
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 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 No Unknown If Yes, then provide initial AWQI number

 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

sgalijas@caduceonlabs.com

Fax Number (including area code)

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.

Section 1 continued.

Position of Person Contacted *

Manager

Telephone Number (including area code) *

519 258-2146

Fax Number (including area code)

Date (yyyy/mm/dd) *

2018/02/21

Time (hh:mm) *

3:33 PM

Email Address

pwong@wechu.org

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

Last Name *

Capicciotti

First Name *

Brenda

Position of Person Contacted *

Environmental Officer

Person Notifying *

Microbiology Analyst

Date (yyyy/mm/dd) *

2018/02/21

Time (hh:mm) *

3:37 PM

Name *

Lana Galijas

Signature

SGalijas

Date (yyyy/mm/dd) *

2018/02/21

Comments

Note: Use Section 3 to attach laboratory report.

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 * **138775** Is this a re-sample? *
 Yes No Unknown If Yes, then provide initial AWQI number
 Licensed Laboratory Name * **Caduceon Environmental Labas** MOECC Laboratory License Number * **2276**

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)			
B18-04324	7	2018/02/20 10:	Manning/County Rd #34/Auto Flusher <input type="checkbox"/> U <input type="checkbox"/> T <input checked="" type="checkbox"/> D	32	0	TC <input type="checkbox"/> EC <input type="checkbox"/>	2018/02/21	F <input checked="" type="checkbox"/> 0.66 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) *
n/a	n/a	n/a	n/a <input type="checkbox"/> U <input type="checkbox"/> T <input checked="" type="checkbox"/> D	n/a	n/a	n/a	2018/02/21
			<input type="checkbox"/> U <input type="checkbox"/> T <input type="checkbox"/> D				

Has Health Unit been notified? *
 Yes No
 Health Unit Name * **WECHU**
 Users Advised to Boil/Seek Alternate Water
 Yes No

Fields marked with an asterisk (*) are mandatory.

Section 3 continued.

Other Information Attached Yes No

Attached File Name	Created	Modified	Size (MB)	Remove Selected File
				<input type="checkbox"/>
Number of attachments			0	

Please describe any other direction perscribed 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

Name of Person Contacted

Last Name Wong	First Name Philip	Position Title Manager	Date (yyyy/mm/dd) 2018/02/21	Time (hh:mm) 3:35 AM
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Drinking Water Systems Contact

Name of Person Contacted

Last Name Berthiaume	First Name Denis	Telephone Number 519-735-2184	ext. 141
Position Title Manager, water & wastewater		Fax Number 519-735-1895	

Adverse Water Quality Test Results Corrective Action and Issue Resolution

Name of Drinking Water System Town of Tecumseh water distribution	Date of Resolution (yyyy/mm/dd)
Initial AWQI Notification Number(s) 138775	All Resample AWQI Numbers

Corrective Actions to be taken by Owner/Operator

Corrective Actions	Required	Completed	Comments
Warning notice posted	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Resample and test	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Disinfectant restored / increased	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Mains / pipes flushed	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	
Users advised to boil water / seek alternate source	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> N/A	Health Unit's boil water advisory letter was delivered by town operator Vern. Brad spoke with Nikola Radakovic (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:

