



FEB U.8 2024 FRASER VALLEY REGIONAL DISTRICT

DEPARTMENT David

February 1, 2024

Dear: Water System Operator

Re: Annual Reporting Requirements for Permitted Water Systems

Please find enclosed a copy of the 2023 Range Report for your water system. This report contains a summary of the bacteriological water quality results for the samples submitted through Fraser Health from your water system within the 2023 calendar year. As per the Drinking Water Protection Act the report is required to be made available to all users by June 30th 2024.

Please email HPLand@fraserhealth.ca if you would like to request a copy of the Annual Report Template.

The following are reminders for all water system operators:

- a) As drinking water testing has been deemed an essential service, all health units continue to remain open for sample drop-off on their regular designated days.
- b) Please do not use expired requisition forms as this will result in the samples either not being processed or results not being returned properly from the lab. Please discard all expired requisition forms. The expiration date is located on the bottom of the form.
- c) Please do not modify sample sites or other sections on the requisition forms. Key information is contained in the barcode and the lab is unable to include handwritten information. Please contact HPLand@fraserhealth.ca to request any changes to your requisition forms.
- d) Ensure the lead flush message provided is included with your Annual Report.
- e) The coding system from BCCDC has recently changed.

QRWRT indicates that the sample exceeded the 30 hour hold time. This could be due to courier issues or an incorrect date being recorded by the operator on the requisition forms. Water systems will still be given credit for the sample collected and a qualitative result is provided to Fraser Health. If there is bacteria detected, a separate email will be sent to the operator from Fraser Health.

REJCT DELAY3 indicates that the sample has been rejected as it has been too long in transit. No results will be provided for this sample.

Sincerely,

Drinking Water Program Fraser Health Authority HPLand@fraserhealth.ca

Fraser Health Authority Health Protection Suite 400 2777 Gladwin Rd Abbotsford BC V2T 4V1 Canada Tel (604) 870-7900 Fax (604) 852-1558 www.fraserhealth.ca



February 1, 2024

Water System Operators

Re: Metals in Drinking Water - "Flush" Message in Annual Reports

Fraser Health has recently revised its metals at the tap "Flush" message and we are asking all water systems to please include the following health message with your next annual reports to your users.

Anytime the water in a particular faucet has not been used for six hours or longer, "flush" your cold-water pipes by running the water until you notice a change in temperature. (This could take as little as five to thirty seconds if there has been recent heavy water use such as showering or toilet flushing. Otherwise, it could take two minutes or longer.) The more time water has been sitting in your home's pipes, the more lead it may contain.

Use only water from the cold-tap for drinking, cooking, and especially making baby formula. Hot water is likely to contain higher levels of lead.

The two actions recommended above are very important to the health of your family. They will probably be effective in reducing lead levels because most of the lead in household water usually comes from the plumbing in your house, not from the local water supply.

Conserving water is still important. Rather than just running the water down the drain you could use the water for things such as watering your plants.

If you have any questions, please contact our Drinking Water Program at 604-870-7903.

Sincerely,

Drinking Water Program Fraser Health Authority HPLand@fraserhealth.ca

Fraser Health Authority Health Protection Suite 400 2777 Gladwin Rd Abbotsford BC V2T 4V1 Canada Tel (604) 870-7900 Fax (604) 852-1558 www.fraserhealth.ca

