

November 1, 2024

Shellee Fournier

EMAILED to: sfournier@rideaulakes.ca

Dear Ms. Fournier:

Re: Small Drinking Water System Directive, Chantry Township Office
1439 County Rd 8, Delta, ON K0G 1E0
SDWS # 743000709
Municipality: Rideau Lakes

Please find attached a copy of the small drinking water system Directive issued to Shellee Fournier, the owner of Chantry Township Office. Please review this document and note the specific requirements regarding your system.

This is a legal document that sets out the operating requirements for this small drinking water system and applies to any subsequent owner or operator of this small drinking water system. The site specific risk assessment that was conducted at this premises has determined that this small drinking water system has a risk category of **LOW risk**, and the drinking water must be sampled for ecoli and total coliform bacteria once every 6 months

This means that a site specific risk assessment will be conducted by our office for this small drinking water system once every **FOUR years**.

This Directive contains legal requirements in **addition** to Ontario Regulation 319/08. To ensure that your small drinking water system is in compliance, please familiarize yourself with Ontario Regulation 319/08.

Please note the following:

The drinking water sampling required frequency for this system has been reduced to one sample every 6 months in accordance with the Small Drinking Water System and Risk Assessment Guideline, 2018. This reduced sampling frequency may be applied to small drinking water systems that use an NSF 55A Class A UV system and have an auto-shut off that will prevent public access to the water in the event that the system is not performing to the NSF Standard.

Your ongoing cooperation with this matter is greatly appreciated. If you have any questions or concerns regarding your small drinking water system, please feel free to contact our office.

Your Partner in Public Health,

A handwritten signature in black ink, appearing to read "N. Carpenter". The signature is fluid and cursive, with a large loop at the end.

Nancy Carpenter, B.A.Sc. (EH), C.P.H.I. (C)
Public Health Inspector
613-345-5685 Office/ 613-345-7148 Fax

NC/ld

CC rhennessy@rideaulakes.ca, parksmanager@rideaulakes.ca

Encls.

DIRECTIVE

Made pursuant to section 7 of O. Reg 319/08 (Small Drinking Water Systems) made under the *Health Protection and Promotion Act*, R.S.O. 1990 c. H.7

To: Shellee Fournier

Premises Name: Chantry Township Office

Premises Address: 1439 County Rd 8, Delta, ON, K0G 1E0

Municipality: Rideau Lakes

Small drinking water system identification number: 743000709

I, Nancy Carpenter, a Public Health Inspector of the Leeds, Grenville and Lanark District Health Unit direct you to follow the requirements and take the actions that are specified in this Directive. I further direct the owner of this small drinking water system to ensure that the operator involved in the operation of the small drinking water system noted below follows the attached requirements and takes the actions that are specified in this Directive.

The requirements and actions specified in this Directive apply in relation to the small drinking water system located at Chantry Township Office, 1439 County Rd 8, Delta.

The reasons for this DIRECTIVE are that:

On September 04, 2024, I conducted a risk assessment on the above noted small drinking water system.

Having regard to that risk assessment I have determined that the requirements and actions that are specified in this Directive are necessary.

FAILURE to comply with this Directive is an offence for which you may be liable on conviction to a fine of not more than \$5,000.00 for every day or part of each day on which the offence occurs or continues. (Note: where a municipality or other corporation is the owner of the system the fine would be \$25,000.00)

Directive Requirements**RISK CATEGORY: Low risk****TREATMENT EQUIPMENT****Ground Water****Primary Disinfection Required**

The owner and operator shall:

- a) Provide and maintain disinfection using either disinfecting equipment or disinfection chemicals that would result in providing water that, when sampled and tested, have no total coliforms and no Escherichia coli. An NSF 55A UV light was in place at the time of assessment.
- b) Provide filtration or other treatment necessary to allow for proper functioning of the disinfection equipment or disinfection chemical.

SAMPLING & TESTING

To ensure that the drinking water meets the indicated standard, the owner and operator shall ensure that the following samples or tests are conducted at the required frequency:

Bacteriological Water Samples Required:

Laboratory test(s) to be conducted:

TEST	STANDARD	FREQUENCY
Total coliform and E .coli	no total coliform and no E.coli	Once every 6 months

OPERATIONAL CHECKS

The owner and the operator(s) shall ensure that the following operational checks are performed on the drinking water systems at the indicated frequency:

(a) Operational checks to be performed:

OPERATIONAL CHECK	FREQUENCY
Treatment System operating properly	Once Per Week
Well head in good repair	Once Per Year
Area surrounding well head is maintained in appropriate condition	Once Per Year

RECORDS

Records:

The owner/operator shall keep and sign a record of all operational checks required in this directive.

This record shall include:

- the date and time of each operational check
- the location and equipment of the operational check
- the signature of the person performing the operational check.

Owner/operator shall maintain all records of samples and tests for a period of not less than five years from the date of making the record.

OPERATOR TRAINING

The owner shall ensure that the operator involved with the operation of this small drinking water system shall have the following training:

1. Ensure that the operator is trained in proper bacteriological water sampling and handling techniques.
2. Ensure that the operator is trained in the proper procedures to respond to an adverse water quality event.

