concerns may have adversely affected the quality or safety of your potable water supply.
A BWA is put in place to protect you from harmful organisms that may be in your water and can make you and your family sick.

WINDSOR-ESSEX COUNTY HEALTH UNIT
Bureau de santé de Windsor-comté d'Essex

www.wechu.org | 519-258-2146 ext. 4475
Besides drinking, what should boiled water be used for?

**Food Preparation**
This includes but is not limited to ready to eat foods such as fruits and vegetables, concentrated fruit drinks, and breast milk substitutes (formula). However, when preparing food which requires boiling, you may do so as long as water is brought to a hard boil for at least one (1) minute. Discard all food and beverages previously made with water, such as ice cubes, breast milk substitutes (formula), and juices. Disinfect all containers with a household bleach solution described below and remake with boiled water.

**Infant Feeding**
Only boiled water should be used if you are feeding infants with a breast milk substitute (formula) or washing infant feeding supplies. Bottled water should be boiled as well to ensure that any potential bacteria are removed. Keep in mind that mixing juices and other foods should all be done with boiled water when feeding your infant or child during a BWA.

**Dishwashing**
Hand dishwashing can be done in the usual manner with hot tap water, however final rinse should be done with boiled or bottled water, or disinfected in a bleach solution of 20mL (4 teaspoons) of unscented household bleach to 10 L of lukewarm water. Dishes should be left to air dry.

Mechanical dishwashers may be used as long as a chlorinated detergent is used (read product label) in the cycle, or there is a sanitizing cycle (check owner’s manual).

**Brushing Teeth**
Use boiled or bottled water.

**Waterborne Outbreak**
In the event of a waterborne outbreak, extra precautions may be required including: using the bleach solution or an alcohol based disinfectant on the hands after handwashing, allowing dishes to soak in the bleach solution for 1 minute before air drying, and sponge bathing only. Follow the advice of the Health Unit regarding additional precautions in the event of an outbreak.

---

**FOR MORE INFORMATION ON SAFE WATER OR WATER ADVISORIES**

Contact the **WINDSOR-ESSEX COUNTY HEALTH UNIT**
www.wechu.org | 519-258-2146 ext. 4475

---

References:
saine/water-advisories-avert-veau/index-eng.php

CERTIFICATE OF ANALYSIS

C.O.C.: DW1802211730-W

Report To:
Town of Tecumseh
1189 LaCasse Blvd,
Tecumseh Ontario N8N 2C7 Canada
Attention: Denis Berthiaume

DATE RECEIVED: 21-Feb-18
DATE REPORTED: 22-Feb-18
SAMPLE MATRIX: Drinking Water

Caduceon Environmental Laboratories
3201 Marentette Ave. Unit #5
Windsor ON N8X 4G3
Tel: 519-966-9541
Fax: 519-966-9567

JOB/PROJECT NO.: Town of Tecumseh
P.O. NUMBER:
WATERWORKS NO. 260004969

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Total Coliform</th>
<th>E coli</th>
</tr>
</thead>
<tbody>
<tr>
<td>Units</td>
<td>cfu/100mL</td>
<td>cfu/100mL</td>
</tr>
<tr>
<td>R.L.</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Reference Method</td>
<td>MOE E3407</td>
<td>MOE E3407</td>
</tr>
<tr>
<td>Date Analyzed/Site</td>
<td>21-Feb-18/W</td>
<td>21-Feb-18/W</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Client I.D.</th>
<th>Sample I.D.</th>
<th>Date Collected</th>
<th>21-Feb-18/W</th>
<th>21-Feb-18/W</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manning/Cty. Rd #34/Auto Flusher</td>
<td>B18-04598-1</td>
<td>21-Feb-18</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>F.H. 2m East of Auto Flusher on Cty. Rd#34</td>
<td>B18-04598-2</td>
<td>21-Feb-18</td>
<td>0</td>
<td>0</td>
</tr>
<tr>
<td>F.H. Upstream Cty.Rd#34</td>
<td>B18-04598-3</td>
<td>21-Feb-18</td>
<td>0</td>
<td>0</td>
</tr>
</tbody>
</table>

R.L. = Reporting Limit
Test methods may be modified from specified reference method unless indicated by an *
Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrrie

The analytical results reported herein refer to the samples as received. Reproduction of this analytical report in full or in part is prohibited without prior consent from Caduceon Environmental Laboratories.