PAGELOFA DRINKING WATER SYSTEM ANNUAL REPORT DRINKING WATTER SYSTEM ANDUAL REPORT January 1st to December 31st, 2023 (year) Reporting Period: Water System Deroche Water System Water System Owner Fraser Valley Regional District Primary Contact Name (Operator or Manager) Dave Roblin Phone Number (Operator or Manager) 604 702 5027 E-mail (Operator or Manager) droblin@fvrd.ca DESCRIBE YOUR WATER SUPPLY SYSTEM. What is the Source{s) of Raw Water? D Surface Water D Other O Shallow Well X Deep Well If other, specify details: XNO Does the Drinking Water System have Primary Disinfection? Yes D Chlorination D Ultraviolet Light D Ozone D Other If other, specify details: Does the Drinking Water System have Secondary Disinfection? X_{No} □ Yes D Chlorination Ot her If other, specify details: XNo Does the Drinking Water System have Filtration? 2 Yes Check all boxes that apply D Cartridge Filter(s) D Carbon Filter D Sand Filtration D Reverse Osmosis D Other If other, specify details: PUBLIC REPORTING Emergency Response & Contingency Plan (ERCP) Is your ERCP up to Date? X Yes How do you Inform the System Users of the ERCP? D Hand Delivered D Bulletin Board D Newspaper 0 Utility Bill Insert X Website D Other (specify details) **Drinking Water System Annual Report** How do you Inform the System Users of the Annual Report? 0 Hand Delivered O Bulletin Board D Newspaper 0 Utility Bill Insert X Website D Other (specify details)

DRINKING WATER SYSTEM ANNUAL REPORT

		Sec. as vor			
COMPLIAINCE WITH OPERATING PTIX	「「「「「「「「」」」」を発展していた。	這方利止為			AND A CASE
List the conditions that have b	een placed on your Operating Perm	it _{{if vou hove c}	onditions. these will	be stated on yo	ur permit):
Are you in compliance with th	e conditions fisted an your Operati	ng Permit?	X Yes	D No	ON/A
BACTERIOLOGICAL TESTING AND DRI	NKING WATER PROTECTION REGULATION	UD SETTAWA	ALLTY STANDAR	DS	的研究的研
How many bacteriological sam	nples were collected during this repo	orting perio	d?	103	
What is the minimum require	d sampling frequency for this syste	em? (#samp	oles/month)	4	
Additional sampling details:		`` `	,		
Was the minimum required s	ampling frequency achieved?	XYes		Νο	
Comm ents :					
Bacteriological summary att	ached to this report?	Yes		X _{No}	
If no, how do the users of the s in for report	ystem view the results? Call				
WATTER QUALITY STRANDARDS FOR P	SPACINE WV (STAT)				
WAMER QUALITY STRADDARDSHOK F	OT (YEAR OOK DIGD				ndard)
Parameter:	Standard:		Did this syste	em meet sta	ındard?
Escherichia coli (for all <u>samples</u>)	No detectable <i>Escherichia coli</i> per 100ml		X Yes		ło
Total Coliform Bacteria					
(if only 1 sample collected in a 30	No detectable total coliform bacteria pe	r 100ml	XYes	0No	
fotal Coliform Bacteria	No more than 10% of samples contain t	otal			
(if more than 1 sample collected in a	coliform bacteria, and No sample has mo	re than	☐ Ye s	XN	0

If the system did not meet any of above Drinking Water Protection Regulation standards, record the results in the table below; attach additional sheets if necessary.

10 total coliform bacteria per 100ml

30 day period)

Date	TC/l00ml	E.coli/100ml Reason	Corrective Action	
6/20/2023	8	Warm water	Flushed system and disinfected	
7/11/2023	6			
8/15/2023	47.8	Warm water	Flushed system and disinfected	
8/22/2023	20.7	Warm water	Flushed system and disinfected	
10/10/2023	2		Flushed system and disinfected	
11/21/2023	6	Warm water	Flushed system and disinfected	
8/8/2023	23			

DRINKING WATER SYSTEM ANNUAL REPORT

XNo

REVIICAL SAMPL	ING COMPLETED DURING T	KIS REPORTING PERIOD		
Was any cher	mical sampling conduct	ted during reporting	period? XYes	ONo ONo
0	If no, when were the last chemical samples conducted for this system?If yes, did all water samples meet the Guidelines for Canadian Drinking WaterQuality?			
(date)	$\mathrm{D}Don$ 't Know	0 Never	XYes	No

If any water samples did not meet the Guidelines for Canadian Drinking Water Quality, record the results in the table below; attach additional sheets if necessary.

Parameter	Result	Corrective Action /Treatment/ Comments

ADDIMONAL TESTING

____Yes

Does the system have analyzers for continuous monitoring?