NOTICE

TAKE NOTICE THAT you have a right to request a review of this directive by Dr. Linna Li, MD, FRCPC, Medical Officer of Health of the Leeds, Grenville and Lanark District Health Unit, pursuant to section 37 of O. Reg. 319/08 (Small Drinking Water Systems) made under the *Health Protection and Promotion Act*. The request must be made in writing and filed by way of personal service, service by pre-paid registered mail or service by fax on the Medical Officer of Health noted above within seven (7) days after this Directive is served on you. The address of Dr. Linna Li, MD, FRCPC is as follows:

Leeds, Grenville and Lanark District Health Unit
458 Laurier Blvd.
Brockville ON K6V 7A3
Telephone: 613-345-5685
Fax: 613-345-2879

AND TAKE FURTHER NOTICE THAT this Directive takes effect when it is served on you even though a review may be requested.

Dated at Brockville this 1 day of November, 2024.



Nancy Carpenter, B.A.Sc. (EH), C.P.H.I. (C)
Public Health Inspector
The Leeds, Grenville and Lanark District Health Unit

R:29/11/2018

DIRECTIVE

Made pursuant to section 7 of O. Reg 319/08 (Small Drinking Water Systems) made under the *Health Protection and Promotion Act*, R.S.O. 1990 c. H.7

To: Shellee Fournier

Premises Name: Delta Athletic Society (DARS)

Premises Address: 47 Recreation Dr, Box 173 Delta ON, K0E 1G0

Municipality: Rideau Lakes

Small drinking water system identification number: 743003878

I, Nancy Carpenter, a Public Health Inspector of the Leeds, Grenville and Lanark District Health Unit direct you to follow the requirements and take the actions that are specified in this Directive. I further direct the owner of this small drinking water system to ensure that the operator involved in the operation of the small drinking water system noted below follows the attached requirements and takes the actions that are specified in this Directive.

The requirements and actions specified in this Directive apply in relation to the small drinking water system located at Delta Athletic Society, 47 Recreational Dr., Delta.

The reasons for this DIRECTIVE are that:

On September 04, 2024, I conducted a risk assessment on the above noted small drinking water system.

Having regard to that risk assessment I have determined that the requirements and actions that are specified in this Directive are necessary.

FAILURE to comply with this Directive is an offence for which you may be liable on conviction to a fine of not more than \$5,000.00 for every day or part of each day on which the offence occurs or continues. (Note: where a municipality or other corporation is the owner of the system the fine would be \$25,000.00)

Directive Requirements

RISK CATEGORY: Low risk

TREATMENT EQUIPMENT**Ground Water****Primary Disinfection Required**

The owner and operator shall:

- a) Provide and maintain disinfection using either disinfecting equipment or disinfection chemicals that would result in providing water that, when sampled and tested, have no total coliforms and no Escherichia coli. An NSF 55A UV light was in place at the time of assessment.

- b) Provide filtration or other treatment necessary to allow for proper functioning of the disinfection equipment or disinfection chemical.

SAMPLING & TESTING

To ensure that the drinking water meets the indicated standard, the owner and operator shall ensure that the following samples or tests are conducted at the required frequency:

Bacteriological Water Samples Required:

Laboratory test(s) to be conducted:

TEST	STANDARD	FREQUENCY
Total coliform and e.coli	no total coliform and no E.coli	Once every 6 months

OPERATIONAL CHECKS

The owner and the operator(s) shall ensure that the following operational checks are performed on the drinking water systems at the indicated frequency:

(a) Operational checks to be performed:

OPERATIONAL CHECK	FREQUENCY
Treatment System operating properly	Once Per Week
Well head in good repair	Once Per Year
Area surrounding well head is maintained in appropriate condition	Once Per Year

RECORDS

Records:

The owner/operator shall keep and sign a record of all operational checks required in this directive.

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Dated at Brockville this 1 day of November, 2024.



Nancy Carpenter, B.A.Sc. (EH), C.P.H.I. (C)
Public Health Inspector
The Leeds, Grenville and Lanark District Health Unit

R:29/11/2018

DIRECTIVE

Made pursuant to section 7 of O. Reg 319/08 (Small Drinking Water Systems) made under the *Health Protection and Promotion Act*, R.S.O. 1990 c. H.7

To: Shellee Fournier

Premises Name: Delta Ball Park

Premises Address: 118 Lower Beverly Lake Park Rd

Municipality: Rideau Lakes

Small drinking water system identification number: 743000712

I, Nancy Carpenter, a Public Health Inspector of the Leeds, Grenville and Lanark District Health Unit direct you to follow the requirements and take the actions that are specified in this Directive. I further direct the owner of this small drinking water system to ensure that the operator involved in the operation of the small drinking water system noted below follows the attached requirements and takes the actions that are specified in this Directive.

The requirements and actions specified in this Directive apply in relation to the small drinking water system located at Delta Ball Park, 118 Lower Beverly Lake Park Rd.

The reasons for this DIRECTIVE are that:

On September 04, 2024, I conducted a risk assessment on the above noted small drinking water system.