Michelle Dubien
Lab Manager

Page 1 of 1
**DRINKING WATER SUBMISSION FORM**

**CADUCEON LABORATORIES**

Indicate Laboratory Samples are Submitted to:
- Kingston
- Ottawa
- Peterborough
- Windsor

**Organization:**
- Town of Tecumseh

**Contact:**
- Denis Berthiaume
  - Tel: 519-991-7071
  - Fax: 519-735-1895

**Waterworks Address:**
- Town of Tecumseh
- 1189 Lacasse Blvd.
- Tecumseh, ON N9N 2C7

**Invoicing Address:**
- Town of Tecumseh
- Waterworks No.: 260004969
- P.O. No.: P.O.

**Analytical Requested**

<table>
<thead>
<tr>
<th>Microbiological</th>
<th>Chemical</th>
<th>Other</th>
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</thead>
<tbody>
<tr>
<td>Total Coliform</td>
<td>E. coli</td>
<td></td>
</tr>
<tr>
<td>Pathogenic Bacteria</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Fecal Coliforms</td>
<td></td>
<td></td>
</tr>
<tr>
<td>P/A (Total Coliforms/ E. coli)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Bacteria</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nitrates N</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Nitrites N</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Alkalinity</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chloride</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Sodium</td>
<td></td>
<td></td>
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<tr>
<td>Total Dissolved Solids</td>
<td></td>
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<tr>
<td>pH</td>
<td></td>
<td></td>
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<tr>
<td>Specific Conductivity</td>
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</tr>
<tr>
<td>TDS</td>
<td></td>
<td></td>
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<tr>
<td>TEC</td>
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<td>COD</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Other</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**Sample Matrix Legend:**
- TW = Treated Water
- DW = Distribution Water
- GW = Raw Groundwater
- SW = Raw Surface Water
- UGW = Untreated Groundwater (Drinking Water/Distribution)
- GUD = Groundwater under the influence of surface water
- PR = Plumbing Residential
- PM = Plumbing Non-Residential

**Sample Submission Information**

<table>
<thead>
<tr>
<th>Lab No.</th>
<th>Sample Source and/or Sample Identification</th>
<th>Watertrax S.P.L.</th>
<th>Sample Matrix *</th>
<th>Date Collected (yy-mm-dd)</th>
<th>Time Collected</th>
<th>Adverse Reactions</th>
<th>Indicate Test for Each Sample</th>
<th>Free Chlorine</th>
<th>% B actin / Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Manning Rd. 34/45 East of Guelph Road</td>
<td>D.W.</td>
<td></td>
<td>18-02-21</td>
<td>4:45 PM</td>
<td>YES</td>
<td></td>
<td>0.74</td>
<td>1</td>
</tr>
<tr>
<td>2</td>
<td>East of Auto Fisher Drive &amp; Sider Rd.</td>
<td>D.W.</td>
<td></td>
<td>18-02-21</td>
<td>4:45 PM</td>
<td>YES</td>
<td></td>
<td>0.74</td>
<td>1</td>
</tr>
<tr>
<td>3</td>
<td>East of Highway 67, Sider Rd.</td>
<td>D.W.</td>
<td></td>
<td>18-02-21</td>
<td>5:01 PM</td>
<td>YES</td>
<td></td>
<td>0.79</td>
<td>1</td>
</tr>
</tbody>
</table>

**Has Lab Service Notification (LSN) Form been completed & submitted to the MOE/PHU?**
- Yes
- No
- Not Applicable

**Laboratory Analysis will not commence until all Notification information is received and the Submission form is appropriately completed.**
CERTIFICATE OF ANALYSIS

C.O.C.: DW1802221735-W
REPORT No. B18-04696

Report To:
Town of Tecumseh
1189 LeCasse Blvd,
Tecumseh Ontario N8N 2C7 Canada
Attention: Denis Berthiaume

