

Golden Lake United Church Camp-Assembly Hall

2017

Annual Report

Optional Annual Report Template

Drinking-Water System Number:	260034892
Drinking-Water System Name:	Golden Lake United Church Camp - Assembly Hall
Drinking-Water System Owner:	Golden Lake United Church Camp
Drinking-Water System Category:	Small Non-Municipal Non-Residential System
Period being reported:	01/01/2017-12/31/2017

Complete if your Category is Large Municipal Residential or Small Municipal Residential

Does your Drinking-Water System serve more than 10,000 people? Yes [] No ☒

Is your annual report available to the public at no charge on a web site on the Internet? Yes ☒ No []

Location where Summary Report required under O. Reg. 170/03 Schedule 22 will be available for inspection.

On file in Assembly Hall office and at the following website:
www.goldenlakecamp.ca

Complete for all other Categories.

Number of Designated Facilities served:

1

Did you provide a copy of your annual report to all Designated Facilities you serve?

Yes ☒ No []

Number of Interested Authorities you report to:

0

Did you provide a copy of your annual report to all Interested Authorities you report to for each Designated Facility?

Yes [] No ☒

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
GLUCC Assembly Hall	260034892

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

See Page 7 for Drinking-Water System Description

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

Replaced filters & UV light costing \$210
Replaced Water Pump costing \$1497

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
06/27/17	Total Coliforms - D	2	100 mL	Re-test	06/30/17

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 Or Fecal Results (min #)-(max #)	Range of Total Coliform Results (min #)-(max #)	Number of HPC Samples	Range of HPC Results (min #)-(max #)
Raw					
Treated	Please see pages 8 to 15 for 2017 Water Sampling Results				
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 #)
Turbidity	N/A	
Chlorine	N/A	
Fluoride (If the DWS provides fluoridation)	Please see 2011 Reports pages 16-20	

NOTE: Record the unit of measure if it is **not** milligrams per litre.

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				
Arsenic	Please see 2011 Reports pages 16-20			
Barium				
Boron				
Cadmium				
Chromium				
Lead				
Mercury				
Selenium				
Sodium				
Uranium				
Fluoride				
Nitrite				
Nitrate				

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

Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
Alachlor	Please see 2011 Reports pages 16-20			
Aldicarb				

Aldrin + Dieldrin				
Atrazine + N-dealkylated metabolites				
Azinphos-methyl				
Bendiocarb				
Benzene	Please see 2011 Reports Pages 16-20			
Benzo(a)pyrene				
Bromoxynil				
Carbaryl				
Carbofuran				
Carbon Tetrachloride				
Chlordane (Total)				
Chlorpyrifos				
Cyanazine				
Diazinon				
Dicamba				
1,2-Dichlorobenzene				
1,4-Dichlorobenzene				
Dichlorodiphenyltrichloroethane (DDT) + metabolites				
1,2-Dichloroethane				
1,1-Dichloroethylene (vinylidene chloride)				
Dichloromethane				
2-4 Dichlorophenol				
2,4-Dichlorophenoxy acetic acid (2,4-D)				
Diclofop-methyl				
Dimethoate				
Dinoseb				
Diquat				
Diuron				
Glyphosate				
Heptachlor + Heptachlor Epoxide				
Lindane (Total)				
Malathion				
Methoxychlor				
Metolachlor				
Metribuzin				
Monochlorobenzene				
Paraquat				
Parathion				
Pentachlorophenol				
Phorate				
Picloram				
Polychlorinated Biphenyls(PCB)				

Prometryne				
Simazine				
THM (NOTE: show latest annual average)	Please see 2011 Reports pages 16-20			
Temephos				
Terbufos				
Tetrachloroethylene				
2,3,4,6-Tetrachlorophenol				
Triallate				
Trichloroethylene				
2,4,6-Trichlorophenol				
2,4,5-Trichlorophenoxy acetic acid (2,4,5-T)				
Trifluralin				
Vinyl Chloride				

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

Drinking Water System Description:

Golden Lake Camp has two identical water treatment systems, one in its Staff House at 54 McNee Drive, Golden Lake, ON, and the other in its Dining (Assembly) Hall at 63 McNee Drive, Golden Lake, ON. They were installed in June 2004 and certified as compliant with the requirements of Regulation 170/03 by Jp2g Consultants Inc, of Pembroke, in July of the same

year.