Title of Public Health Unit Contact

Manager

Telephone Number

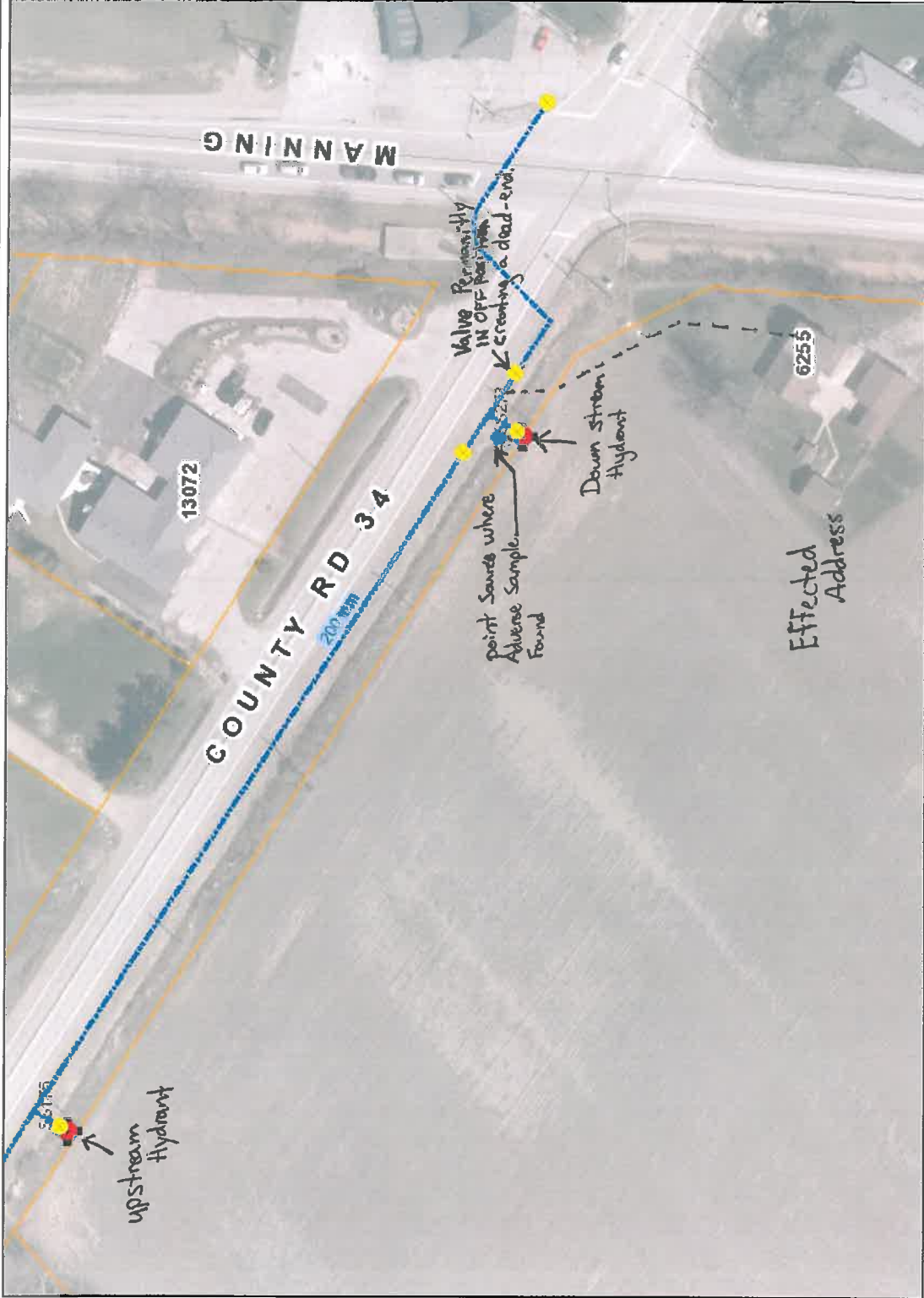
519-258-2146

ext. **3159**

Business Address

Unit Number	Street Number	Street Name	PO Box
	1005	Ouellette Avenue	
City/Town	Province		Postal Code
Windsor	Ontario		N9A 4J8

Town of Tecumseh Mapping



Notes
Enter Map Description

THIS MAP IS NOT TO BE USED FOR NAVIGATION
Copyright the Town of Tecumseh, 2016. Data herein is provided by the Town of Tecumseh on an 'as is' basis. Assessment parcel provided by Teranet Enterprises Inc. Data layers that appear on this map may or may not be accurate, current, or otherwise reliable.