Having regard to that risk assessment I have determined that the requirements and actions that are specified in this Directive are necessary.

FAILURE to comply with this Directive is an offence for which you may be liable on conviction to a fine of not more than \$5,000.00 for every day or part of each day on which the offence occurs or continues. (Note: where a municipality or other corporation is the owner of the system the fine would be \$25,000.00)

Directive Requirements**RISK CATEGORY: Low risk****TREATMENT EQUIPMENT****Ground Water****Primary Disinfection Required**

The owner and operator shall:

- a) Provide and maintain disinfection using either disinfecting equipment or disinfection chemicals that would result in providing water that, when sampled and tested, have no total coliforms and no *Escherichia coli*. An NSF 55A UV light was in place at the time of assessment.
- b) Provide filtration or other treatment necessary to allow for proper functioning of the disinfection equipment or disinfection chemical.

SAMPLING & TESTING

To ensure that the drinking water meets the indicated standard, the owner and operator shall ensure that the following samples or tests are conducted at the required frequency:

Bacteriological Water Samples Required:

Laboratory test(s) to be conducted:

TEST	STANDARD	FREQUENCY
Total coliform and E .coli	no total coliform and no E. coli	Once every 6 months

OPERATIONAL CHECKS

The owner and the operator(s) shall ensure that the following operational checks are performed on the drinking water systems at the indicated frequency:

(a) Operational checks to be performed:

OPERATIONAL CHECK	FREQUENCY
Treatment System operating properly	Once Per Week
Well head in good repair	Once Per Year
Area surrounding well head is maintained in appropriate condition	Once Per Year

RECORDS

Records:

The owner/operator shall keep and sign a record of all operational checks required in this directive.

This record shall include:

- the date and time of each operational check
- the location and equipment of the operational check
- the signature of the person performing the operational check.

Owner/operator shall maintain all records of samples and tests for a period of not less than five years from the date of making the record.

OPERATOR TRAINING

The owner shall ensure that the operator involved with the operation of this small drinking water system shall have the following training:

1. Ensure that the operator is trained in proper bacteriological water sampling and handling techniques.
2. Ensure that the operator is trained in the proper procedures to respond to an adverse water quality event.

NOTICE

TAKE NOTICE THAT you have a right to request a review of this directive by Dr. Linna Li, MD, FRCPC, Medical Officer of Health of the Leeds, Grenville and Lanark District Health Unit, pursuant to section 37 of O. Reg. 319/08 (Small Drinking Water Systems) made under the *Health Protection and Promotion Act*. The request must be made in writing and filed by way of personal service, service by pre-paid registered mail or service by fax on the Medical Officer of Health noted above within seven (7) days after this Directive is served on you. The address of Dr. Linna Li, MD, FRCPC is as follows:

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458 Laurier Blvd.
Brockville ON K6V 7A3
Telephone: 613-345-5685
Fax: 613-345-2879

AND TAKE FURTHER NOTICE THAT this Directive takes effect when it is served on you even though a review may be requested.

Dated at Brockville this 1 day of November, 2024.



Nancy Carpenter, B.A.Sc. (EH), C.P.H.I. (C)
Public Health Inspector
The Leeds, Grenville and Lanark District Health Unit

R:29/11/2018

DIRECTIVE

Made pursuant to section 7 of O. Reg 319/08 (Small Drinking Water Systems) made under the *Health Protection and Promotion Act*, R.S.O. 1990 c. H.7

To: Shellee Fournier

Premises Name: Elgin Municipal Complex

Premises Address: 47 Main St, Elgin ON

Municipality: Rideau Lakes

Small drinking water system identification number: 743000738

I, Nancy Carpenter, a Public Health Inspector of the Leeds, Grenville and Lanark District Health Unit direct you to follow the requirements and take the actions that are specified in this Directive. I further direct the owner of this small drinking water system to ensure that the operator involved in the operation of the small drinking water system noted below follows the attached requirements and takes the actions that are specified in this Directive.

The requirements and actions specified in this Directive apply in relation to the small drinking water system located at Elgin Community Complex, 47 Main St Elgin.

The reasons for this DIRECTIVE are that:

On October 16, 2024, I conducted a risk assessment on the above noted small drinking water system.

Having regard to that risk assessment I have determined that the requirements and actions that are specified in this Directive are necessary.

FAILURE to comply with this Directive is an offence for which you may be liable on conviction to a fine of not more than \$5,000.00 for every day or part of each day on which the offence occurs or continues. (Note: where a municipality or other corporation is the owner of the system the fine would be \$25,000.00)

Directive Requirements**RISK CATEGORY: Low risk****TREATMENT EQUIPMENT****Ground Water****Primary Disinfection Required**

The owner and operator shall:

- a) Provide and maintain disinfection using either disinfecting equipment or disinfection chemicals that would result in providing water that, when sampled and tested, have no total coliforms and no *Escherichia coli*. An NSF 55A UV light was in place at the time of assessment.
- b) Provide filtration or other treatment necessary to allow for proper functioning of the disinfection equipment or disinfection chemical.