Each system is classified as "small, non-municipal nonresidential," providing potable water for

a children's camp, which is a "designated facility."

Each of the two systems is fed from its own well, classified as GUDI ("ground water under the

direct influence of surface water"). Therefore, a cartridge filtration system and UV disinfection

system in compliance with "Procedure for Disinfection of Drinking Water in Ontario" were specified for and installed on each system.

To provide the required disinfection, the installations employ a Point-of-Entry system in each building, consisting of cartridge filtration followed by UV disinfection. Each point of entry system has two parallel trains of cartridge filters, with each train consisting of a 5 micron nominal and a 1 micron absolute filter.

Each UV unit installed is a Hallet Model 13, rated to provide minimum of 65 mJ/cm² at 13 USgpm and UVT of 75% at end of lamp life. The UV system has a solenoid shut-off, so that on

alarm or failure to disinfect, the solenoid closes, shutting off flow to the water system. Dual lamp sensors are used for UV and water quality, with flow shut off low UV or poor water quality. The UV equipment is NSF/ANSI 55 Class 55 A rated, and has flow limiter to limit maximum flow to maximum rated flow.

Client: GOLDEN LAKE UNITED CHURCH CAMP ASSEMBLY HALL
 RR #1
 Golden Lake, ON
 K0J 1X0
 Attention: Mr. Ed McCaig
 PO#:
 Invoice to: Golden Lake Camp

Report Number: 1711047
 Date Submitted: 2017-06-28
 Date Reported: 2017-06-30
 Project:
 COC #: 56101
 Waterworks/Facility: 260034892

Group		Analyte	MRL	Units	Guideline	1301838 Supply Water RAW WATER 2017-06-27 Raw Water 2-1	1301839 Supply Water DISTRIBUTION 2017-06-27 E.Coli 2-3
AWQI Report		AWQI Report					133672
Others		Escherichia Coli	0	ct/100mL	MAC 0	0	0
		Total Coliforms	0	ct/100mL	MAC 0	3*	2*

Guideline = MOE REG. 170/03
*** = Guideline Exceedence**

All analysis completed in Ottawa, Ontario (unless otherwise indicated by ** which indicates analysis was completed in Mississauga, Ontario).

Results relate only to the parameters tested on the samples submitted.

Analytical Method: AMBCOLM1

additional QA/QC information available on request.

146 Colonnade Rd. Unit 8, Ottawa, ON K2E 7Y1

MRL = Method Reporting Limit, AO = Aesthetic Objective, OG = Operational Guideline, MAC = Maximum Acceptable Concentration, IMAC = Interim Maximum Acceptable Concentration, STD = Standard, PWQO = Provincial Water Quality Guideline, IPWQO = Interim Provincial Water Quality Objective, TDR = Typical Desired Range



Notices 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 3 – Adverse Analytical Results

AWQI Number *

133672

Is this a re-sample? *

☐ Yes

☒ No

☐ Unknown If Yes, then provide initial AWQI number

Licensed Laboratory Name *

Eurofins Environment Testing Canada

MOECC Laboratory License Number *

2318

Microbiological Testing

Laboratory Submission ID *	Laboratory Sample ID *	Date/Time – Sample Collected (yyyy/mm/dd)	Sample Type and Sample Location * U: Untreated* T: Treated** D: Distribution	Count / 100 mL		P-A / 100mL Confirmed	Date Data Approved (yyyy/mm/dd) *	Chlorine Residual (mg/l)*** / F- Free / C-Combined
				Total Coliforms (TC)	E. coli (EC)			
1711047	1301839	2017/06/27	2-3 <input type="checkbox"/> U <input type="checkbox"/> T <input checked="" type="checkbox"/> D	2	0	TC <input type="checkbox"/> EC <input type="checkbox"/>	2017/06/29	F <input type="checkbox"/> mg/L C <input type="checkbox"/>
			<input type="checkbox"/> U <input type="checkbox"/> T <input type="checkbox"/> D			TC <input type="checkbox"/> EC <input type="checkbox"/>		F <input type="checkbox"/> mg/L C <input type="checkbox"/>