If yes, check all boxes that apply:

Chlorine O Turbidity

0 Other {details)

Are the results available on request?

If any additional testing or sampling was conducted, record results in the table below; attach additional sheets if necessary.

Additional Testing & Reason for Sampling	Corrective Action Taken

WATER QUALITY COMPLAINTS

Were there any water quality complaints in this reporting	T Yes	XNO
period?(e.g. taste, odour, colour etc.)		

If yes, complete the table below; attach additional sheets if necessary.

Water Quality Complaint	Corrective Action / Treatment

		DF	RINKINGW	ATERSYSTEMANNUAL	REPORT
			ti A public district		
PERAMONAL PROBLEMS	(1) [2] [4]		的建成		alexee 4181
Were there any operational proble period? (e.g. insufficient water sup disinfection equipment, line breaks	ply, malfunctio	n of	□ Yes	XNo	
If yes, complete the table below; atta	ach additional sh	neets if necess	ary.		
Incident Date Type of Operational I	Problem	Corrective A	tionTaken		
VIAVOR UPGRADES/REPAIRS & EXPENSES					
Were there any major upgrades/rep	oairs or any maj	ior costs	Yes	XNo	
incurred during thisreporting period	d?				
If yes, complete the table below; atta	nch additional sh	eets if necess	ary.		
MajorUpgrades/Expenses	Details				
Improvements required by DWO					
Additions/changes to system					
Purchase or install new equipment					
Equipment repair or replacement					
Annual maintenance of system	Flushing and dis	sinfecting of re	servoir and	booster station	
Specialist report					
Other					
FUTURE IMPROVEMENTS					
Are there any plans for future impro	ovements?		Yes	XNo	
If yes, complete the table below; atta	ch additional sh	eets if necess	ary.		
Future Upgrades or Improvements				Estimated Date of Com	pletion

DATE COMPLETED: July 9, 2024	COMPLETED BY: Dave Roblin

Sample Range Report

Fraser Health Authority

Facility Name:	Deroche Water System
Date Range:	Jan 1 2023 to Dec 31 2023
Operator	Fraser Valley Regional District 45950 Cheam Ave Chilliwack, BC V2P 1N6

.

Sampling Site	Date Collected	Total Coliform	E. Coli	Fecal Coliform
<u>1 10854 North</u> Deroche Rd, 10854	-			
North Deroche Rd	1-3-2023 10:30:00 AM	LT1	LT1	
	1-17-2023 10:00:00	LT1	LT1	
	AM 1-31-2023 11:00:00	LT1	LT1	
	AM 2-14-2023 10:00:00	LT1	LT1	
	AM 2-28-2023 10:00:00 AM	LT1	LT1	
	3-14-2023 10:15:00 AM	LT1	LT1	
	3-28-2023 9:30:00 AM	LT1	LT1	
	4-25-2023 9:00:00 AM	LT1	LT1	
	5-9-2023 9:30:00 AM	LT1	LT1	
	5-23-2023 10:00:00 AM	LT1	LT1	
	6-6-2023 9:45:00 AM	LT1	LT1	
	6-20-2023 9:30:00 AM	ESTCT 8 ESTHCD	LT1	
	6-27-2023 9:15:00 AM	LT1	LT1	
	7-4-2023 9:00:00 AM	LT1	LT1	
	7-18-2023 10:30:00 AM	LT1	LT1	
	8-1-2023 10:00:00 AM	LT1	LT1	
	8-15-2023 8:30:00 AM	47.8	LT1	
	8-22-2023 9:40:00 AM	20.7	LT1	
	8-29-2023 9:00:00 AM	LT1	LT1	
	9-12-2023 10:00:00 AM	LT1	LT1	
	9-26-2023 8:45:00	LT1	LT1	

AM		
10-10-2023 9:15:00 AM	2.0	LT1
10-24-2023 9:15:00 AM	LT1	LT1
11-7-2023 10:30:00 AM	LT1	LT1
11-21-2023 9:30:00 AM	LT1	LT1
12-5-2023 9:30:00	LT1	LT1
AM 12-19-2023 9:45:00	<u>LT1</u>	<u>LT1</u>
AM Total Positive:	4	0