SAMPLING & TESTING

To ensure that the drinking water meets the indicated standard, the owner and operator shall ensure that the following samples or tests are conducted at the required frequency:

Bacteriological Water Samples Required:

Laboratory test(s) to be conducted:

TEST	STANDARD	FREQUENCY
Total coliform and <i>E. coli</i>	no total coliform and no <i>E. coli</i>	Once every 6 months

OPERATIONAL CHECKS

The owner and the operator(s) shall ensure that the following operational checks are performed on the drinking water systems at the indicated frequency:

(a) Operational checks to be performed:

OPERATIONAL CHECK	FREQUENCY
Treatment System operating properly	Once Per Week
Well head in good repair	Once Per Year
Area surrounding well head is maintained in appropriate condition	Once Per Year

RECORDS

Records:

The owner/operator shall keep and sign a record of all operational checks required in this directive.

This record shall include:

- the date and time of each operational check
- the location and equipment of the operational check
- the signature of the person performing the operational check.

Owner/operator shall maintain all records of samples and tests for a period of not less than five years from the date of making the record.

OPERATOR TRAINING

The owner shall ensure that the operator involved with the operation of this small drinking water system shall have the following training:

1. Ensure that the operator is trained in proper bacteriological water sampling and handling techniques.
2. Ensure that the operator is trained in the proper procedures to respond to an adverse water quality event.

NOTICE

TAKE NOTICE THAT you have a right to request a review of this directive by Dr. Linna Li, MD, FRCPC, Medical Officer of Health of the Leeds, Grenville and Lanark District Health Unit, pursuant to section 37 of O. Reg. 319/08 (Small Drinking Water Systems) made under the *Health Protection and Promotion Act*. The request must be made in writing and filed by way of personal service, service by pre-paid registered mail or service by fax on the Medical Officer of Health noted above within seven (7) days after this Directive is served on you. The address of Dr. Linna Li, MD, FRCPC is as follows:

Leeds, Grenville and Lanark District Health Unit
458 Laurier Blvd.
Brockville ON K6V 7A3
Telephone: 613-345-5685
Fax: 613-345-2879

AND TAKE FURTHER NOTICE THAT this Directive takes effect when it is served on you even though a review may be requested.

Dated at Brockville this 1 day of November, 2024.



Nancy Carpenter, B.A.Sc. (EH), C.P.H.I. (C)
Public Health Inspector
The Leeds, Grenville and Lanark District Health Unit

R:29/11/2018

DIRECTIVE

Made pursuant to section 7 of O. Reg 319/08 (Small Drinking Water Systems) made under the *Health Protection and Promotion Act*, R.S.O. 1990 c. H.7

To: Shellee Fournier

Premises Name: Kinsmen Recreation Park

Premises Address: 2311 Harlem Rd, Portland

Municipality: Rideau Lakes

Small drinking water system identification number: 743001068

I, Nancy Carpenter, a Public Health Inspector of the Leeds, Grenville and Lanark District Health Unit direct you to follow the requirements and take the actions that are specified in this Directive. I further direct the owner of this small drinking water system to ensure that the operator involved in the operation of the small drinking water system noted below follows the attached requirements and takes the actions that are specified in this Directive.

The requirements and actions specified in this Directive apply in relation to the small drinking water system located at Kinsmen Recreation Park, 2311 Harlem Rd, Portland.

The reasons for this DIRECTIVE are that:

On October 16, 2024, I conducted a risk assessment on the above noted small drinking water system.

Having regard to that risk assessment I have determined that the requirements and actions that are specified in this Directive are necessary.

FAILURE to comply with this Directive is an offence for which you may be liable on conviction to a fine of not more than \$5,000.00 for every day or part of each day on which the offence occurs or continues. (Note: where a municipality or other corporation is the owner of the system the fine would be \$25,000.00)

Directive Requirements**RISK CATEGORY: Low risk****TREATMENT EQUIPMENT****Ground Water****Primary Disinfection Required**

The owner and operator shall:

- a) Provide and maintain disinfection using either disinfecting equipment or disinfection chemicals that would result in providing water that, when sampled and tested, have no total coliforms and no *Escherichia coli*. An NSF 55A UV light was in place at the time of assessment.
- b) Provide filtration or other treatment necessary to allow for proper functioning of the disinfection equipment or disinfection chemical.

SAMPLING & TESTING

To ensure that the drinking water meets the indicated standard, the owner and operator shall ensure that the following samples or tests are conducted at the required frequency:

Bacteriological Water Samples Required:

Laboratory test(s) to be conducted:

TEST	STANDARD	FREQUENCY
Total coliform and <i>E. coli</i>	no total coliform and no <i>E. coli</i>	Once every 6 months

OPERATIONAL CHECKS

The owner and the operator(s) shall ensure that the following operational checks are performed on the drinking water systems at the indicated frequency:

(a) Operational checks to be performed:

OPERATIONAL CHECK	FREQUENCY
Treatment System operating properly	Once Per Week
Well head in good repair	Once Per Year
Area surrounding well head is maintained in appropriate condition	Once Per Year

RECORDS

Records:

The owner/operator shall keep and sign a record of all operational checks required in this directive.