Physical or Chemical or Radiological Testing

Laboratory Submission ID *	Laboratory Sample ID *	Date/Time – Sample Collected (yyyy/mm/dd)	Sample Type and Sample Location * U: Untreated* T: Treated** D: Distribution	Parameter *	Result(s)**** *	Units of Measure/ Standard	Date Data Approved (yyyy/mm/dd) *
			<input type="checkbox"/> U <input type="checkbox"/> T <input type="checkbox"/> D				
			<input type="checkbox"/> U <input type="checkbox"/> T <input type="checkbox"/> D				

Has Health Unit been notified? *

☒ Yes

☐ No

Health Unit Name *

Renfrew County & District Health Unit

Users Advised to Boil/Seek Alternate Water

☐ Yes

☐ No

Client: GOLDEN LAKE UNITED CHURCH CAMP ASSEMBLY HALL
 RR #1
 Golden Lake, ON
 K0J 1X0
 Attention: Mr. Ed McCaig
 PO#:
 Invoice to: Golden Lake Camp

Report Number: 1711502
 Date Submitted: 2017-06-30
 Date Reported: 2017-07-02
 Project:
 COC #: 56102
 Waterworks/Facility: 260034892

					Lab I.D. Sample Matrix Sample Type Sampling Date Sample I.D.
Group	Analyte	MRL	Units	Guideline	
Others	Escherichia Coli	0	ct/100mL	MAC 0	1302902 Supply Water DISTRIBUTION 2017-06-30 Golden Lake
	Total Coliforms	0	ct/100mL	MAC 0	

Guideline = MOE REG. 170/03
*** = Guideline Exceedence**

All analysis completed in Ottawa, Ontario (unless otherwise indicated by ** which indicates analysis was completed in Mississauga, Ontario).

Results relate only to the parameters tested on the samples submitted.

Analytical Method: AMBCOLM1

additional QA/QC information available on request.

146 Colonnade Rd. Unit 8, Ottawa, ON K2E 7Y1

MRL = Method Reporting Limit, AO = Aesthetic Objective, OG = Operational Guideline, MAC = Maximum Acceptable Concentration, IMAC = Interim Maximum Acceptable Concentration, STD = Standard, PWQO = Provincial Water Quality Guideline, IPWQO = Interim Provincial Water Quality Objective, TDR = Typical Desired Range

Client: GOLDEN LAKE UNITED CHURCH CAMP ASSEMBLY HALL
RR #1
Golden Lake, ON
K0J 1X0
Attention: Mr. Ed McCaig
PO#:
Invoice to: Golden Lake Camp

Report Number: 1712383
Date Submitted: 2017-07-07
Date Reported: 2017-07-09
Project:
COC #: 69142
Waterworks/Facility: 260034892

					Lab I.D.	1304789 Supply Water DISTRIBUTION 2017-07-06 Assembly Hall
					Sample Matrix	
					Sample Type	
					Sampling Date	
					Sample I.D.	
Group	Analyte	MRL	Units	Guideline		
Others	Escherichia Coli	0	ct/100mL	MAC 0	0	
	Total Coliforms	0	ct/100mL	MAC 0	0	

Guideline = MOE REG. 170/03*** = Guideline Exceedence**

All analysis completed in Ottawa, Ontario (unless otherwise indicated by ** which indicates analysis was completed in Mississauga, Ontario).

Results relate only to the parameters tested on the samples submitted.

Analytical Method: AMBCOLM1

additional QA/QC information available on request.