Legend

- Water Valve
- Water Sampling Station
- Hydrants
 - Provincial, Active
 - Town of Tecumseh, Active
 - Other Ownership, Active
 - City of Windsor, Active
 - Other Ownership, Removed
 - Town of Tecumseh, Removed
- Water AutoFlush Station
- Watermain
 - Abandoned
 - Active
 - Inactive
 - Proposed
 - Removed
 - Unknown
- Water Lateral Line
 - Other
 - Active
- Address
- Tecumseh Assessment (Tax F MPAC Nov 3, 2017)
- Lake
- Street Centreline
- Rail Road
- Parks

0 16.98 34.0 Meters

1:1,019

2/22/2018

Brad Dupuis

From: Petersen, Al (MOECC) <Al.Petersen@ontario.ca>
Sent: February-23-18 9:03 AM
To: Brad Dupuis
Cc: Denis Berthiaume
Subject: FW: AWQI 138775
Attachments: WD_138775_170_2a_2018_02_22_.pdf; AWQIs_4444E_Feb17.pdf

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.

Denis Berthiaume

From: Petersen, Al (MOECC) <Al.Petersen@ontario.ca>
Sent: February-22-18 9:17 AM
To: Denis Berthiaume
Cc: Brad Dupuis; pwong@wechu.org
Subject: RE: Town of Tecumseh adverse sample

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

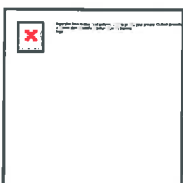
From: Denis Berthiaume [<mailto:dberthiaume@tecumseh.ca>]
Sent: Wednesday, February 21, 2018 4:46 PM
To: pwong@wechu.org
Cc: Brad Dupuis; Petersen, Al (MOECC)
Subject: Town of Tecumseh adverse sample

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 our 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



Denis Berthiaume
Manager Water & Wastewater
dberthiaume@tecumseh.ca

Town of Tecumseh - 1189 Lacasse Blvd. - Tecumseh, ON. - N8N 1W9
Phone: 519-735-4225 ,141 Fax: 519-735-1895 - www.tecumseh.ca

***** 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.

Brad Dupuis

From: Brad Dupuis
Sent: February-23-18 4:30 PM
To: 'moe.sac.moe@ontario.ca'; Paytens Cell (paydesjardins4@live.com); 'pwong@wechu.org'
Cc: Denis Berthiaume; 'Petersen, AI (MOECC)'
Subject: Notices of Adverse Test Results and Issue Resolution (Schedule 16)
Attachments: AWQIs_4444E_Feb17 (2).pdf

Please see attached.

Any questions please contact myself at 519-791-6509 or Denis Berthiaume at 519-818-9611

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).

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[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.

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

DWS Name *

Town of Tecumseh water distribution

DWS Number *

260004969

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? * <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No <input type="checkbox"/> Self Imposed Advisory	Advisory Type * Boil Water	Date Issued (yyyy/mm/dd) 2018/02/22
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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

Attached File Name	Created	Modified	Size (MB)	Remove Selected File
WECHU precautionary boil water 6255 Mannir	02/23/2018 13:49:4	02/23/2018 13:49:46	0.27	<input type="checkbox"/>
1st set of samples.pdf	02/23/2018 13:57:3	02/23/2018 13:57:34	0.2	<input type="checkbox"/>
Map of area for reference.pdf	02/23/2018 14:10:3	02/23/2018 14:10:38	0.08	<input type="checkbox"/>
2nd set of samples.pdf	02/23/2018 16:19:4	02/23/2018 16:19:42	0.2	<input type="checkbox"/>
WECHU precautionary boil water 6255 Mannir	02/23/2018 16:21:1	02/23/2018 16:21:13	0.04	<input type="checkbox"/>
Number of attachments			5	

Prepared By *

Brad Dupuis

Signature

Bradley Dupuis

Date (yyyy/mm/dd) *

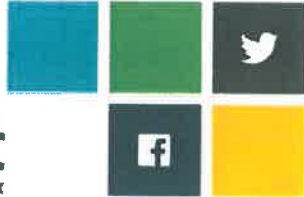
2018/02/23

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.



