

January 25, 2025

Water System Operators

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

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 or 1-866-749-7900.

Sincerely,

Alex Kwan
Acting Manager, Drinking Water Program
Fraser Health Authority
HPLand@fraserhealth.ca

DRINKING WATER SYSTEM A	NNUAL REPORT			
Reporting Period:		January 1 <sup>st</sup> to Decem	nber 31 <sup>st</sup> , 2024	
Water System	Vedder River	Campground		
Water System Owner	Fraser Valley	Regional District		
Primary Contact Name (c	Operator or Manager) Dav	ve Roblin		
Phone Number (Operator of	r Manager) 604-702-5027			
E-mail (Operator or Manager)	droblin@fvrd.ca			
DESCRIBE YOUR WATER SUPI	PLY SYSTEM			
What is the Source(s) of	Raw Water?			
☐ Deep Well	] Shallow Well	☐ Surface Water	Other	
If other, specify details:				
Does the Drinking Water	System have Prim	ary Disinfection?	☑ Yes	□ No
☑ Chlorination ☐	]Ultraviolet Light	Ozone	☐ Other	
If other, specify details:				
Does the Drinking Water	System have Seco	ndary Disinfection?	☐ Yes	⊠ No
☐ Chlorination ☐	]Other			
If other, specify details:				
Does the Drinking Water	System have Filtro	ation?	☐Yes	□No
Check all boxes that apply				
☐ Cartridge Filter(s) ☐	] Carbon Filter	☐ Sand Filtration	☐ Reverse Osmosis	☐ Other
If other, specify details:				
PUBLIC REPORTING				
Emergency Response & 0	Contingency Plan (I	ERCP)		
Is your ERCP up to Date?		<b>⅓</b> Yes	□No	
How do you Inform the S	System Users of the	ERCP?		
<del>_</del>	] Bulletin Board		Utility Bill Insert	x Website
Other (specify details)				
Drinking Water System A	•			
How do you Inform the S	-	•		
_	Bulletin Board	□ Newspaper	Utility Bill Insert	x Website
Other (specify details)				