146 Colonnade Rd. Unit 8, Ottawa, ON K2E 7Y1

MRL = Method Reporting Limit, AO = Aesthetic Objective, OG = Operational Guideline, MAC = Maximum Acceptable Concentration, IMAC = Interim Maximum Acceptable Concentration, STD = Standard, PWQO = Provincial Water Quality Guideline, IPWQO = Interim Provincial Water Quality Objective, TDR = Typical Desired Range

Client: GOLDEN LAKE UNITED CHURCH CAMP ASSEMBLY HALL
 RR #1
 Golden Lake, ON
 K0J 1X0
 Attention: Mr. Ed McCaig
 PO#:
 Invoice to: Golden Lake Camp

Report Number: 1713753
 Date Submitted: 2017-07-25
 Date Reported: 2017-07-26
 Project:
 COC #: 71261
 Waterworks/Facility: 260034892

					1308144 Supply Water RAW WATER 2017-07-24 Raw Water 2-1	1308145 Supply Water DISTRIBUTION 2017-07-24 Ecoli 2-3
Group	Analyte	MRL	Units	Guideline		
Others	Escherichia Coli	0	ct/100mL	MAC 0	0	0
	Total Coliforms	0	ct/100mL	MAC 0	0	0

Guideline = MOE REG. 170/03

* = Guideline Exceedence

All analysis completed in Ottawa, Ontario (unless otherwise indicated by ** which indicates analysis was completed in Mississauga, Ontario).

Results relate only to the parameters tested on the samples submitted.

Analytical Method: AMBCOLM1

additional QA/QC information available on request.

146 Colonnade Rd. Unit 8, Ottawa, ON K2E 7Y1

MRL = Method Reporting Limit, AO = Aesthetic Objective, OG = Operational Guideline, MAC = Maximum Acceptable Concentration, IMAC = Interim Maximum Acceptable Concentration, STD = Standard, PWQO = Provincial Water Quality Guideline, IPWQO = Interim Provincial Water Quality Objective, TDR = Typical Desired Range

Environment Testing

Client: GOLDEN LAKE UNITED CHURCH CAMP ASSEMBLY HALL
 RR #1
 Golden Lake, ON
 K0J 1X0
 Attention: Mr. Ed McCaig
 PO#:
 Invoice to: Golden Lake Camp

Report Number: 1715847
 Date Submitted: 2017-08-22
 Date Reported: 2017-08-23
 Project:
 COC #: 71262
 Waterworks/Facility: 260034892

					Lab I.D. Sample Matrix Sample Type Sampling Date Sample I.D.	1315117 Supply Water RAW WATER 2017-08-21 Raw Water 2-1	1315118 Supply Water DISTRIBUTION 2017-08-21 E-Coli 2-3
Group	Analyte	MRL	Units	Guideline			
Others	Escherichia Coli	0	ct/100mL	MAC 0		0	0
	Total Coliforms	0	ct/100mL	MAC 0		0	0

Guideline = MOE REG. 170/03

* = Guideline Exceedence

All analysis completed in Ottawa, Ontario (unless otherwise indicated by ** which indicates analysis was completed in Mississauga, Ontario).

Results relate only to the parameters tested on the samples submitted.

Analytical Method: AMBCOLM1

additional QA/QC information available on request.

146 Colonnade Rd. Unit 8, Ottawa, ON K2E 7Y1

MRL = Method Reporting Limit, AO = Aesthetic Objective, OG = Operational Guideline, MAC = Maximum Acceptable Concentration, IMAC = Interim Maximum Acceptable Concentration, STD = Standard, PWQO = Provincial Water Quality Guideline, IPWQO = Interim Provincial Water Quality Objective, TDR = Typical Desired Range

Client: GOLDEN LAKE UNITED CHURCH CAMP ASSEMBLY HALL
 RR #1
 Golden Lake, ON
 K0J 1X0
 Attention: Mr. Ed McCaig
 PO#:
 Invoice to: Golden Lake Camp