519-258-2146 | www.wechu.org

Windsor 1005 Ouellette Avenue, Windsor, ON N9A 4J8
Essex 360 Fairview Avenue West, Suite 215, Essex, ON N8M 3G4
Leamington 33 Princess Street, Leamington, ON N8H 5C5

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,

A handwritten signature in black ink, appearing to read "Philip Wong".

Philip Wong, Manager
Environmental Health Department

PW/la

SAFE WATER DRINKING



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.

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.

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.



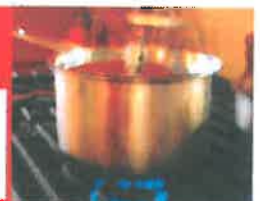
YOUR HEALTH IS OUR CONCERN.

Continue with these procedures until you have been notified by the Windsor-Essex County Health Unit that the boil water advisory has been lifted. Be sure to follow any instructions provided regarding flushing pipes before use.

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:

Health Canada. (2015). *Guidance for issuing and rescinding boil water advisories in Canadian drinking water supplies*. Retrieved from <http://www.healthycanadians.gc.ca/publications/healthy-living-vie-saine/water-advisories-avis-eau/index-eng.php>

Health Canada. (2008). *Boil water advisories and boil water orders*. Retrieved from <http://www.hc-sc.gc.ca/ewh-semt/pubs/water-eau/boil-ebullition-eng.php>

C.O.C.: DW1802211730-W

REPORT No. B18-04598

Report To:

Town of Tecumseh
 1189 LaCasse Blvd,
 Tecumseh Ontario N8N 2C7 Canada

Attention: Denis Berthiaume

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

DATE RECEIVED: 21-Feb-18

JOB/PROJECT NO.: Town of Tecumseh

DATE REPORTED: 22-Feb-18

P.O. NUMBER:

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 260004969

Parameter	Total Coliform	E coli			
Units	cfu/100mL	cfu/100mL			
R.L.	1	1			
Reference Method	MOE E3407	MOE E3407			
Date Analyzed/Site	21-Feb-18/W	21-Feb-18/W			

Client I.D.	Sample I.D.	Date Collected				
Manning/Cty. Rd #34/Auto Flusher	B18-04598-1	21-Feb-18	0	0		
F.H. 2m East of Auto Flusher on Cty. Rd#34	B18-04598-2	21-Feb-18	0	0		
F.H. Upstream Cty.Rd#34	B18-04598-3	21-Feb-18	0	0		



Michelle Dubien
 Lab Manager

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

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.

DRINKING WATER SUBMISSION FORM



Client committed. Quality assured.

Indicate Laboratory Samples are Submitted to

Kingston Ottawa Peterborough Windsor

Organization: **Town of Tecumseh**

Contact: **Jenise Berthiaume**

Phone: **519-991-7071**

Fax: **519-735-1895**

Public Health Unit: **519-258-2146**

Quote No.: **260004969**

Waterworks No.: **Town of Tecumseh**

Project Name/No.: **Town of Tecumseh**

P.O. No.:

Email: **cberthiaume@tecumseh.ca**

Invoicing Address (if different):

Waterworks Address:

1189 Lacasse Blvd.

Tecumseh ONT.

N8N 2C7

Waterworks No.:

260004969

Quote No.:

Project Name/No.:

Town of Tecumseh

P.O. No.:

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

Lab No.	Sample Source and/or Sample Identification	Water/Trax S.P.L.	Sample Matrix *	Date Collected (yy-mm-dd)	Time Collected	Adverse Resample	Total Coliform / E.coli	Heterotrophic Plate Count	Fecal Coliforms	P/A (Total Coliform / E.coli)	Sodium	Lead	Fluoride	Nitrite, Nitrate as N	Sch. 23 Inorganics	Sch. 24 Organics	Other	TURNAROUND TIME REQUESTED
1	MANNING / ORN. BO. 24 / AUTO FLOW		D.W. 18-02-21	4:46 PM	✓	0.74												1
2	FM 2m EAST of AUTO FLOW on ST. 34		D.W. 18-02-21	4:47 PM	✓	0.74												1
3	FM UPSTREAM CITY RD # 34		D.W. 18-02-21	5:01 PM	✓	0.79												1
4																		
5																		
6																		
7																		
8																		
9																		
10																		
11																		
12																		