Revised June 2014

COMPLIANCE	WITH OPERATING				
ist the con	ditions of your	Operating Permit (Contact	the DWO for a copy	if needed):	
•	i			_	
are you in c	compilance witi	h your Operating Permit?	<b>X</b> Ye	S	□No
BACTERIOLOG	GICAL TESTING AN	D DRINKING WATER PROTECTION	N REGULATION WATER	Quality Stand	ARDS
low many	bacteriological	samples were collected du	ring this reporting p	eriod?	36
What is the	minimum requ	ired sampling frequency fo	r this system? (#sam	ples/month)	4/ month
Additional s	sampling details	:			
Nas the mi	nimum require	d sampling frequency achie	ved? 🛚 🖾 Ye	!S	□ No
Comments:					
	□ NI -				
_	-	ittached to this report? the system view the results:	⊠ Ye	es	□ No
f no, how o	do the users of t	the system view the results:			
f no, how o	do the users of t	the system view the results:			eem meet standard?
Nater Qual	do the users of the lity Standards F	the system view the results:			
NATER QUAI Parameter: Escherichia for all sample Total Colifo	do the users of the lity Standards F	OR POTABLE WATER  Standard:  No detectable Escherichia of	coli per 100ml	Did this syst	em meet standard?
WATER QUAL Parameter: Escherichia for all sample Total Colifo if only 1 samp day period) Total Colifo if more than 2	coli ss) rm Bacteria ple collected in a 30 rm Bacteria	OR POTABLE WATER  Standard:  No detectable Escherichia of No more than 10% of samp	coli per 100ml m bacteria per 100ml oles contain total	Did this syst	em meet standard?
NATER QUAI Parameter: Escherichia for all sample Total Colifo if only 1 samp day period) Total Colifo if more than 2 to day period)	coli is) rm Bacteria ole collected in a 30 rm Bacteria 1 sample collected	OR POTABLE WATER  Standard:  No detectable Escherichia of the Norman More than 10% of samp coliform bacteria, and No sin a	coli per 100ml  m bacteria per 100ml  oles contain total ample has more than yes	Did this syst	em meet standard?
NATER QUAL Parameter: Escherichia for all sample Total Colifo if only 1 sample for all Colifo if more than 2 to day period) f the system the table be	coli is) rm Bacteria ole collected in a 30 rm Bacteria 1 sample collected	COR POTABLE WATER  Standard:  No detectable Escherichia of the coliform bacteria, and No so 10 total coliform bacteria.  Any of above Drinking Water and the coliform was any of above Drinking Water and the coliform was any of above Drinking Water and the coliform bacteria.	coli per 100ml  m bacteria per 100ml  oles contain total ample has more than yes  cer Protection Regula	Did this syst	em meet standard?
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WATER QUAI Parameter: Escherichia for all sample Total Colifo (if only 1 sample day period) Total Colifo (if more than 2 30 day period)	coli s) rm Bacteria ple collected in a 30 rm Bacteria 1 sample collected 1	OR POTABLE WATER  Standard:  No detectable Escherichia of No more than 10% of samp coliform bacteria, and No samp coliform bacteria any of above Drinking Water ditional sheets if necessary	coli per 100ml  m bacteria per 100ml  oles contain total ample has more than yes  cer Protection Regula	Did this syst  X Yes  X Yes	em meet standard?
WATER QUAL Parameter: Escherichia for all sample Total Colifo (if only 1 sampleday period) Total Colifo (if more than 2 30 day period)	coli s) rm Bacteria ple collected in a 30 rm Bacteria 1 sample collected 1	OR POTABLE WATER  Standard:  No detectable Escherichia of No more than 10% of samp coliform bacteria, and No samp coliform bacteria any of above Drinking Water ditional sheets if necessary	coli per 100ml  m bacteria per 100ml  oles contain total ample has more than yes  cer Protection Regula	Did this syst  X Yes  X Yes	em meet standard?
NATER QUAL Parameter: Escherichia for all sample Total Colifo if only 1 sample day period) Total Colifo if more than 2 80 day period)	coli s) rm Bacteria ple collected in a 30 rm Bacteria 1 sample collected 1	OR POTABLE WATER  Standard:  No detectable Escherichia of No more than 10% of samp coliform bacteria, and No samp coliform bacteria any of above Drinking Water ditional sheets if necessary	coli per 100ml  m bacteria per 100ml  oles contain total ample has more than yes  cer Protection Regula	Did this syst  X Yes  X Yes	em meet standard?

CHEMICAL SAMPLING COMPLETED DURING THIS REPORTING PERIOD							
Was any chem	ical sampling co	nducted during report	ing period? X Yes No				
		ical samples conducte					
for this system		-Never	Canadian Drinking Water Quality?				
(date)	(date) Don't Know Never X Yes 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						
Additional Tes	STING						
Does the syste	em have analyze	rs for continuous mon	itoring?				
If yes, check a	II boxes that app	oly:					
☐ Chlorine	□Turb	oidity 🗌 Oth	er (details)				
Are the result	s available on re	quest?					
If any addition	_	mpling was conducted	, record results in the table below; attach additional				
Additional Tes	sting & Reason fo	or Sampling Corre	ctive Action Taken				
WATER QUALITY	Y COMPLAINTS						
		complaints in this rep	orting Yes 🕱 No				
period? (e.g. t	taste, odour, col	our etc.)					
If yes, comple	If yes, complete the table below; attach additional sheets if necessary.						
Date	Water Quality	Complaint C	orrective Action / Treatment				
	1						

OPERATIONAL PR	OBLEMS								
Were there any operational problems during this reporting  period? (e.g. insufficient water supply, malfunction of disinfection equipment, line breaks, elevated turbidity etc.).  Yes No									
If yes, complet	If yes, complete the table below; attach additional sheets if necessary.								
Incident Date	cident Date Type of Operational Problem Corrective Action Taken								
	<b>1</b> 2								
	DES/REPAIRS & EXPENSES		·•	4-					
	ny major upgrades/re g this reporting perio		jor cos	ts	☐ Yes	5	⊠ No		
If yes, complete	te the table below; at	tach additional	sheets	if necessa	ry.				
				,	-,-				
Major Upgrade	•	Details							
Additions/char	required by DWO								
	stall new equipment pair or replacement								
	nance of system	Flushed and va	alve ma	intenance					
Specialist repo	· · · · · · · · · · · · · · · · · · ·	i rasirea arra va							
Other									
<b>G</b> 0.1.01									
FUTURE IMPROV	ZEMENTS								
Are there any	plans for future impro	ovements?			<b>X</b> Y	es	□ No		
	te the table below; at		chaata	if wasses					
ij yes, compie	te the table below; at	Lach additional	sneets	ij necessu	ry.				
	es or Improvements						Date of Completion		
Upgrade of water services and mains April 2025									
DATE COMPLETED: July 08 2025 COMPLETED BY: Dave Roblin									