Report Number: 1715832
 Date Submitted: 2017-08-22
 Date Reported: 2017-08-23
 Project:
 COC #: 71262
 Waterworks/Facility: 260034892

		Lab I.D.		Sample Matrix	
		Sample Type		Sampling Date	
		Sample I.D.			
Group	Analyte	MRL	Units	Guideline	
General Chemistry	N-NO2	0.10	mg/L	MAC 1.0	<0.10
	N-NO3	0.10	mg/L	MAC 10.0	1.81
	NO2 + NO3 as N	0.10	mg/L	MAC 10.0	1.81

1315079
 Supply Water
 TREATEDWATER
 2017-08-21
 Assembly House
 No2/No3

Guideline = MOE REG. 170/03

*** = Guideline Exceedence**

All analysis completed in Ottawa, Ontario (unless otherwise indicated by ** which indicates analysis was completed in Mississauga, Ontario).
 Results relate only to the parameters tested on the samples submitted.
 Methods references and/or additional QA/QC information available on request.

MRL = Method Reporting Limit, AO = Aesthetic Objective, OG = Operational Guideline, MAC = Maximum Acceptable Concentration, IMAC = Interim Maximum Acceptable Concentration, STD = Standard, PWQO = Provincial Water Quality Guideline, IPWQO = Interim Provincial Water Quality Objective, TDR = Typical Desired Range

Certificate of Analysis

Client: GOLDEN LAKE UNITED CHURCH CAMP ASSEMBLY HALL
RR #1
Golden Lake, ON
K0J 1X0
Attention: Mr. Ed McCaig
PO#:
Invoice to: Golden Lake Camp

Report Number: 1715832
Date Submitted: 2017-08-22
Date Reported: 2017-08-23
Project:
COC #: 71262
Waterworks/Facility: 260034892

QC Summary

Analyte	Blank	QC % Rec	QC Limits
Run No 332097 Analysis/Extraction Date 2017-08-23 Analyst H D			
Method C SM4500-NO3-F			
N-NO2	<0.10 mg/L	100	80-120
N-NO3	<0.10 mg/L	107	80-120
NO2 + NO3 as N	<0.10 mg/L	104	80-120

Guideline = MOE REG. 170/03

* = Guideline Exceedence

All analysis completed in Ottawa, Ontario (unless otherwise indicated by ** which indicates analysis was completed in Mississauga, Ontario).

Results relate only to the parameters tested on the samples submitted.

Methods references and/or additional QA/QC information available on request.

MRL = Method Reporting Limit, AO = Aesthetic Objective, OG = Operational Guideline, MAC = Maximum Acceptable Concentration, IMAC = Interim Maximum Acceptable Concentration, STD = Standard, PWQO = Provincial Water Quality Guideline, IPWQO = Interim Provincial Water Quality Objective, TDR = Typical Desired Range

Client: **GOLDEN LAKE UNITED CHURCH CAMP ASSEMBLY HALL**
RR #1

Golden Lake, ON
K0J 1X0

Attention: **Mr. Ed McCaig**

Facility #: 260034892

INVOICE: Golden Lake Camp

Chain of Custody Number: 142026

Report Number: 1114568

Date: 2011-07-29

Date Submitted: 2011-06-30

XML UPLOAD FILE: 1106188

Project:

P.O. Number:

Matrix: Supply Water

			LAB ID:	892890	892891				GUIDELINE		
			Sample Date:	2011-06-29	2011-06-29				MOE REG. 170/03		
			Sample ID:	Treated Water	Dist Water						
PARAMETER	UNITS	MRL	TREATED	DISTRIBUTION					TYPE	LIMIT	UNITS
Fluoride	mg/L	0.1	0.11						MAC	1.5	mg/L
N-NO2 (Nitrite)	mg/L	0.1	<0.10						MAC	1.0	mg/L
N-NO3 (Nitrate)	mg/L	0.1	0.71						MAC	10.0	mg/L
NO2 + NO3 as N	mg/L	0.1	0.71						MAC	10.0	mg/L
Sodium	mg/L	2	70						MAC	20	mg/L
Antimony	mg/L	0.0005	<0.0005						IMAC	0.006	mg/L
Arsenic	mg/L	0.001	<0.001						IMAC	0.025	mg/L
Barium	mg/L	0.01	0.17						MAC	1.0	mg/L
Boron	mg/L	0.01	0.02						IMAC	5.0	mg/L
Cadmium	mg/L	0.0001	<0.0001						MAC	0.005	mg/L
Chromium	mg/L	0.001	0.005						MAC	0.05	mg/L
Lead	mg/L	0.001		<0.001					MAC	0.010	mg/L
Mercury	mg/L	0.0001	<0.0001						MAC	0.001	mg/L
Selenium	mg/L	0.001	<0.005						MAC	0.01	mg/L
Uranium	mg/L	0.001	0.001						MAC	0.02	mg/L
AWQI Report			101859								

MRL = Method Reporting Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

Comment:

892890: Selenium MRL elevated due to matrix interference.

APPROVAL: _____

Ewan McRobbie

Inorganic Lab Supervisor

Methods references and/or additional QA/QC information available on request.

Client: **GOLDEN LAKE UNITED CHURCH CAMP ASSEMBLY HALL**
RR #1

Golden Lake, ON
K0J 1X0

Attention: **Mr. Ed McCaig**

Facility #: 260034892

INVOICE: Golden Lake Camp

Chain of Custody Number: **142026**

Report Number: 1114568

Date: 2011-07-29

Date Submitted: 2011-06-30

XML UPLOAD FILE: 1106188

Project:

P.O. Number:

Matrix: Supply Water

			LAB ID:	892890	892891				GUIDELINE		
			Sample Date:	2011-06-29	2011-06-29						
			Sample ID:	Treated Water	Dist Water				MOE REG. 170/03		
PARAMETER	UNITS	MRL	TREATED	DISTRIBUTION					TYPE	LIMIT	UNITS
TABLE B COMPOUNDS (VOCs)											
1,1-dichloroethylene	ug/L	0.5	<0.5						MAC	14	ug/L
1,2-dichlorobenzene	ug/L	0.4	<0.4						MAC	200	ug/L
1,2-dichloroethane	ug/L	0.5	<0.5						IMAC	5	ug/L
1,4-dichlorobenzene	ug/L	0.4	<0.4						MAC	5	ug/L
Benzene	ug/L	0.5	<0.5						MAC	5	ug/L
Carbon Tetrachloride	ug/L	0.5	<0.5						MAC	5	ug/L
Dichloromethane	ug/L	4	<4.0						MAC	50	ug/L
Monochlorobenzene	ug/L	0.2	<0.2						MAC	80	ug/L
Tetrachloroethylene	ug/L	0.3	<0.3						MAC	30	ug/L
Trichloroethylene	ug/L	0.3	<0.3						MAC	5	ug/L
Vinyl Chloride	ug/L	0.2	<0.2						MAC	2	ug/L
Bromodichloromethane	ug/L	0.3		<0.3							
Bromoform	ug/L	0.4		<0.4							
Chloroform	ug/L	0.5		<0.5							
Dibromochloromethane	ug/L	0.3		<0.3							
Trihalomethanes (total)	ug/L	0.3		<1.5					MAC	100	ug/L
TABLE B SURROGATES											
Toluene-d8	%		100	97							
4-bromofluorobenzene	%		112								
1,2-dichloroethane-d4	%		100								

MRL = Method Reporting Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

Comment:

APPROVAL:

Mina Nasirai

Organic Lab Supervisor

Methods references and/or additional QA/QC information available on request.

