

## Pirates Cove - ANNUAL REPORT

Reporting Period:	January 1, 2008 to December 31, 2008
Operating Permit Number:	VI0310089
Drinking Water System Owner:	BC Parks
Drinking Water System Contact:	
Name:	<u>Joe Benning</u>
Phone No:	<u>(250) 391-2315</u>
Email:	<u>Joe.Benning@gov.bc.ca</u>

**1 Microbiological testing completed during this reporting period:**

- a. bacteriological results listed in table below.
- b. adverse bacteriological results:  None detected  
 Highlighted in table below:

**Microbiological Test Results:**

Date	Total coliform	E. Coli	Reason	Corrective Action
July 10	L1	L1		
July 23	L1	L1		
Aug 6	L1	L1		
Aug 23	L1	L1		
Sept. 3	L1	L1		
Sept. 17	L1	L1		
Oct. 9	L1	L1		
Oct. 15	L1	L1		
Oct. 27	L1	L1		
Nov. 12	L1	L1		
Nov. 26	L1	L1		
Dec. 2008			No samples taken due to winter weather	
<b>Total Postiive</b>	<b>0</b>	<b>0</b>		

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**2 Chemical analysis results (most recent):**

a. chemical parameters listed in *The Guidelines for Canadian Drinking Water Quality ("the Guidelines")* are:

- all within GCDWQ
- above the GCDWQ and are listed below:

**Parameters above the Guidelines:**

Parameter	Result	Max. Acceptable Concentration	Aesthetic Objective	Treatment/Corrective Action

**3 Summarize additional testing and sampling carried out in accordance with the requirement of a Water Source approval, Written Order or as per the conditions of your *Operating Permit*.**

- no additional testing
- additional testing listed below:

**Additional testing:**

Description of parameter & reason for sampling	Health parameter or non-health related parameter	Corrective action necessary (Y/N?)	Corrective action taken

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**4 Water Quality Complaints:**

During the course of the year, the water system:

- did not receive water quality complaints (ie taste, odour, colour, etc)  
 received water quality complaints and are listed below:

**Water Quality Complaints:**

Date	Water quality complaint	Corrective action taken

**5 Adverse results: Total number of adverse results during this reporting period for insufficient water supply, malfunction of disinfection equipment or elevated turbidity:**

- No adverse results  
 Adverse results listed below:

**Adverse Results:**

Incident date	Corrective action	Corrected by

**6 Description of the system:**

Sources of raw water:

- Groundwater  
 Surface water  
 Other (specify): \_\_\_\_\_

Does the drinking water system have disinfection?  Yes  No

Disinfection methods (check boxes that apply):

- Chlorination  
 Ultraviolet light  
 Ozonation  
 Other (specify): \_\_\_\_\_

Does the drinking water system have treatment?  Yes  No

Treatment type (check boxes that apply):

- Particulate cartridge filters

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- Membrane filtration
- Carbon filter
- Sand filtration
- Reverse osmosis
- Other (specify): \_\_\_\_\_

**7 System maintenance and repair during the period covered by the report:**

Equipment repaired:           none            
 Equipment replaced:           none            
 Annual maintenance of system: - system flushing: start up system  
shock treatment using chlorine bleach  
 \_\_\_\_\_  
 Completion of specialist report (specify): none \_\_\_\_\_  
 \_\_\_\_\_

**8 Further communication with users:**

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

- hand delivered
- public access/ notice via web
- public access/notice via government office
- public access/notice via newspaper
- public access/notice via bill stuffer
- public access/ notice via other method (specify):  
Contractor-K2 Park Services

b. Improvements or remedial actions required by the Drinking Water Officer:

- no action required
- Drinking Water Officer inspection report attached to report
- actions required by Drinking Water Officer listed below:

**Improvements/Remedial Actions:**

Required action	Completion date

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c. Future water system improvements:

- no improvements planned
- improvements listed below:

**Future Improvements:**

Future plans	Planned completion date

d. Emergency Response Plan can be accessed by:

- posting on web
- posting at nearest government office
- contacting water system owner
- Other (specify): Contractor-K2 Park Services

JL:kl  
N: Forms\Drinking Water Systems Annual Report template