\$

0

2 10343 Cooper Rd, 10343 Cooper Rd	1		
<u>10343 Cooper Nu</u>	1-3-2023 10:45:00 AM	LT1	LT1
	1-17-2023 10:03:00 AM	LT1	LT1
	1-31-2023 10:30:00 AM	LT1	LT1
	2-14-2023 10:30:00 AM	LT1	LT1
	2-28-2023 10:30:00 AM	LT1	LT1
	3-14-2023 10:00:00 AM	LT1	LT1
	3-28-2023 10:00:00 AM	LT1	LT1
	4-18-2023 8:30:00 AM	LT1	LT1
	4-25-2023 9:30:00 AM	LT1	LT1
	5-9-2023 10:00:00 AM	LT1	LT1
	5-23-2023 10:30:00 AM	LT1	LT1
	5-30-2023 10:15:00 AM	LT1	LT1
	6-6-2023 10:15:00 AM	LT1	LT1
	6-20-2023 10:00:00 AM	LT1	LT1
	7-4-2023 9:30:00 AM 8-1-2023 10:20:00	LT1 LT1	LT1 LT1
	AM		LT1
	8-15-2023 8:50:00 AM	LT1	
	8-29-2023 9:45:00 AM	LT1	LT1
	9-12-2023 10:30:00 AM	LT1	LT1

	10-10-2023 9:30:00 AM	LT1	LT1
	10-24-2023 8:50:00	LT1	LT1
	AM 10-31-2023 9:45:00	LT1	LT1
	AM 11-7-2023 11:30:00	LT1	LT1
	AM 11-21-2023 9:45:00 AM	6	LT1
	AM 11-28-2023 10:00:00 AM	LT1	LT1
	12-5-2023 10:00:00 AM	<u>LT1</u>	<u>LT1</u>
	Total Positive:	1	0
3 Reservoir,			
	1-10-2023 10:00:00 AM	LT1	LT1
	1-24-2023 9:15:00 AM	LT1	LT1
	2-7-2023 9:00:00 AM	LT1	LT1
	2-21-2023 10:00:00 AM	LT1	LT1
	3-7-2023 9:50:00 AM	LT1	LT1
	3-21-2023 9:45:00 AM	LT1	LT1
	4-4-2023 9:30:00 AM	LT1	LT1
		LT1	LT1
	5-2-2023 8:45:00 AM		
	5-16-2023 10:30:00 AM	LT1	LT1
	5-30-2023 9:30:00 AM	LT1	LT1
	6-13-2023 9:00:00 AM	LT1	LT1
	7-11-2023 9:45:00 AM	6	LT1
	7-18-2023 10:30:00 AM	LT1	LT1
	7-25-2023 9:40:00 AM	LT1	LT1
	8-8-2023 8:50:00 AM	LT1	LT1
	8-22-2023 10:00:00 E AM	STCT 26 ESTHCD	LT1
	9-5-2023 9:45:00 AM	LT1	LT1
	9-19-2023 9:15:00 AM	LT1	LT1
	10-3-2023 8:30:00 AM	LT1	LT1
	10-17-2023 8:45:00 AM	LT1	LT1
	10-31-2023 9:00:00 AM	LT1	LT1
	11-14-2023 9:00:00	LT1	LT1