Client: **GOLDEN LAKE UNITED CHURCH CAMP ASSEMBLY HALL**
RR #1

Golden Lake, ON
K0J 1X0

Attention: **Mr. Ed McCaig**

Facility #: 260034892

INVOICE: Golden Lake Camp

Chain of Custody Number: **142026**

Report Number: 1114568

Date: 2011-07-29

Date Submitted: 2011-06-30

XML UPLOAD FILE: 1106188

Project:

P.O. Number:

Matrix: Supply Water

			LAB ID:	892890						GUIDELINE		
			Sample Date:	2011-06-29						MOE REG. 170/03		
			Sample ID:	Treated Water								
PARAMETER	UNITS	MRL	TREATED							TYPE	LIMIT	UNITS
Organochlorine Pesticides (OCPs) & PCBs												
Aldrin	ug/L	0.006	<0.006							MAC	0.7	ug/L
Dieldrin	ug/L	0.006	<0.006									
Aldrin + Dieldrin	ug/L	0.012	<0.012									
a-chlordane	ug/L	0.006	<0.006									
g-chlordane	ug/L	0.006	<0.006									
Oxychlordane	ug/L	0.006	<0.006							MAC	7	ug/L
Chlordane (Total)	ug/L	0.018	<0.018									
op-DDT	ug/L	0.006	<0.006									
pp-DDD	ug/L	0.006	<0.006									
pp-DDE	ug/L	0.006	<0.006									
pp-DDT	ug/L	0.006	<0.006							MAC	30	ug/L
Dichlorodiphenyltrichloroethane (DDT) + Metabolites	ug/L	0.024	<0.024									
alpha-BHC	ug/L	0.006	<0.006									
beta-BHC	ug/L	0.006	<0.006									
delta-BHC	ug/L	0.006	<0.006									
Endosulfan I	ug/L	0.006	<0.006									
Endosulfan II	ug/L	0.02	<0.02									
Endrin	ug/L	0.006	<0.006									
gamma-BHC (Lindane)	ug/L	0.006	<0.006									
Heptachlor	ug/L	0.006	<0.006									
Heptachlor epoxide	ug/L	0.006	<0.006									
Heptachlor + Heptachlor Epoxide	ug/L	0.012	<0.012							MAC	3	ug/L
Lindane (Total)	ug/L	0.005	<0.005							MAC	4	ug/L
Methoxychlor	ug/L	0.024	<0.024							MAC	900	ug/L
Polychlorinated Biphenyls (PCBs)	ug/L	0.1	<0.1							IMAC	3	ug/L
CHLOROPHENOLS												
2,3,4,6-tetrachlorophenol	ug/L	0.5	<0.5							MAC	100	ug/L
2,4,6-trichlorophenol	ug/L	0.5	<0.5							MAC	5	ug/L
2,4-dichlorophenol	ug/L	0.5	<0.5							MAC	900	ug/L

MRL = Method Reporting Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

Comment:

892890: Sample was subcontracted for Triazine analysis.

APPROVAL:

Mina Nasirai

Organic Lab Supervisor

Methods references and/or additional QA/QC information available on request.

Client: **GOLDEN LAKE UNITED CHURCH CAMP ASSEMBLY HALL**
RR #1

Golden Lake, ON
K0J 1X0

Attention: **Mr. Ed McCaig**

Facility #: 260034892

INVOICE: Golden Lake Camp

Chain of Custody Number: **142026**

Report Number: 1114568

Date: 2011-07-29

Date Submitted: 2011-06-30

XML UPLOAD FILE: 1106188

Project:

P.O. Number:

Matrix: Supply Water

			LAB ID:	892890						GUIDELINE		
			Sample Date:	2011-06-29								
			Sample ID:	Treated Water						MOE REG. 170/03		
PARAMETER	UNITS	MRL	TREATED							TYPE	LIMIT	UNITS
Pentachlorophenol	ug/L	0.5	<0.5							MAC	60	ug/L
PHENOXYACID HERBICIDES												
2,4,5-trichlorophenoxyacetic acid (2,4,5-T)	ug/L	1	<1							MAC	280	ug/L
2,4-dichlorophenoxyacetic acid (2,4-D)	ug/L	1	<1							IMAC	100	ug/L
Bromoxynil	ug/L	0.5	<0.5							IMAC	5	ug/L
Dicamba	ug/L	1	<1							MAC	120	ug/L
Dinoseb	ug/L	1	<1							MAC	10	ug/L
Picloram	ug/L	5	<5							IMAC	190	ug/L
CARBAMATES												
Aldicarb	ug/L	5	<5							MAC	9	ug/L
Bendiocarb	ug/L	2	<2							MAC	40	ug/L
Carbaryl	ug/L	5	<5							MAC	90	ug/L
Carbofuran	ug/L	5	<5							MAC	90	ug/L
TRIAZINE & RELATED HERBICIDES												
Alachlor	ug/L	0.5	<0.5							IMAC	5	ug/L
Atrazine	ug/L	0.01	0.01									
De-ethylated atrazine	ug/L	0.01	<0.01									
Atrazine + N-dealkylated metabolites	ug/L	0.01	<0.01							IMAC	5	ug/L
Cyanazine	ug/L	0.03	0.03							IMAC	10	ug/L
Metolachlor	ug/L	0.01	<0.01							IMAC	50	ug/L
Metribuzin	ug/L	0.02	<0.02							MAC	80	ug/L
Prometryne	ug/L	0.25	<0.25							IMAC	1	ug/L
Simazine	ug/L	0.01	0.01							IMAC	10	ug/L
ORGANOPHOSPHOROUS PESTICIDES												
Azinphos-methyl	ug/L	2	<2							MAC	20	ug/L
Chlorpyrifos	ug/L	1	<1							MAC	90	ug/L
Diazinon	ug/L	1	<1							MAC	20	ug/L
Diclofop-methyl	ug/L	0.9	<0.9							MAC	9	ug/L
Dimethoate	ug/L	2.5	<2.5							IMAC	20	ug/L
Malathion	ug/L	5	<5							MAC	190	ug/L

MRL = Method Reporting Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

Comment:

APPROVAL: _____

Mina Nasirai

Organic Lab Supervisor

Methods references and/or additional QA/QC information available on request.

Client: **GOLDEN LAKE UNITED CHURCH CAMP ASSEMBLY HALL**
RR #1

Golden Lake, ON
K0J 1X0

Attention: **Mr. Ed McCaig**
Facility #: 260034892

INVOICE: Golden Lake Camp

Chain of Custody Number: **142026**

Report Number: 1114568
Date: 2011-07-29
Date Submitted: 2011-06-30
XML UPLOAD FILE: 1106188
Project:

P.O. Number:
Matrix: Supply Water

			LAB ID:	892890						GUIDELINE		
			Sample Date:	2011-06-29						MOE REG. 170/03		
			Sample ID:	Treated Water								
PARAMETER	UNITS	MRL	TREATED							TYPE	LIMIT	UNITS
Parathion	ug/L	1	<1							MAC	50	ug/L
Phorate	ug/L	0.5	<0.5							IMAC	2	ug/L
Temephos	ug/L	10	<10							IMAC	280	ug/L
Terbufos	ug/L	0.4	<0.4							IMAC	1	ug/L
Triallate	ug/L	1	<1							MAC	230	ug/L
Trifluralin	ug/L	0.02	<0.02							IMAC	45	ug/L
DIURON & GLYPHOSATE												
Diuron	ug/L	10	<10							MAC	150	ug/L
Glyphosate	ug/L	10	<10							IMAC	280	ug/L
DIQUAT & PARAQUAT												
Diquat	ug/L	5	<5							MAC	70	ug/L
Paraquat	ug/L	5	<5							IMAC	10	ug/L
BENZO (a) PYRENE												
Benzo(a)pyrene	ug/L	0.01	<0.01							MAC	0.01	ug/L

MRL = Method Reporting Limit INC = Incomplete AO = Aesthetic Objective OG = Operational Guideline MAC = Maximum Allowable Concentration IMAC = Interim Maximum Allowable Concentration

Comment:

APPROVAL: _____
Mina Nasirai
Organic Lab Supervisor

Methods references and/or additional QA/QC information available on request.