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

SAMPLE SUBMISSION INFORMATION

Submitted by: **REG MORAN** Submitted by: **REG MORAN** Signature: *REG MORAN*

Print: **REG MORAN** Date Received (yy-mm-dd): **18-02-21** Time Received: **5:30**

Sign: **Reg Moran** Invoiced by Email: No Comments:

Date (yy-mm-dd): **2018-2-21 / 4:46** # of Pieces: **3** Laboratory Prepared Bottles: Yes No

Lab. Name: **2018-2-21 / 4:46** Caduceon (Pick-up): **3** Sample Temperature °C: **5** Labeled by:

SAMPLE RECEIVING INFORMATION (LABORATORY USE ONLY)

Received By (print): **REG MORAN** Signature: *REG MORAN*

Date Received (yy-mm-dd): **18-02-21** Time Received: **5:30**

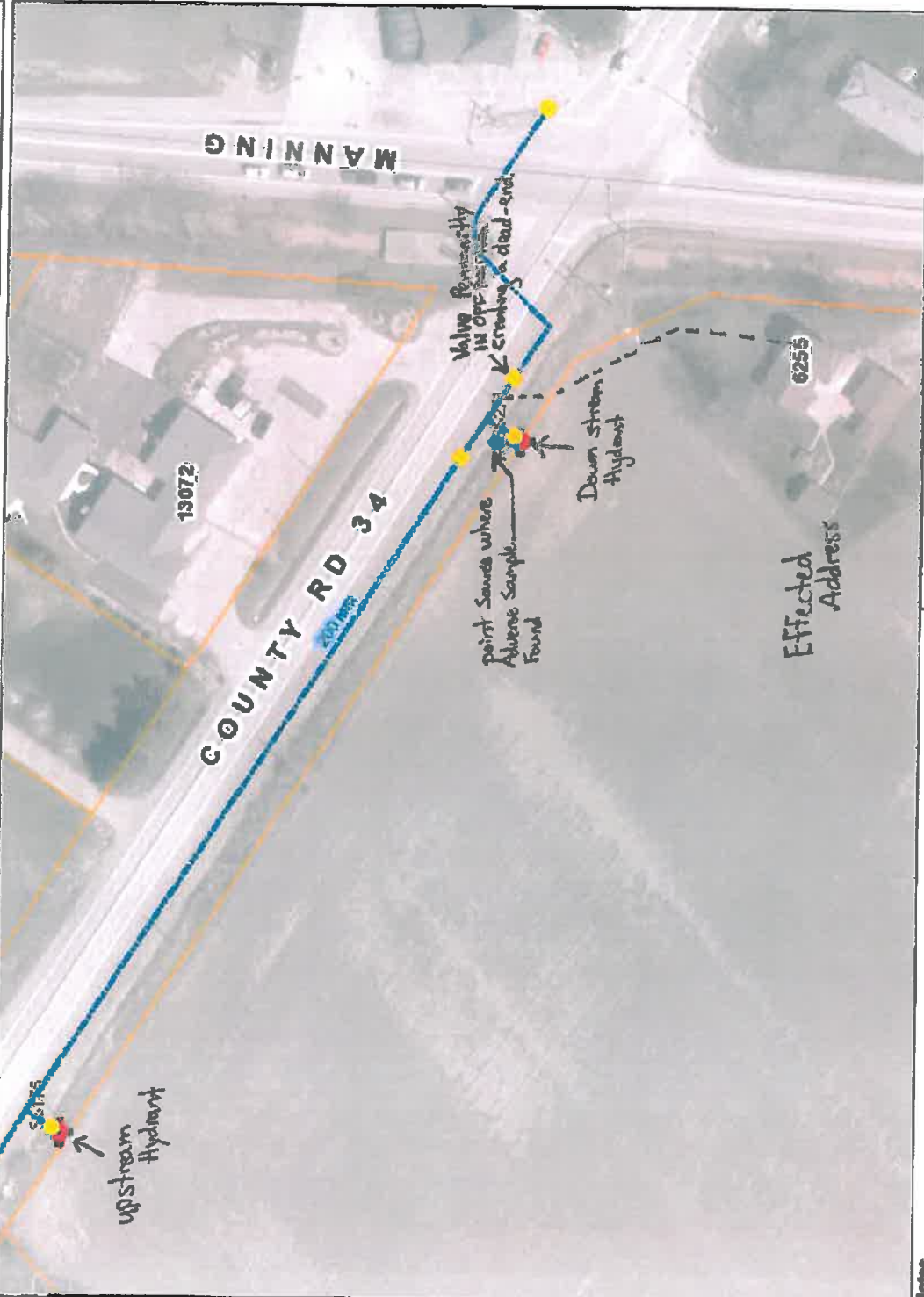
Laboratory Prepared Bottles: Yes No Comments:

Sample Temperature °C: **5** Labeled by:

Comments:

Ontario Laboratory Locations / Shipping Addresses:
 Kingston Lab - 285 Dalton Ave., Kingston, ON K7K6S2, Tel: (613) 544-2900 Fax: (613) 544-2770 Email: contact@kingstonlab.com
 Ottawa Lab - 2378 Holly Lane, Ottawa, ON K1V 7P1, Tel: (613) 526-9123 Fax: (613) 526-9244 Email: contact@ottawalab.com
 Peterborough Lab - 4206-16th Charlotte St., Peterborough, ON K9A 2T8, Tel: (705) 788-4506 Fax: (705) 748-6594 Email: contact@peterboroughlab.com
 Windsor Lab - 395-3201 Warrenton Ave., Windsor, ON N9A 4S9, Tel: (519) 966-9867 Fax: (519) 966-9844 Email: contact@windsorlab.com

Town of Tecumseh Mapping



Notes
 Enter Map Description

THIS MAP IS NOT TO BE USED FOR NAVIGATION
 Copyright the Town of Tecumseh, 2016. Data herein is provided by the Town of Tecumseh on an 'as is' basis. Assessment parcel provided by Terraset Enterprises Inc. Data layers that appear on this map may or may not be accurate, current, or otherwise reliable.



Legend

- Water Valve
- Water Sampling Station
- Hydrants
 - Prohibited, Active
 - Town of Tecumseh, Active
 - Other Ownership, Active
 - City of Windsor, Active
 - Other Ownership, Removed
 - Town of Tecumseh, Removed
- Water AutoFlush Station
- Watermain
 - Abandoned
 - Active
 - Inactive
 - Proposed
 - Removed
 - Unknown
- Water Lateral Line
 - Other
 - Active
- Address
- Tecumseh Assessment (Tax F MPAC Nov 3, 2017)
- Lake
- Street Centreline
- Rail Road
- Parcels

1:1,019

16.98 34.0 Meters

2/22/2018

C.O.C.: DW1802221735-W

REPORT No. B18-04696

Report To:

Town of Tecumseh
 1189 LaCasse Blvd,
 Tecumseh Ontario N8N 2C7 Canada

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

Attention: Denis Berthiaume

DATE RECEIVED: 22-Feb-18

JOB/PROJECT NO.: Town of Tecumseh

DATE REPORTED: 23-Feb-18

P.O. NUMBER:

SAMPLE MATRIX: Drinking Water

WATERWORKS NO. 260004969

Parameter	Total Coliform	E coli			
Units	cfu/100mL	cfu/100mL			
R.L.	1	1			
Reference Method	MOE E3407	MOE E3407			
Date Analyzed/Site	22-Feb-18/W	22-Feb-18/W			

Client I.D.	Sample I.D.	Date Collected				
Manning/Cty.Rd #34/Auto Flusher-Resample	B18-04696-1	22-Feb-18	0	0		
F.H. 2m East of Auto Flusher on Cty Rd.#34-Resampl	B18-04696-2	22-Feb-18	0	0		
F.H. Upstream/Cty.Rd.#34-Resample	B18-04696-3	22-Feb-18	0	0		



Lorina Merko
 Lab Supervisor

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

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.