DATE RECEIVED: 22-Feb-18
DATE REPORTED: 23-Feb-18
SAMPLE MATRIX: Drinking Water

<table>
<thead>
<tr>
<th>Parameter</th>
<th>Total Coliform</th>
<th>E coli</th>
</tr>
</thead>
<tbody>
<tr>
<td>Units</td>
<td>cfu/100mL</td>
<td>cfu/100mL</td>
</tr>
<tr>
<td>R.L.</td>
<td>1</td>
<td>1</td>
</tr>
<tr>
<td>Reference Method</td>
<td>MOE E3407</td>
<td>MOE E3407</td>
</tr>
<tr>
<td>Date Analyzed/Site</td>
<td>22-Feb-18/W</td>
<td>22-Feb-18/W</td>
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<tr>
<th>Client I.D.</th>
<th>Sample I.D.</th>
<th>Date Collected</th>
<th>Date Collected</th>
</tr>
</thead>
<tbody>
<tr>
<td>Manning/Cty.Rd #34/Auto Flusher-Resample</td>
<td>B18-04696-1</td>
<td>22-Feb-18</td>
<td>0</td>
</tr>
<tr>
<td>F.H. 2m East of Auto Flusher on Cty Rd.#34-Resamp</td>
<td>B18-04696-2</td>
<td>22-Feb-18</td>
<td>0</td>
</tr>
<tr>
<td>F.H. Upstream/Cty.Rd.#34-Resample</td>
<td>B18-04696-3</td>
<td>22-Feb-18</td>
<td>0</td>
</tr>
</tbody>
</table>

R.L. = Reporting Limit
Test methods may be modified from specified reference method unless indicated by an *
Site Analyzed=K-Kingston,W-Windsor,O-Ottawa,R-Richmond Hill,B-Barrie

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Page 1 of 1
**DRINKING WATER SUBMISSION FORM**

**CADCUM**

**ENVIRONMENTAL LABORATORIES**

---

**Indicate Laboratory Samples are Submitted to:**
- Kingston
- Peterborough
- Ottawa
- Windsor

**DRINKING WATER FACILITY CLASSIFICATION:**
- Municipal
- Large
- Residential
- Seasonal

**ANALYSES REQUESTED:**
- Microbiological:
  - Enteric Pathogens
  - Total Coliform
  - Fecal Coliform
  - Total Coliform/Enteric Pathogens
- Chemicals:
  - Sulfate
  - Nitrates
  - Phosphate
  - Fluoride
  - Lead
- Geology:
  - pH
  - Temperature

**REPORT NUMBER (Lab No.):**

---

**Sample Collection Information:**

<table>
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<tr>
<th>Sample Source under Sample Identification</th>
<th>Watermark S.P.L.</th>
<th>Sample Matrix</th>
<th>Data Collected (yy-mm-dd)</th>
<th>Time Collected</th>
<th>Adverse Seasing</th>
<th>Indicate Test for Each Sample</th>
<th>Free Chlorine</th>
<th>PR of Sample</th>
</tr>
</thead>
<tbody>
<tr>
<td>MANNING_Lt_F打卡 FLUSHER</td>
<td>D.W.</td>
<td></td>
<td>18-02-22</td>
<td>5:02PM</td>
<td>YES</td>
<td>✓</td>
<td>0.77</td>
<td>1</td>
</tr>
<tr>
<td>F.M. Hn East of AUTO FLUSHER ON</td>
<td>D.W.</td>
<td></td>
<td>18-02-22</td>
<td>5:09PM</td>
<td>YES</td>
<td>✓</td>
<td>0.80</td>
<td>1</td>
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<tr>
<td>EM. UPSTREAM Lt_F打卡 FLUSHER</td>
<td>D.W.</td>
<td></td>
<td>18-02-22</td>
<td>5:14PM</td>
<td>YES</td>
<td>✓</td>
<td>0.80</td>
<td>1</td>
</tr>
</tbody>
</table>

---

**Has Lab Service Notification (LSN) Form been completed & submitted to the MOE/PU?**
- Yes
- No
- Not Applicable

---

**Laboratory Analysis will not commence until all Notification information is received and the Submission form is appropriately completed.**

---

**Notes:**
- Kingston Lab: 255 Culliton Ave, Kingston, ON K7L 4V9, Tel: (613) 984-7779 Email: contactus@cadcumlab.com
- Peterborough Lab: 250 High Lane, Peterborough, ON K9J 0J7, Tel: (705) 748-4618 Fax: (705) 748-4619
- Ottawa Lab: 245 Highway 417, Ottawa, ON K7J 0J7, Tel: (613) 289-9000 Fax: (613) 289-9001
- Windsor Lab: 15-3204 17th Street, Windsor, ON N8T 2L9, Tel: (519) 566-5951 Fax: (519) 566-5952

---

**CoC DW. See 2008 Revision No 7**
Occupants of:
6255 Manning Rd.

Dear Occupants,

Staff from The Town of Tecumseh Public Works Department has informed me that the maintenance on the water line serving your residence has been flushed and tested to the satisfaction of the Windsor-Essex County Health Unit.