This record shall include:

- the date and time of each operational check
- the location and equipment of the operational check
- the signature of the person performing the operational check.

Owner/operator shall maintain all records of samples and tests for a period of not less than five years from the date of making the record.

OPERATOR TRAINING

The owner shall ensure that the operator involved with the operation of this small drinking water system shall have the following training:

1. Ensure that the operator is trained in proper bacteriological water sampling and handling techniques.
2. Ensure that the operator is trained in the proper procedures to respond to an adverse water quality event.

NOTICE

TAKE NOTICE THAT you have a right to request a review of this directive by Dr. Linna Li, MD, FRCPC, Medical Officer of Health of the Leeds, Grenville and Lanark District Health Unit, pursuant to section 37 of O. Reg. 319/08 (Small Drinking Water Systems) made under the *Health Protection and Promotion Act*. The request must be made in writing and filed by way of personal service, service by pre-paid registered mail or service by fax on the Medical Officer of Health noted above within seven (7) days after this Directive is served on you. The address of Dr. Linna Li, MD, FRCPC is as follows:

Leeds, Grenville and Lanark District Health Unit
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Telephone: 613-345-5685
Fax: 613-345-2879

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Dated at Brockville this 1 day of November, 2024.



Nancy Carpenter, B.A.Sc. (EH), C.P.H.I. (C)
Public Health Inspector
The Leeds, Grenville and Lanark District Health Unit

R:29/11/2018

DIRECTIVE

Made pursuant to section 7 of O. Reg 319/08 (Small Drinking Water Systems) made under the *Health Protection and Promotion Act*, R.S.O. 1990 c. H.7

To: Shellee Fournier

Premises Name: Morton Community Hall

Premises Address: 13 Judd Rd, Morton

Municipality: Rideau Lakes

Small drinking water system identification number: 743000730

I, Nancy Carpenter, a Public Health Inspector of the Leeds, Grenville and Lanark District Health Unit direct you to follow the requirements and take the actions that are specified in this Directive. I further direct the owner of this small drinking water system to ensure that the operator involved in the operation of the small drinking water system noted below follows the attached requirements and takes the actions that are specified in this Directive.

The requirements and actions specified in this Directive apply in relation to the small drinking water system located at Morton Community Hall, 13 Judd Rd, Morton.

The reasons for this DIRECTIVE are that:

On September 04, 2024, I conducted a risk assessment on the above noted small drinking water system.

Having regard to that risk assessment I have determined that the requirements and actions that are specified in this Directive are necessary.

FAILURE to comply with this Directive is an offence for which you may be liable on conviction to a fine of not more than \$5,000.00 for every day or part of each day on which the offence occurs or continues. (Note: where a municipality or other corporation is the owner of the system the fine would be \$25,000.00)

Directive Requirements**RISK CATEGORY: Low risk****TREATMENT EQUIPMENT****Ground Water****Primary Disinfection Required**

The owner and operator shall:

- a) Provide and maintain disinfection using either disinfecting equipment or disinfection chemicals that would result in providing water that, when sampled and tested, have no total coliforms and no *Escherichia coli*. An NSF 55A UV light was in place at the time of assessment.
- b) Provide filtration or other treatment necessary to allow for proper functioning of the disinfection equipment or disinfection chemical.

SAMPLING & TESTING

To ensure that the drinking water meets the indicated standard, the owner and operator shall ensure that the following samples or tests are conducted at the required frequency:

Bacteriological Water Samples Required:

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TEST	STANDARD	FREQUENCY
Total coliform and e.coli	no total coliform and no e.coli	Once every 6 months

OPERATIONAL CHECKS

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(a) Operational checks to be performed:

OPERATIONAL CHECK	FREQUENCY
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Dated at Brockville this 1 day of November, 2024.



Nancy Carpenter, B.A.Sc. (EH), C.P.H.I. (C)
Public Health Inspector
The Leeds, Grenville and Lanark District Health Unit

R:29/11/2018

DIRECTIVE

Made pursuant to section 7 of O. Reg 319/08 (Small Drinking Water Systems) made under the *Health Protection and Promotion Act*, R.S.O. 1990 c. H.7

To: Shellee Fournier

Premises Name: Newboro Community Hall

Premises Address: 15 Drummond St, Newboro, ON K0G 1P0

Municipality: Rideau Lakes

Small drinking water system identification number: 743000703

I, Nancy Carpenter, a Public Health Inspector of the Leeds, Grenville and Lanark District Health Unit direct you to follow the requirements and take the actions that are specified in this Directive. I further direct the owner of this small drinking water system to ensure that the operator involved in the operation of the small drinking water system noted below follows the attached requirements and takes the actions that are specified in this Directive.

The requirements and actions specified in this Directive apply in relation to the small drinking water system located at Newboro Community Hall, 15 Drummond St, Newboro.

The reasons for this DIRECTIVE are that:

On September 04, 2024, I conducted a risk assessment on the above noted small drinking water system.

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Directive Requirements

RISK CATEGORY: Low risk

TREATMENT EQUIPMENT

Ground Water

Primary Disinfection Required

The owner and operator shall:

- a) Provide and maintain disinfection using either disinfecting equipment or disinfection chemicals that would result in providing water that, when sampled and tested, have no total coliforms and no Escherichia coli. An NSF 55A UV light was in place at the time of assessment.