DRINKING WATER SUBMISSION FORM

CADUCEAN

ENVIRONMENTAL LABORATORIES

Quality assured. Client committed.

Indicate Laboratory Samples are Submitted to

Kingston Ottawa Peterborough Windsor

Waterworks Address:
Town of Tecumseh
1189 Lacasse Blvd.
Tecumseh ONT.
N8N 2C7

Waterworks No.: 260004969
Quote No.:

Invoicing Address (if different):

Project Name/No.: Town of Tecumseh
P.O. No.:

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

DRINKING WATER FACILITY CLASSIFICATION

Municipal Non-Municipal Reg. 17003
 Large Small Reg. 318/08 & 319/08
 Residential Non-Residential Reg. 243/07
 Seasonal Year-Round Private Well Water
 Other:

ANALYSES REQUESTED

Microbiological	Chemical	Other
Background	Lead	Sch. 24 Organics
Total Coliform / E. coli	Sodium	Sch. 23 Inorganics
Heterotrophic Plate Count	Fluoride	Nitrite, Nitrate as N
Fecal Coliforms	Trihalomethanes	
P/A (Total Coliform / E. coli)		

Sample Source and/or Sample Identification	Watertrax S.P.L.	Sample Matrix*	Date Collected (yy-mm-dd)	Time Collected	Adverse Results	Indicate Test For Each Sample (Using A Check Mark in The Box Provided)	Frac Chlorine	# Bottles/ Sample
MANNING CTY. RD #4/10/10 FLOWER		D.W.	18-02-22	5:02 PM	YES		0.77	1
F.H. 2m East of Angus Trencher on GUY RD #4		D.W.	18-02-22	5:03 PM	YES		0.80	1
F.H. WINDSOR/CTY. RD. #4		D.W.	18-02-22	5:14 PM	YES		0.80	1

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

SAMPLE SUBMISSION INFORMATION		REPORTING / INVOICING	
Submitted by: <i>Vern Peera</i>	Courier (Client account) <input type="checkbox"/>	Results by Fax <input type="checkbox"/>	Received By (print): <i>Esther</i>
Submitted by: <i>Vern Peera</i>	Courier (Caducean account) <input type="checkbox"/>	Results by Email <input checked="" type="checkbox"/>	Date Received (yy-mm-dd): <i>18-02-22</i>
Submitted by: <i>Vern Peera</i>	Drop Off <input checked="" type="checkbox"/>	Invoice by Email <input type="checkbox"/>	Laboratory Prepared Bottles: <input checked="" type="checkbox"/> Yes <input type="checkbox"/> No
Date (yy-mm-dd) Time: <i>18-02-22 5:35 PM</i>	Caducean (Pick-up) <input type="checkbox"/>	Invoice by Mail <input type="checkbox"/>	Sample Temperature °C: <i>4</i>
			Comments:

Ontario Laboratory Locations/Shipping Addresses:
 Kingston Lab - 285 Dakon Ave., Kingston, ON K7K 6Z4, Tel: (613) 544-2800 Fax: (613) 544-2778 Email: kingston@caduceanlabs.com
 Ottawa Lab - 2378 Holly Lane, Ottawa, ON K1V 7P1, Tel: (613) 526-4123 Fax: (613) 526-4244 Email: ottawa@caduceanlabs.com
 Peterborough Lab - 4206-460 Charlotte St., Peterborough, ON K9A 2T6, Tel: (705) 748-1266 Fax: (705) 748-6514 Email: peterborough@caduceanlabs.com
 Windsor Lab - 35-3284 Riverdale Ave., Windsor, ON, L8X 4G5, Tel: (519) 965-9541 Fax: (519) 965-9557 Email: windsor@caduceanlabs.com

Page *1* of *1*
 DW/180222/354



519-258-2146 | www.wechu.org

Windsor 1005 Ouellette Avenue, Windsor, ON N9A 4J8
Essex 360 Fairview Avenue West, Suite 215, Essex, ON N8M 3G4
Learnington 33 Princess Street, Learnington, ON N8H 5C5

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,

A handwritten signature in black ink, appearing to read "Philip Wong", enclosed within a large, loopy oval scribble.