You may discontinue the Boil Water Advisory precautions.

If you have any questions, please contact the Environmental Health Department at (519) 258-2146, ext. 4475.

Sincerely,

Philip Wong, Manager
Environmental Health Department

PW/la
Good evening,

Town of Tecumseh Water Services received a call at approximately 3:30pm today from Caduceon Laboratory (they provide weekly water testing for the Town of Tecumseh). A water sample taken on Tuesday February 20, 2018, from a sampling station located across from 13072 County Road 34 was found to be adverse. Windsor Essex County Health Unit and the Ministry of the Environment Spills Action Centre as mandated by Reg 170 have been notified. As a precaution, The Windsor Essex County Health Unit has advised that water resampling is required at the location of the adverse along with 1 sample upstream and 1 sample downstream. The Windsor Essex County Health Unit has decided that a boil water advisory to the resident’s in this area will not be necessary. A license water operator is presently on site to sample and to deliver the new samples to the lab tonight.

Water Services will provide updated information as it is received. Should you have any questions or concerns regarding this adverse sample, please contact myself @ 519-818-9611 or Brad Dupuis @ 519-791-6509.

Regards,

Denis

Brad Dupuis
Brad Dupuis

From: Brad Dupuis  
Sent: February-23-18 4:34 PM  
To: COUNCIL; Tony Haddad  
Cc: Daniel Piescic; Phil Bartnik; Kirby McArdle; Cheryl Curran; Debbie Kelly; Denis Berthiaume  
Subject: RE: Adverse Water Sample - County Road 34 & Manning

Good evening,

All samples have passed laboratory tests, the adverse has been lifted by the Windsor-Essex County Health Unit. Should you have any questions or concerns, please contact myself @ 519-791-6509 or Denis @ 519-818-9611.

Regards,

---

From: Brad Dupuis  
Sent: February-21-18 5:28 PM  
To: COUNCIL; Tony Haddad  
Cc: Daniel Piescic; Phil Bartnik; Kirby McArdle; Cheryl Curran; Debbie Kelly; Brad Dupuis; Denis Berthiaume  
Subject: Adverse Water Sample - County Road 34 & Manning

Good evening,

Town of Tecumseh Water Services received a call at approximately 3:30pm today from Caduceon Laboratory (they provide weekly water testing for the Town of Tecumseh). A water sample taken on Tuesday February 20, 2018, from a sampling station located across from 13072 County Road 34 was found to be adverse. Windsor Essex County Health Unit and the Ministry of the Environment Spills Action Centre as mandated by Reg 170 have been notified. As a precaution, the Windsor Essex County Health Unit has advised that water resampling is required at the location of the adverse along with 1 sample upstream and 1 sample downstream. The Windsor Essex County Health Unit has decided that a boil water advisory to the resident’s in this area will not be necessary. A license water operator is presently on site to sample and to deliver the new samples to the lab tonight. Water Services will provide updated information as it is received. Should you have any questions or concerns regarding this adverse sample, please contact myself @ 519-818-9611 or Brad Dupuis @ 519-791-6509.

Regards,

Denis
TOWN OF Tecumseh  
ONTARIO, CANADA  

WATER DIVISION  
GENERAL WORK ORDER  

***PLEASE PRINT ALL INFORMATION***

Date Received:  
February 21st, 2018

Time Received:  
3:30 pm

Name of Customer:  
Town of Tecumseh

Address/Location:  
Manning /Cnty Rd #34 Auto-Flusher

Telephone No.:  
519-785-2184

INSTRUCTIONS

Adverse Water Sample Reported by Cadacon Environmental Labs  
M.O.H. issued a precautionary boil water at (1) Residence (6255 Manning Rd)  
Flush and sample upstream, pointsource and downstream As per M.O.H.

