



**OPTIONAL ANNUAL REPORT TEMPLATE**

Drinking-Water System Number:	<b>220001520</b>
Drinking-Water System Name:	<b><i>South Huron Distribution System</i></b>
Drinking-Water System Owner:	<b><i>Municipality of South Huron</i></b>
Drinking-Water System Category:	<b><i>Large Residential</i></b>
Period being reported:	<b><i>January 1, 2025 to December 31, 2025</i></b>

<p><b><u>Complete if your Category is Large Municipal Residential or Small Municipal Residential</u></b></p> <p>Does your Drinking-Water System serve more than 10,000 people? Yes [ ] No [ <input checked="" type="checkbox"/> ]</p> <p>Is your annual report available to the public at no charge on a web site on the Internet? Yes [ <input checked="" type="checkbox"/> ] No [ ]</p> <p>Location where Summary Report required under O. Reg. 170/03 Schedule 22 will be available for inspection.</p> <p><i>Office</i> <i>Internet</i> <i>Library</i></p>	<p><b><u>Complete for all other Categories.</u></b></p> <p>Number of Designated Facilities served: _____</p> <p>Did you provide a copy of your annual report to all Designated Facilities you serve? Yes [ ] No [ ]</p> <p>Number of Interested Authorities you report to: _____</p> <p>Did you provide a copy of your annual report to all Interested Authorities you report to for each Designated Facility? Yes [ ] No [ ]</p>
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**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

**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 [ ] NA [  ]



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 (Social Media, Facebook, X)

### Describe your Drinking-Water System

*Large Municipal Residential Distribution Class III  
Surface water supplied from Lake Huron Primary Water Supply System (LHPWSS)*

### List all water treatment chemicals used over this reporting period

*Sodium hypochlorite*

### 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

Project Name	Project Cost
Victoria Street East Reconstruction Watermain Replacement (Exeter) - Main Street to East End	\$ 667,651
Automated Meter Reading Upgrade	\$ 250,000
SCADA System Upgrades	\$ 125,000
Main Street Reconstruction (Dashwood) - Centre Street to East Limits	\$ 550,572
Grand Bend Line Watermain Upgrade - B-Line to Grand Bend Airport (engineering)	\$ 36,649
Gore Road Watermain Upgrade - Highway 21 to Corbett Line	\$ 1,181,002
Huron Park Water Tower Repairs	\$ 20,300
Crediton Booster Upgrades	\$ 16,700
Miscellaneous PLC Repairs	\$ 10,600
Chlorine Pump Repairs	\$ 17,900
<b>Total</b>	<b>\$ 2,876,374</b>



# Ontario Drinking-Water Systems Regulation O. Reg. 170/03

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
04/03/2025	Lead – Private Residence	11.3 40.7	10ug/L	Confirmation of private lead service - resample	04/04/2025
06/20/2025	Category 2 Temporary Watermain Break	-	-	Boil Water Advisory, Sample	06/23/2025
07/24/2025	Total Coliform	13	Cfu/100ml	Resample	07/28/2025

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	N/A				
Treated	N/A				
Distribution	377	0	0-13	162	<10 – 50

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 #)	Unit of Measure	NOTE: For continuous monitors use 8760 as the number of samples.
Turbidity	N/A			
Chlorine	8760	0.19 – 2.69	mg/L Free	
Fluoride (If the DWS provides fluoridation)	N/A			

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



# Ontario Drinking-Water Systems Regulation O. Reg. 170/03

Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
Antimony				
Arsenic				
Barium				
Boron				
Cadmium				
Chromium				
*Lead				
Mercury				
Selenium				
Sodium				
Uranium				
Fluoride				
Nitrite				
Nitrate				

\*only for drinking water systems testing under Schedule 15.2; this includes large municipal non-residential systems, small municipal non-residential systems, non-municipal seasonal residential systems, large non-municipal non-residential systems, and small non-municipal non-residential systems

## 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 #)	Unit of Measure	Number of Exceedances
Plumbing	44	0.01 – 40.7	ug/L	1
Distribution	6	0.03 – 0.45	ug/L	0

## 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				
Aldicarb				
Aldrin + Dieldrin				
Atrazine + N-dealkylated metabolites				
Azinphos-methyl				
Bendiocarb				
Benzene				
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: latest annual average)	<i>SEE NOTE</i>	36.5	<i>ug/L</i>	
Total Haloacetic Acids (HAA5) (NOTE: latest annual average)	<i>SEE NOTE</i>	11.6	<i>ug/L</i>	
Temephos				
Terbufos				
Tetrachloroethylene				
2,3,4,6-Tetrachlorophenol				
Triallate				



# Ontario Drinking-Water Systems Regulation O. Reg. 170/03

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

<i>Note:</i>		<i>THM</i>	<i>HAA5</i>
	<i>FEB 18 -</i>	<i>28.0</i>	<i>5.3</i>
	<i>MAY 27 -</i>	<i>39.0</i>	<i>20.4</i>
	<i>AUG 19 -</i>	<i>43.0</i>	<i>6.1</i>
	<i>NOV 12 -</i>	<i>36.0</i>	<i>14.5</i>
		<i>36.5</i>	<i>11.6</i>