- b) Provide filtration or other treatment necessary to allow for proper functioning of the disinfection equipment or disinfection chemical.

SAMPLING & TESTING

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Laboratory test(s) to be conducted:

TEST	STANDARD	FREQUENCY
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The owner and the operator(s) shall ensure that the following operational checks are performed on the drinking water systems at the indicated frequency:

(a) Operational checks to be performed:

OPERATIONAL CHECK	FREQUENCY
Treatment System operating properly	Once Per Week
Well head in good repair	Once Per Year
Area surrounding well head is maintained in appropriate condition	Once Per Year

RECORDS

Records:

The owner/operator shall keep and sign a record of all operational checks required in this directive.

This record shall include:

- the date and time of each operational check
- the location and equipment of the operational check
- the signature of the person performing the operational check.

Owner/operator shall maintain all records of samples and tests for a period of not less than five years from the date of making the record.

OPERATOR TRAINING

The owner shall ensure that the operator involved with the operation of this small drinking water system shall have the following training:

1. Ensure that the operator is trained in proper bacteriological water sampling and handling techniques.
2. Ensure that the operator is trained in the proper procedures to respond to an adverse water quality event.

NOTICE

TAKE NOTICE THAT you have a right to request a review of this directive by Dr. Linna Li, MD, FRCPC, Medical Officer of Health of the Leeds, Grenville and Lanark District Health Unit, pursuant to section 37 of O. Reg. 319/08 (Small Drinking Water Systems) made under the *Health Protection and Promotion Act*. The request must be made in writing and filed by way of personal service, service by pre-paid registered mail or service by fax on the Medical Officer of Health noted above within seven (7) days after this Directive is served on you. The address of Dr. Linna Li, MD, FRCPC is as follows:

Leeds, Grenville and Lanark District Health Unit
458 Laurier Blvd.
Brockville ON K6V 7A3
Telephone: 613-345-5685
Fax: 613-345-2879

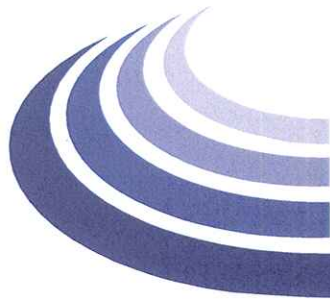
AND TAKE FURTHER NOTICE THAT this Directive takes effect when it is served on you even though a review may be requested.

Dated at Brockville this 1 day of November, 2024.



Nancy Carpenter, B.A.Sc. (EH), C.P.H.I. (C)
Public Health Inspector
The Leeds, Grenville and Lanark District Health Unit

R:29/11/2018



DIRECTIVE

Made pursuant to section 7 of O. Reg 319/08 (Small Drinking Water Systems) made under the *Health Protection and Promotion Act*, R.S.O. 1990 c. H.7

To: Shellee Fournier

Premises Name: Newboro Library

Premises Address: 10 Brock St, Newboro, ON K0G 1P0

Municipality: Rideau Lakes

Small drinking water system identification number: 743000713

I, Nancy Carpenter, a Public Health Inspector of the Leeds, Grenville and Lanark District Health Unit direct you to follow the requirements and take the actions that are specified in this Directive. I further direct the owner of this small drinking water system to ensure that the operator involved in the operation of the small drinking water system noted below follows the attached requirements and takes the actions that are specified in this Directive.

The requirements and actions specified in this Directive apply in relation to the small drinking water system located at 10 Brock St, Newboro

The reasons for this DIRECTIVE are that:

On September 04, 2024, I conducted a risk assessment on the above noted small drinking water system.

Having regard to that risk assessment I have determined that the requirements and actions that are specified in this Directive are necessary.

FAILURE to comply with this Directive is an offence for which you may be liable on conviction to a fine of not more than \$5,000.00 for every day or part of each day on which the offence occurs or continues. (Note: where a municipality or other corporation is the owner of the system the fine would be \$25,000.00)

Directive Requirements**RISK CATEGORY: Low risk****TREATMENT EQUIPMENT****Ground Water****Primary Disinfection Required**

The owner and operator shall:

- a) Provide and maintain disinfection using either disinfecting equipment or disinfection chemicals that would result in providing water that, when sampled and tested, have no total coliforms and no *Escherichia coli*. An NSF 55A UV light was in place at the time of assessment.
- b) Provide filtration or other treatment necessary to allow for proper functioning of the disinfection equipment or disinfection chemical.

SAMPLING & TESTING

To ensure that the drinking water meets the indicated standard, the owner and operator shall ensure that the following samples or tests are conducted at the required frequency:

Bacteriological Water Samples Required:

Laboratory test(s) to be conducted:

TEST	STANDARD	FREQUENCY
Total coliform and e.coli	no total coliform and no E. coli	Once every 6 months

OPERATIONAL CHECKS

The owner and the operator(s) shall ensure that the following operational checks are performed on the drinking water systems at the indicated frequency:

(a) Operational checks to be performed:

OPERATIONAL CHECK	FREQUENCY
Treatment System operating properly	Once Per Week
Well head in good repair	Once Per Year
Area surrounding well head is maintained in appropriate condition	Once Per Year

RECORDS

Records:

The owner/operator shall keep and sign a record of all operational checks required in this directive.