# Sample Range Report

Fraser Health Authority

Facility Name: Date Range:

Vedder River Campground Jan 1 2024 to Dec 31 2024

Operator

Jess Horn

45950 Cheam Ave Chilliwack, BC V2P 1N6

Sampling Site	Date Collected	Total Coliform	E. Coli	Fecal Coliform
A				
Audit, A 5215 Giesbrecht Rd				
	5-8-2024 8:30:00 AM	<u>LT1</u>	<u>LT1</u>	
	Total Positive:	0	0	0
Group Campsite (far), 5215				
Giesbrecht Rd	3-19-2024 9:00:00 AM	LT1,	LT1	
	4-23-2024 11:15:00 AM	LT1	LT1	
	5-8-2024 8:30:00 AM	LT1	LT1	
	5-14-2024 7:45:00 AM	LT1	LT1	
	5-28-2024 11:30:00 AM	LT1	LT1	
	7-2-2024 12:30:00 PM	LT1	LT1	
	8-20-2024 9:45:00 AM	LT1	LT1	
	10-1-2024 8:29:00 AM	<u>LT1</u>	<u>LT1</u>	
	Total Positive:	0	0	0
Washrooms (far), 5215 Giesbrecht				
32 TO CHOSDICONE	4-16-2024 9:45:00 AM	LT1	LT1	
	5-21-2024 11:15:00 AM	LT1	LT1	
	6-25-2024 9:30:00 AM	LT1 °	LT1	
	8-13-2024 10:15:00 AM	LT1	LT1	
	9-24-2024 8:30:00 AM	<u>LT1</u>	<u>LT1</u>	
	Total Positive:	0	0	0

Washrooms (middle), 5215 Giesbrecht Rd				
<u> alestreent na</u>	3-26-2024 8:50:00 AM	LT1	LT1	
	4-30-2024 7:45:00	LT1	LT1	
	AM 6-4-2024 11:00:00	LT1	LT1	
	AM 7-16-2024 9:15:00	LT1	LT1	
	AM 8-27-2024 11:45:00	LT1	LT1	
	AM 10-8-2024 10:00:00	<u>LT1</u>	<u>LT1</u>	
	AM Total Positive:	0	0	0
Office Vedder Rive				
Giesbrecht Rd	3-19-2024 8:45:00 AM	LT1	LT1	
	4-2-2024 12:15:00 PM	LT1	LT1	
	5-7-2024 10:45:00	LT1	LT1	
	AM 6-11-2024 9:15:00 AM	LT1	LT1	
	7-23-2024 11:45:00 AM	LT1	LT1	
	9-3-2024 9:00:00 AM	LT1	LT1	
	10-15-2024 9:45:00 AM	LT1 ·	LT1	
	Total Positive:	0	0	0
Well 1, 5215 Geisbrecht Rd				
-	7-9-2024 11:00:00 AM	LT1	LT1	
	8-6-2024 8:00:00 AM	LT1	LT1	
	9-17-2024 10:00:00 AM	LT1	LT1	
	10-29-2024 8:15:00 AM	<u>LT1</u>	<u>LT1</u>	
	Total Positive:	0	0	0
Well 2, 5215 Giesbrecht Rd				
Glespiecht Va	4-9-2024 8:00:00	LT1	LT1	

•

en 1 (00)

AM			
6-18-2024 12:30:00 PM	LT1	LT1	
7-30-2024 9:40:00 AM	LT1	LT1	
9-10-2024 8:00:00 AM	LT1	LT1	
10-22-2024 8:30:00	LT1	<u>LT1</u>	
AM Total Positive:	0	0	0

