

City of Duncan ANNUAL REPORT  
(Drinking Water System Name)

Reporting Period:	Jan 1 - Dec 31, 2013
Operating Permit Number:	1192
Drinking Water System Owner:	City of Duncan
Drinking Water System Contact:	
Name:	Abbas Farahbakhsh
Phone No:	(250) 746-5321
Email:	abbasf@duncan.ca

**1 Microbiological testing completed during this reporting period:**

- a. bacteriological results attached to this report.
- b. adverse bacteriological results:  None detected  
 Listed in table below:

**Adverse Results:**

Date	Total coliform	E. Coli	Reason	Corrective Action

**2 Chemical results for this reporting period:**

- a. most recent chemical analysis attached to this report.
- b. chemical parameters listed in *The Guidelines for Canadian Drinking Water Quality* ("the Guidelines") are:  
 all within GCDWQ  
 above the GCDWQ and are listed below:

**Parameters above the Guidelines:**

Parameter	Result	Max. Acceptable Concentration	Aesthetic Objective	Treatment/Corrective Action

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**3 Summarize additional testing and sampling carried out in accordance with the requirement of a Water Source approval, Written Order or as per the conditions of your *Operating Permit*.**

- no additional testing  
 additional testing listed below:

**Additional testing:**

Description of parameter & reason for sampling	Health parameter or non-health related parameter	Corrective action necessary (Y/N?)	Corrective action taken

**4 Water Quality Complaints:**

During the course of the year, the water system:

- did not receive water quality complaints (ie taste, odour, colour, etc)  
 received water quality complaints and are listed below:

**Water Quality Complaints:**

Date	Water quality complaint	Corrective action taken

**5 Adverse results: Total number of adverse results during this reporting period for insufficient water supply, malfunction of disinfection equipment or elevated turbidity:**

- No adverse results  
 Adverse results listed below:

**Adverse Results:**

Incident date	Corrective action	Corrected by

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**6 Description of the system:**

Sources of raw water:

- Groundwater  
 Surface water  
 Other (specify): \_\_\_\_\_

Does the drinking water system have disinfection?  Yes  No

Disinfection methods (check boxes that apply):

- Chlorination  
 Ultraviolet light  
 Ozonation  
 Other (specify): \_\_\_\_\_

Does the drinking water system have treatment?  Yes  No

Treatment type (check boxes that apply):

- Particulate cartridge filters  
 Membrane filtration  
 Carbon filter  
 Sand filtration  
 Reverse osmosis  
 Other (specify): \_\_\_\_\_

**7 Major expenses incurred during the period covered by the report:**

To purchase or install required equipment: \_\_\_\_\_

To repair equipment: Pump at #5 well repaired

To replace equipment: \_\_\_\_\_

To complete annual maintenance of system: (system flushing, replacement of carbon filters, etc) Flushing water system June 2013.

To complete specialist report (specify): \_\_\_\_\_

**8 Further communication with users:**

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

- hand delivered  
 public access/ notice via web  
 public access/notice via government office  
 public access/notice via newspaper  
 public access/notice via bill stuffer  
 public access/ notice via other method (specify): \_\_\_\_\_

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b. Improvements or remedial actions required by the Drinking Water Officer:

- no action required
- Drinking Water Officer inspection report attached to report
- actions required by Drinking Water Officer listed below:

**Improvements/Remedial Actions:**

Required action	Completion date

c. Future water system improvements:

- no improvements planned
- improvements listed below:

**Future Improvements:**

Future plans	Planned completion date
Doquodd Watermain Upgrade	Fall 2014
James Watermain Upgtade	Fall 2014

d. Emergency Response Plan can be accessed by:

- posting on web
- posting at nearest government office
- contacting water system owner
- Other (specify): \_\_\_\_\_