WORK PERFORMED AND COMMENTS

Started flushing Watermain @ 4:25 pm  
1st Set of Samples were taken 3 total

1. Points source → Auto-flusher 0.74 ppm Free @ 4:45 pm
2. Downstream Fire Hydrant east of Auto-flusher 0.74 ppm Free @ 4:47 pm
3. Upstream Fire Hydrant west of Auto-flusher 0.79 ppm Free @ 5:01 pm

MATERIALS USED

Delivered (3) Samples to lab at 5:10 pm

Operator Name (print):  Vern Reg  
Operator Signature:  [Signature]

Date Completed:  February 21st, 2018  
Time Completed:  5:00 pm
**WATER DIVISION**
**GENERAL WORK ORDER**

**PLEASE PRINT ALL INFORMATION**

<table>
<thead>
<tr>
<th>Date Received:</th>
<th>Feb 22, 2018</th>
</tr>
</thead>
<tbody>
<tr>
<td>Time Received:</td>
<td>7:00am</td>
</tr>
<tr>
<td>Name of Customer:</td>
<td>Nikola Radakovic</td>
</tr>
<tr>
<td>Address/Location:</td>
<td>6255 Manning Rd.</td>
</tr>
<tr>
<td>Telephone No.:</td>
<td>519-944-4859</td>
</tr>
</tbody>
</table>

**INSTRUCTIONS**
Deliver letter from Windsor Essex County Health Unit to 6255 Manning Rd for a precautionary boil water advisory.

**WORK PERFORMED AND COMMENTS**
Vern Rona: Delivered letter to 6255 Manning Rd.
Brad Dupuis spoke with Nikola Radakovic informing him of the letter. Nikola informed Brad that the house is unoccupied.

**MATERIALS USED**

<table>
<thead>
<tr>
<th>Operator Name (print):</th>
<th>Brad &amp; Vern</th>
</tr>
</thead>
<tbody>
<tr>
<td>Operator Signature:</td>
<td>[Signature]</td>
</tr>
<tr>
<td>Date Completed:</td>
<td>Feb 22, 2018</td>
</tr>
<tr>
<td>Time Completed:</td>
<td>9:40 am</td>
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</table>
**Date Received:**
February 22nd, 2018

**Time Received:**
4:00 pm

**Name of Customer:**
Town of Tecumseh

**Address/Location:**
Manning/Cnty Rd #34 Auto Flusher

**Telephone No.:**
519-735-2184

---

**INSTRUCTIONS**

- Adverse Water Sample
- Take 2nd Set of Samples

---

**WORK PERFORMED AND COMMENTS**

- 2nd Set of Samples were taken 3 total. Started flushing at 4:00 pm
- Downstream to Fire Hydrant east of Auto-Flusher 0.80 ppm Free @ 5:03 pm
- Upstream to Fire Hydrant west of Auto-Flusher 0.80 ppm Free @ 5:14 pm
- Delivered 3 Samples to lab at 5:35 pm

---

**MATERIALS USED**

---

**Operator Name (print):**

**Operator Signature:**

**Date Completed:**
February 22nd, 2018

**Time Completed:**
6:00 pm
<table>
<thead>
<tr>
<th>Date Received:</th>
<th>Time Received:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Feb 23, 2018</td>
<td>3:59 pm</td>
</tr>
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</table>

<table>
<thead>
<tr>
<th>Name of Customer:</th>
<th>Telephone No.:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nikola Radakovic</td>
<td>519-944-4859</td>
</tr>
</tbody>
</table>

**INSTRUCTIONS**

Deliver letter from Windsor Essex County Health Unit to 6255 Manning Rd to discontinue the Boil Water Advisory precautions.

**WORK PERFORMED AND COMMENTS**

Brad delivered letter to 6255 Manning Rd. Brad spoke with Nikola Radakovic informing him of the letter stating boil water advisory precautions are lifted.

**MATERIALS USED**

- [ ]
- [ ]
- [ ]

<table>
<thead>
<tr>
<th>Operator Name (print):</th>
<th>Operator Signature:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Brad Dupuis</td>
<td>Brad Dupuis</td>
</tr>
</tbody>
</table>

<table>
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<tr>
<th>Date Completed:</th>
<th>Time Completed:</th>
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<tbody>
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<td>Feb 23, 2018</td>
<td>5:30 pm</td>
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