This record shall include:

- the date and time of each operational check
- the location and equipment of the operational check
- the signature of the person performing the operational check.

Owner/operator shall maintain all records of samples and tests for a period of not less than five years from the date of making the record.

OPERATOR TRAINING

The owner shall ensure that the operator involved with the operation of this small drinking water system shall have the following training:

1. Ensure that the operator is trained in proper bacteriological water sampling and handling techniques.
2. Ensure that the operator is trained in the proper procedures to respond to an adverse water quality event.

NOTICE

TAKE NOTICE THAT you have a right to request a review of this directive by Dr. Linna Li, MD, FRCPC, Medical Officer of Health of the Leeds, Grenville and Lanark District Health Unit, pursuant to section 37 of O. Reg. 319/08 (Small Drinking Water Systems) made under the *Health Protection and Promotion Act*. The request must be made in writing and filed by way of personal service, service by pre-paid registered mail or service by fax on the Medical Officer of Health noted above within seven (7) days after this Directive is served on you. The address of Dr. Linna Li, MD, FRCPC is as follows:

Leeds, Grenville and Lanark District Health Unit
458 Laurier Blvd.
Brockville ON K6V 7A3
Telephone: 613-345-5685
Fax: 613-345-2879

AND TAKE FURTHER NOTICE THAT this Directive takes effect when it is served on you even though a review may be requested.

Dated at Brockville this 1 day of November, 2024.



Nancy Carpenter, B.A.Sc. (EH), C.P.H.I. (C)
Public Health Inspector
The Leeds, Grenville and Lanark District Health Unit

R:29/11/2018

DIRECTIVE

Made pursuant to section 7 of O. Reg 319/08 (Small Drinking Water Systems) made under the *Health Protection and Promotion Act*, R.S.O. 1990 c. H.7

To: Shellee Fournier

Premises Name: Ron Holman Municipal Complex

Premises Address: 441 Hwy 15, Smiths Falls K7A 5B8

Municipality: Rideau Lakes

Small drinking water system identification number: 743000739

I, Nancy Carpenter, a Public Health Inspector of the Leeds, Grenville and Lanark District Health Unit direct you to follow the requirements and take the actions that are specified in this Directive. I further direct the owner of this small drinking water system to ensure that the operator involved in the operation of the small drinking water system noted below follows the attached requirements and takes the actions that are specified in this Directive.

The requirements and actions specified in this Directive apply in relation to the small drinking water system located at Ron Holman Municipal Complex, 441 Hwy 15, Smiths Falls K7A 5B8.

The reasons for this DIRECTIVE are that:

On September 04, 2024, I conducted a risk assessment on the above noted small drinking water system.

Having regard to that risk assessment I have determined that the requirements and actions that are specified in this Directive are necessary.

FAILURE to comply with this Directive is an offence for which you may be liable on conviction to a fine of not more than \$5,000.00 for every day or part of each day on which the offence occurs or continues. (Note: where a municipality or other corporation is the owner of the system the fine would be \$25,000.00)

Directive Requirements

RISK CATEGORY: Low risk

TREATMENT EQUIPMENT

Ground Water

Primary Disinfection Required

The owner and operator shall:

- a) Provide and maintain disinfection using either disinfecting equipment or disinfection chemicals that would result in providing water that, when sampled and tested, have no total coliforms and no Escherichia coli. An NSF 55A UV light was in place at the time of assessment.

- b) Provide filtration or other treatment necessary to allow for proper functioning of the disinfection equipment or disinfection chemical.

SAMPLING & TESTING

To ensure that the drinking water meets the indicated standard, the owner and operator shall ensure that the following samples or tests are conducted at the required frequency:

Bacteriological Water Samples Required:

Laboratory test(s) to be conducted:

TEST	STANDARD	FREQUENCY
Total coliform and E. coli	no total coliform and no E. coli	Once every 6 months

OPERATIONAL CHECKS

The owner and the operator(s) shall ensure that the following operational checks are performed on the drinking water systems at the indicated frequency:

(a) Operational checks to be performed:

OPERATIONAL CHECK	FREQUENCY
Treatment System operating properly	Once Per Week
Well head in good repair	Once Per Year
Area surrounding well head is maintained in appropriate condition	Once Per Year

RECORDS

Records:

The owner/operator shall keep and sign a record of all operational checks required in this directive.

This record shall include:

- the date and time of each operational check
- the location and equipment of the operational check
- the signature of the person performing the operational check.

Owner/operator shall maintain all records of samples and tests for a period of not less than five years from the date of making the record.

OPERATOR TRAINING

The owner shall ensure that the operator involved with the operation of this small drinking water system shall have the following training:

1. Ensure that the operator is trained in proper bacteriological water sampling and handling techniques.
2. Ensure that the operator is trained in the proper procedures to respond to an adverse water quality event.