¥

0

			of total
E - estimated	L - less than	G - g	reater than
AM Total Positive:	1	0	0
12-19-2023 10:00:00	<u>LT1</u>	<u>LT1</u>	
12-12-2023 10:00:00	LT1	LT1	
10-17-2023 9:30:00	LT1	LT1	
9-5-2023 10:00:00	LT1	LT1	
	TCT 23 ESTHCD	LT1	
7-25-2023 10:15:00	LT1	LT1	
7-11-2023 10:00:00	LT1	LT1	
6-27-2023 9:45:00	LT1	LT1	
6-13-2023 9:30:00	LT1	LT1	
5-30-2023 9:45:00	LT1	LT1	
5-17-2023 10:30:00	LT1	LT1	
5-16-2023 11:00:00	LT1	LT1	
Total Positive:	2	0	0
12-12-2023 9:30:00	LT1	<u>LT1</u>	
11-28-2023 9:30:00	LT1	LT1	
	AM 12-12-2023 9:30:00 AM Total Positive: 5-16-2023 11:00:00 AM 5-17-2023 10:30:00 AM 5-30-2023 9:45:00 AM 6-13-2023 9:30:00 AM 6-27-2023 9:45:00 AM 7-25-2023 10:00:00 AM 7-25-2023 10:15:00 AM 8-8-2023 8:30:00 AM ES 9-5-2023 10:00:00 AM 12-12-2023 10:00:00 AM 12-19-2023 10:00:00 AM 12-19-2023 10:00:00 AM	$\begin{array}{c cccccc} 11-28-2023 \ 9:30:00 & LT1 \\ AM \\ 12-12-2023 \ 9:30:00 & LT1 \\ AM \\ \hline Total Positive: 2 \\ \end{array}$	11-28-2023 9:30:00 LT1 LT1 AM Z O 5-16-2023 11:00:00 LT1 LT1 AM Z O 5-17-2023 10:30:00 LT1 LT1 AM Z O 5-30-2023 9:45:00 LT1 LT1 AM AM Column L 6-13-2023 9:30:00 LT1 LT1 AM AM Column L LT1 AM Column L LT1 LT1 AM AM Column L LT1 AM Column L LT1 LT1 AM Colunn L

Samples that contain total coliform:	8	8.99% of total
Samples that contain e. coli:	0	0.00% of total
Samples that contain fecal coliform:	0	0.00% of total
Number of consecutive samples that	1	
contain total coliform:		
Number of samples that contain total	0/0	
coliform in last 30 days:		
Total number of samples:	89	

Comments:

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Environmental Health Officer Jan 25 2024

FOR FURTHER INFORMATION PLEASE CALL: David Fowler

Sample Range Report

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Fraser Health Authority

Facility Name: Date Range:	Deroche Water System Jan 1 2023 to Dec 31 202	23		
Operator	Fraser Valley Regional Di 45950 Cheam Ave Chilliwack, BC V2P 1N6	istrict		
Sampling Site	Date Collected	Total Coliform	E. Coli	Fecal Coliform
<u>6 Well, 41651 No</u> Deroche Rd	<u>rth</u>			
Derooneria	1-10-2023 10:20:00 AM	LT1	LT1	
	1-24-2023 9:30:00 AM	LT1	LT1	
	2-7-2023 9:30:00 AM	LT1	LT1	
	2-21-2023 10:30:00	LT1	LT1	
	AM			
	3-7-2023 10:10:00 AM	LT1	LT1	
	3-21-2023 10:15:00 AM	LT1	LT1	
	4-4-2023 10:00:00 AM	LT1	LT1	
	4-11-2023 8:15:00 AM	LT1	LT1	
	4-18-2023 9:30:00 AM	LT1	LT1	
	5-2-2023 9:00:00 AM	LT1	LT1	
	9-19-2023 9:45:00	LT1	LT1	
	AM			
	10-3-2023 10:10:00 AM	LT1	LT1	
	11-14-2023 9:30:00 AM	LT1	LT1	
	11-28-2023 9:15:00 AM	<u>LT1</u>	<u>LT1</u>	
	Total Positive:	0	0	0
Result Values:	E - estimated	L - less than	G -	greater than
Samples that con Samples that con Number of conse contain total colif	ntain fecal coliform: ecutive samples that form: oles that contain total 0 days:		0.00%	6 of total 6 of total 6 of total

Comments:

(e) *

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Environmental Health Officer Jan 25 2024

FOR FURTHER INFORMATION PLEASE CALL: David Fowler



Element #104, 19575-55 A Ave. Surrey, British Columbia V3S 8P8, Canada T: +1 (604) 514-3322 F: +1 (604) 514-3323 E: info.vancouver@element.com