Result Values:	E - estimated	L - less than	G - greater than	
Samples that contain total of Samples that contain e. col	i:  0		0.00% of total	
Samples that contain fecal Number of consecutive san contain total coliform:			0.00% of total	
Number of samples that co coliform in last 30 days:		•		
Total number of samples:	36			

#### Comments:

Environmental Health Officer Jan 14 2025

FOR FURTHER INFORMATION PLEASE CALL: Jeniene Lutz (604) 870-7900

Jun 3, 2025

Jun 6, 2025

T: +1 (604) 514-3322 E: info.vancouver@element.com W: www.element.com

Date Reported:

**Analytical Report** 

Project ID: Bill To: Fraser Valley Regional District Lot ID: 1818623

Project Name: 1 - 45950 Cheam Ave. Control Number:

Project Location: Southsite Chilliwack, BC, Canada Date Received:

LSD: V2P 1N6 P.O.:

element

Attn: Accounts Payable Report Number: 3144201 Proj. Acct. code: Sampled By: Peter C. Report Type: Final Report

Company: FVRD

Reference Number 1818623-2 Sample Date June 03, 2025 07:50

Sample Time **Sample Location** 

**Sample Description** Vedder River Campground / Group Campsite / 5.0 °C

Sample Matrix **Drinking Water** 

		Sample Matrix	Drinking Water			
Analyte		Units	Result	Nominal DL	Guideline Limit	Guideline Comments
Metals Extractable		- Cinto	rtodati			
Aluminum	Extractable	mg/L	0.002	0.001	0.1 OG, 2.9 MAC	Below OG
Antimony	Extractable	mg/L	0.00003	0.00002	0.006	Below MAC
Arsenic	Extractable	mg/L	0.0002	0.0001	0.010	Below MAC
Barium	Extractable	mg/L	0.0062	0.0001	2.0	Below MAC
Boron	Extractable	mg/L	0.005	0.002	5	Below MAC
Cadmium	Extractable	mg/L	<0.0001	0.00001	0.007	Below MAC
Chromium	Extractable	mg/L	0.00006	0.00005	0.05	Below MAC
Copper	Extractable	mg/L	0.0036	0.0005	1 AO, 2 MAC	Below AO
Lead	Extractable	mg/L	0.00003	0.00001	0.005	Below MAC
Selenium	Extractable	mg/L	0.0002	0.0002	0.05	Below MAC
Strontium	Extractable	mg/L	0.059	0.0001	7.0	Below MAC
Uranium	Extractable	mg/L	0.00003	0.00001	0.02	Below MAC
Vanadium	Extractable	mg/L	0.00035	0.00005		
Zinc	Extractable	mg/L	0.0086	0.0005	5.0	Below AO
Physical and Aggrega	te Properties					
Colour	True	Colour units	<5	5		
Turbidity		NTU	0.17	0.1		
Routine Water						
рН			7.40	0.01	7.0-10.5	Within Range
pH - Holding Time			Exceeded			
Temp. of observed pH		°C	24.3			
Electrical Conductivity	at 25 °C	μS/cm	97	1		
Calcium	Extractable	mg/L	13	0.01		
Iron	Extractable	mg/L	0.006	0.004	0.1	Below AO
Magnesium	Extractable	mg/L	1.2	0.02		
Manganese	Extractable	mg/L	<0.001	0.001	0.02 AO, 0.12 MAC	Below AO
Potassium	Extractable	mg/L	0.57	0.04		
Silicon	Extractable	mg/L	2.9	0.005		
Sodium	Extractable	mg/L	1.7	0.1	200	Below AO
T-Alkalinity	as CaCO3	mg/L	34	5		
Chloride	Dissolved	mg/L	1.35	0.05	250	Below AO
Fluoride	Dissolved	mg/L	<0.01	0.01	1.5	Below MAC
Nitrate - N	Dissolved	mg/L	0.18	0.01	10	Below MAC
Nitrite - N	Dissolved	mg/L	<0.01	0.01	1.0	Below MAC
Sulfate (SO4)	Dissolved	mg/L	8.0	0.1	500	Below AO
Hardness	as CaCO3 (extractable)	mg/L	38	1		
Total Dissolved Solids	Extractable	mg/L	55	1	500	Below AO