NOTICE

TAKE NOTICE THAT you have a right to request a review of this directive by Dr. Linna Li, MD, FRCPC, Medical Officer of Health of the Leeds, Grenville and Lanark District Health Unit, pursuant to section 37 of O. Reg. 319/08 (Small Drinking Water Systems) made under the *Health Protection and Promotion Act*. The request must be made in writing and filed by way of personal service, service by pre-paid registered mail or service by fax on the Medical Officer of Health noted above within seven (7) days after this Directive is served on you. The address of Dr. Linna Li, MD, FRCPC is as follows:

Leeds, Grenville and Lanark District Health Unit
458 Laurier Blvd.
Brockville ON K6V 7A3
Telephone: 613-345-5685
Fax: 613-345-2879

AND TAKE FURTHER NOTICE THAT this Directive takes effect when it is served on you even though a review may be requested.

Dated at Brockville this 1 day of November, 2024.



Nancy Carpenter, B.A.Sc. (EH), C.P.H.I. (C)
Public Health Inspector
The Leeds, Grenville and Lanark District Health Unit

R:29/11/2018

DIRECTIVE

Made pursuant to section 7 of O. Reg 319/08 (Small Drinking Water Systems) made under the *Health Protection and Promotion Act*, R.S.O. 1990 c. H.7

To: Derek Gaylord and Stephen Holmes

Premises Name: Newboro Memorial Park (Newboro Ball Park)

Premises Address: 10 John St, Newboro ON K0G 1L0

Municipality: Rideau Lakes

Small drinking water system identification number:743000711

I, Nancy Carpenter, a Public Health Inspector of Southeast Public Health direct you to follow the requirements and take the actions that are specified in this Directive. I further direct the owner of this small drinking water system to ensure that the operator involved in the operation of the small drinking water system noted below follows the attached requirements and takes the actions that are specified in this Directive.

The requirements and actions specified in this Directive apply in relation to the small drinking water system located at Newboro Memorial Park, (Newboro Ball Park) 10 John St, Newboro.

The reasons for this DIRECTIVE are that:

On June 10, 2026, I conducted a risk assessment on the above noted small drinking water system.

Having regard to that risk assessment I have determined that the requirements and actions that are specified in this Directive are necessary.

FAILURE to comply with this Directive is an offence for which you may be liable on conviction to a fine of not more than \$5,000.00 for every day or part of each day on which the offence occurs or continues. (Note: where a municipality or other corporation is the owner of the system the fine would be \$25,000.00)



Directive Requirements

RISK CATEGORY

Low risk

TREATMENT EQUIPMENT

Ground Water

Primary Disinfection Required

The owner and operator shall:

- a) Provide and maintain disinfection using either disinfecting equipment or disinfection chemicals that would result in providing water that, when sampled and tested, have no total coliforms and no Escherichia coli.
- b) Provide filtration or other treatment necessary to allow for proper functioning of the disinfection equipment or disinfection chemical.

SAMPLING & TESTING

To ensure that the drinking water meets the indicated standard, the owner and operator shall ensure that the following samples or tests are conducted at the required frequency:

Bacteriological Water Samples Required:

Laboratory test(s) to be conducted:

TEST	STANDARD	FREQUENCY
Total coliform and E.coli	no total coliform and no e.coli	Once every 6 months



OPERATIONAL CHECKS

The owner and the operator(s) shall ensure that the following operational checks are performed on the drinking water systems at the indicated frequency:

(a) Operational checks to be performed:

OPERATIONAL CHECK	FREQUENCY
Treatment System operating properly	Once Per Week
Well head in good repair	Once Per Year
Area surrounding well head is maintained in appropriate condition	Once Per Year

RECORDS

Records:

The owner/operator shall keep and sign a record of all operational checks required in this directive.

This record shall include:

- the date and time of each operational check
- the location and equipment of the operational check
- the signature of the person performing the operational check.

Owner/operator shall maintain all records of samples and tests for a period of not less than five years from the date of making the record.

OPERATOR TRAINING

The owner shall ensure that the operator involved with the operation of this small drinking water system shall have the following training:

1. Ensure that the operator is trained in proper bacteriological water sampling and handling techniques.
2. Ensure that the operator is trained in the proper procedures to respond to an adverse water



NOTICE

TAKE NOTICE THAT you have a right to request a review of this directive by The Medical Officer of Health of the Southeast Public Health, pursuant to section 38 of O. Reg. 319/08 (Small Drinking Water Systems) made under the Health Protection and Promotion Act. The request must be made in writing and filed by way of personal service, service by pre-paid registered mail or service by fax to the Medical Officer of Health within seven (7) days after this Directive is served upon you. The address is as follows:

Southeast Public Health
221 Portsmouth Ave.
Kingston ON K7M 1V5
Telephone: 613-549-1232 | 1-800-267-7875
Fax: 613-549-7896

AND TAKE FURTHER NOTICE THAT this Directive takes effect when it is served on you even though a review may be requested.

Dated at this 29th day of July 2026.

Nancy Carpenter, B.A.Sc. (EH), C.P.H.I. (C)
Public Health Inspector
The Southeast Public Health