



<b>Drinking-Water System Number:</b>	210001362
<b>Drinking-Water System Name:</b>	Southwold Drinking Water System (Lynhurst Park Subdivision)
<b>Drinking-Water System Owner:</b>	Corporation of the Township of Southwold
<b>Drinking-Water System Category:</b>	Large Municipal Residential
<b>Period being reported:</b>	January 1, 2024 through December 31, 2024

<p><b><u>Complete if your Category is Large Municipal Residential or Small Municipal Residential</u></b></p> <p><b>Does your Drinking-Water System serve more than 10,000 people? Yes [ ] No [X]</b></p> <p><b>Is your annual report available to the public at no charge on a web site on the Internet? Yes [X] No [ ]</b></p> <p><b>Location where Summary Report required under O. Reg. 170/03 Schedule 22 will be available for inspection.</b></p> <div style="border: 1px solid black; padding: 5px; margin-top: 5px;">             Township of Southwold Office              35663 Fingal Line              Fingal, ON N0L 1K0         </div>	<p><b><u>Complete for all other Categories.</u></b></p> <p><b>Number of Designated Facilities served:</b></p> <div style="border: 1px solid black; width: 100px; text-align: center; margin: 5px;">NA</div> <p><b>Did you provide a copy of your annual report to all Designated Facilities you serve? Yes [ ] No [ ]</b></p> <p><b>Number of Interested Authorities you report to:</b></p> <div style="border: 1px solid black; width: 100px; text-align: center; margin: 5px;">NA</div> <p><b>Did you provide a copy of your annual report to all Interested Authorities you report to for each Designated Facility? Yes [ ] No [ ]</b></p>
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**List all Drinking-Water Systems (if any), which receive all of their drinking water from your system:**

Drinking Water System Name	Drinking Water System Number

**Did you provide a copy of your annual report to all Drinking-Water System owners that are connected to you and to whom you provide all of its drinking water? Yes [ ] No [ ]**

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

- Public access/notice via the web
- Public access/notice via Government Office
- Public access/notice via a newspaper
- Public access/notice via Public Request
- Public access/notice via a Public Library
- Public access/notice via other method \_\_\_\_\_

**Describe your Drinking-Water System**

The Southwold Drinking Water System (Lynhurst Park Subdivision) consists of a looped watermain, hydrants, and valves within the Lynhurst Park Drive Subdivision, providing water service to approximately 52 residential properties. The system is suburban to the City of St. Thomas and receives all drinking water from the City of St. Thomas Water Distribution System.

**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**

**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
NA	NA	NA	NA	NA	NA

**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	NA	NA	NA	NA	NA
Treated	NA	NA	NA	NA	NA
Distribution	13	(0)-(0)	(0)-(0)	13	(<10)-(80)



**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 #)
Chlorine (Grab Samples)	13	(0.31) - (1.02)

*NOTE: For continuous monitors use 8760 as the number of samples.*

**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
NA	NA	NA	NA	NA

**Summary of Inorganic parameters tested during this reporting period or the most recent sample results**

Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
NA	NA	NA	NA	NA

**Summary of lead testing under Schedule 15.1 during this reporting period**

(applicable to the following drinking water systems; large municipal residential systems, small municipal residential systems, and non-municipal year-round residential systems)

Location Type	Number of Samples	Range of Lead Results (min#) – (max #)	Number of Exceedances
Plumbing	NA	NA	NA
Distribution	NA	NA	NA

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

Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
HAA5 (NOTE: show latest annual average)	Refer to St. Thomas Drinking Water System Annual Report			
THM (NOTE: show latest annual average)	Refer to St. Thomas Drinking Water System Annual Report			

**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
NA	NA	NA	NA
NA	NA	NA	NA