Philip Wong, Manager
Environmental Health Department

PW/la

Brad Dupuis

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

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 residents 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

PLEASE PRINT ALL INFORMATION

Document Verified by
 (Initials Only)

BD

Date Received: February 21 st , 2018	Time Received: 3:30 pm
Name of Customer: Town of Tecumseh	
Address/Location: Manning /Cnty Rd #34 Auto-Flusher	Telephone No.: 519-735-2184
INSTRUCTIONS	
Adverse Water Sample Reported by Caduceon 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 MOH.	
WORK PERFORMED AND COMMENTS	
Started flushing Watermain @ 4:25pm 1 st Set of Samples were taken 3 total	
① Pointsource → Auto flusher 0.74 ppm Free @ 4:46pm	
① Downstream → Fire Hydrant east of Auto-flusher 0.74 ppm Free @ 4:47pm	
① Upstream → Fire Hydrant west of Auto-flusher 0.79 ppm Free @ 5:01 pm	
MATERIALS USED	
Delivered ③ Samples to lab at 5:30pm	
Operator Name (print): Vern, Reg	
Operator Signature: <i>Vern Reg</i>	
Date Completed: February 21 st , 2018	Time Completed: 6:00 pm

PLEASE PRINT ALL INFORMATION

Document Verified by (Initials Only)	BD
---	----

Date Received: Feb 22, 2018	Time Received: 7:00am
Name of Customer: Nikola Radakovic	
Address/Location: 6255 Manning Rd.	Telephone No.: 519-944-4859
INSTRUCTIONS	
Deliver letter From Windsor Essex County Health Unit to 6255 Manning Rd for a precautionary Boil Water Advisory	
WORK PERFORMED AND COMMENTS	
Vern Rami: 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	
Operator Name (print): Brad & Vern	
Operator Signature: <i>Bradley Dupuis</i>	
Date Completed: Feb 22, 2018	Time Completed: 9:40 am

PLEASE PRINT ALL INFORMATION

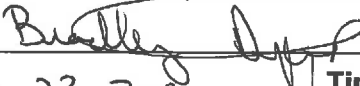
Document Verified by
 (Initials Only)

BD

Date Received: February 22 nd , 2018	Time Received: 4:00pm
Name of Customer: Town of Tecumseh	
Address/Location: Manning/Cnty Rd #34 Auto-Flusher	Telephone No.: 519-735-2184
INSTRUCTIONS	
Adverse Water Sample	
Take 2 nd Set of Samples	
WORK PERFORMED AND COMMENTS	
2 nd Set of Samples were taken 3 total <i>STARTED FLUSHING AT 4:00PM</i>	
① Pointsource → Auto flusher 0.77 ppm Free @ 5:02 pm	
① Downstream → Fine Hydrant east of Auto-flusher 0.80 ppm Free @ 5:03 pm	
① Upstream → Fine 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): VERN RORR1	
Operator Signature: <i>Vern Rorr</i>	
Date Completed: February 22 nd , 2018	Time Completed: 6:00 PM

PLEASE PRINT ALL INFORMATION

Document Verified by (Initials Only)	BD
---	----

Date Received: Feb 23, 2018	Time Received: 3:59 pm
Name of Customer: Nikola Radakovic	
Address/Location: 6255 Manning Rd.	Telephone No.: 519-944-4859
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	
Operator Name (print): Brad Dupuis	
Operator Signature: 	
Date Completed: Feb 23, 2018	Time Completed: 5:30 pm