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W: www.element.com

Analytical Re	port					
Bill To:	Fraser Valley Regional Dis	trict Project ID:			Lot ID: 17240	49
	1 - 45950 Cheam Ave.	Project Name:	Chem/Phys	Contro	I Number:	
	Chilliwack, BC, Canada	Project Location:			Received: Apr 9, 20	24
	V2P 1N6	LSD:			Reported: Apr 15, 2	
Attn:	Accounts Payable	P.O.:			t Number: 2991142	02.
Sampled By:	Bikafi	Proj. Acct. code:			port Type: Final Rep	ort
Company:	FVRD					
		Reference Number	1724049-5			
		Sample Date				
		Sample Time	April 09, 2024 NA			
		Sample Location	NA			
		Sample Description	Dorocho W/S /	10854 N. Derocke Rd	/ 10.2 °C	
		Sample Description	Drinking Water		.710.5 C	
			Drinking Water	Nominal Detection	Guideline	Guideline
Analyte		Units	Result	Limit	Limit	Comments
Metals Extractab				_		-
Aluminum	Extractable	mg/L	0.005	0.001	0.1 OG; 2.9 MAC	Below OG
Antimony	Extractable	mg/L	0.00002	0.00002	0.006	Below MAC
Arsenic	Extractable	mg/L	0.0002	0.0001	0.010	Below MAC
Barium	Extractable	mg/L	0.0054	0.0001	2.0	Below MAC
Boron	Extractable	mg/L	0.011	0.002	5	Below MAC
Cadmium	Extractable	mg/L	<0.00001	0.00001	0.007	Below MAC
Chromium	Extractable	mg/L	0.00006	0.00005	0.05	Below MAC
Copper	Extractable	mg/L	0.0033	0.0005	1 AO; 2 MAC	Below AO
Lead	Extractable	mg/L	0.00016	0.00001	0.005	Below MAC
Selenium	Extractable	mg/L	<0.0002	0.0002	0.05	Below MAC
Strontium	Extractable	mg/L	0.018	0.0001	7.0	Below MAC
Uranium	Extractable	mg/L	<0.00001	0.00001	0.02	Below MAC
Vanadium	Extractable	mg/L	0.00024	0.00005		
Zinc	Extractable	mg/L	0.0012	0.0005	5.0	Below AO
Physical and Ag	gregate Properties					
Colour	True	Colour units	<5	5		
Turbidity		NTU	0.13	0.1	0.1/0.3/1.0 OG	
Routine Water						
рН			6.52	0.01	7.0-10.5	Below Range
pH - Holding Tim	ie		Exceeded			
Temp. of observe	ed pH	°C	21.4			
Electrical Condu	ctivity at 25 °C	μS/cm	49	1		
Calcium	Extractable	mg/L	4.6	0.01		
Iron	Extractable	mg/L	<0.004	0.004	0.3	Below AO
Magnesium	Extractable	mg/L	0.87	0.02		
Manganese	Extractable	mg/L	<0.001	0.001	0.02 AO; 0.12 MAC	Below AO
Potassium	Extractable	mg/L	0.47	0.04		
Silicon	Extractable	mg/L	4.3	0.005		
Sodium	Extractable	mg/L	2.5	0.1	200	Below AO
T-Alkalinity	as CaCO3	mg/L	13	5		
Chloride	Dissolved	mg/L	2.26	0.05	250	Below AO
Fluoride	Dissolved	mg/L	<0.01	0.01	1.5	Below MAC
Nitrate - N	Dissolved	mg/L	0.54	0.01	10	Below MAC
Nitrite - N	Dissolved	mg/L	<0.01	0.01	1	Below MAC
Sulfate (SO4)	Dissolved	mg/L	3.7	0.1	500	Below AO
Hardness	as CaCO3 (extractable)	mg/L	15	1		
Total Dissolved S	. , , , , , , , , , , , , , , , , , , ,	mg/L	36	1	500	Below AO

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