Number of Designated Facilities served more than 10,000 people? Yes [ ] No [X]   NA						
Drinking-Water System Name:  Drinking-Water System Owner: Drinking-Water System Category: Period being reported:  Complete if your Category is Large Municipal Residential  Does your Drinking-Water System serve more than 10,000 people? Yes [] No [X]  Is your annual report available to the public at no charge on a web site on the Internet? Yes [X] No []  Location where Summary Report required under O. Reg. 170/03 Schedule 22 will be available for inspection.  Central Elgin Drinking Water System (St. Thomas Suburban Area)  Municipality of Central Elgin  Large Municipal Residential  Complete for all other Categories.  Number of Designated Facilities served a copy of your annuar report to all Designated Facilities you serve?  Yes [] No []  Number of Interested Authorities you report to:  NA  Did you provide a copy of your annual report to:  NA  Did you provide a copy of your annual report to:  NA  Did you provide a copy of your annual report to:  NA  Did you provide a copy of your annual report to:  NA  Did you provide a copy of your annual report to:  NA  Did you provide a copy of your annual report to:  NA  Did you provide a copy of your annual report to:  NA  Did you provide a copy of your annual report to:  NA  Did you provide a copy of your annual report to:  NA  Did you provide a copy of your annual report to:  NA  Did you provide a copy of your annual report to:  NA	Drinking-Water System Number:	260002187				
Suburban Area     Municipality of Central Elgin     Large Municipal Residential     January 1, 2024 through December 31, 2024     Complete if your Category is Large Municipal Residential     Does your Drinking-Water System serve more than 10,000 people? Yes [] No [X]     Is your annual report available to the public at no charge on a web site on the Internet?     Yes [X] No []     Location where Summary Report required under O. Reg. 170/03 Schedule 22 will be available for inspection.     Central Elgin Administration Office 450 Support Drive St. Thomas     Did you provide a copy of your annua report to: NA     Did you provide a copy of your annua report to: NA     Did you provide a copy of your annua report to: NA     Did you provide a copy of your annua report to: NA     Did you provide a copy of your annua report to: NA     Did you provide a copy of your annua report to: NA     Did you provide a copy of your annua report to: NA     Did you provide a copy of your annua report to: NA     Did you provide a copy of your annua report to: NA     Did you provide a copy of your annua report to: NA     Did you provide a copy of your annua report to: NA     Did you provide a copy of your annua report to: NA     Did you provide a copy of your annua report to: NA	Drinking-Water System Name:	Central Elgin Drinking Water System (St. Thomas				
Drinking-Water System Category:  Period being reported:    Large Municipal Residential     January 1, 2024 through December 31, 2024     Complete if your Category is Large Municipal Residential     Residential or Small Municipal Residential     Does your Drinking-Water System serve more than 10,000 people? Yes [] No [X]     Is your annual report available to the public at no charge on a web site on the Internet?     Yes [X] No []     Location where Summary Report required under O. Reg. 170/03 Schedule 22 will be available for inspection.     Central Elgin Administration Office     450 Sunset Drive St. Thomas     Did you provide a copy of your annual report to: NA     Did you provide a copy of your annual report to: NA     Did you provide a copy of your annual proport to: NA	·					
Does your Drinking-Water System serve more than 10,000 people? Yes [ ] No [X]   Did you provide a copy of your annual report available to the public at no charge on a web site on the Internet? Yes [X] No [X]   Did you provide a copy of your annual report to all Designated Facilities you serve? Yes [ ] No [ ]   Number of Interested Authorities you report to:    Number of Designated Facilities served and you provide a copy of your annual report to all Designated Facilities you serve? Yes [ ] No [ ]   Number of Interested Authorities you report to:    Na	Drinking-Water System Owner:	Municip	,			
Complete if your Category is Large Municipal Residential or Small Municipal Residential  Does your Drinking-Water System serve more than 10,000 people? Yes [ ] No [X]  Is your annual report available to the public at no charge on a web site on the Internet?  Yes [X] No [ ]  Location where Summary Report required under O. Reg. 170/03 Schedule 22 will be available for inspection.  Central Elgin Administration Office  450 Sumset Drive St. Thomas	Drinking-Water System Category:	Large N	Iunicipal Residential			
Does your Drinking-Water System serve more than 10,000 people? Yes [ ] No [X]  Is your annual report available to the public at no charge on a web site on the Internet? Yes [X] No [ ]  Location where Summary Report required under O. Reg. 170/03 Schedule 22 will be available for inspection.  Central Elgin Administration Office  450 Sunset Drive St. Thomas	Period being reported:	January	1, 2024 through December 31, 2024			
Central Elgin Administration Office  450 Support Drive St. Thomas  Did you provide a copy of your annua	Residential or Small Municipal Residence  Does your Drinking-Water System somore than 10,000 people? Yes [ ] Now the street of the street on t	erve No [X] e public ernet?	Did you provide a copy of your annual report to all Designated Facilities you serve? Yes [ ] No [ ] Number of Interested Authorities you			
Uniario Canada	Central Elgin Administration Office 450 Sunset Drive St. Thomas Ontario, Canada		Did you provide a copy of your annual report to all Interested Authorities you report to for each Designated Facility?			
	Drinking Water System Name		Drinking Water System Number			
Drinking Water System Name Drinking Water System Number						
Drinking Water System Name Drinking Water System Number						
Drinking Water System Name Drinking Water System Number						
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 [X] No [ ]

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

- [x] Public access/notice via the web
- [x] Public access/notice via Government Office
- [ ] Public access/notice via a newspaper
- [x] Public access/notice via Public Request
- [ | Public access/notice via a Public Library
- [ ] Public access/notice via other method

### **Describe your Drinking-Water System**

The Central Elgin Drinking Water System (St Thomas Suburban Area) consists of a network of watermains, hydrants, and valves within 6 service areas suburban to the City of St. Thomas, and receiving all drinking water from the City of St. Thomas Water Distribution System.

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

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#### 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

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1	N	/	∕┪

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

<b>Incident Date</b>	Parameter	Result	Unit of Measure	<b>Corrective Action</b>	<b>Corrective Action Date</b>
NA	NA	NA	NA	NA	NA

# 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	NA	NA	NA	NA	NA
Treated	NA	NA	NA	NA	NA
Distribution	53	(0)-(0)	(0)-(0)	53	(<10)-(30)

Operational testing done under Schedule 7, 8 or 9 of Regulation 170/03 during the period covered by this Annual Report.

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

	Number of Grab Samples	Range of Results (min #)-(max #)
Chlorine (Grab Samples)	53	(0.33) - (1.50)

**NOTE**: For continuous monitors use 8760 as the number of samples.

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
NA	NA	NA	NA	NA

Summary of Inorganic parameters tested during this reporting period or the most recent sample results

Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
NA	NA	NA	NA	NA

## 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 #)	Number of Exceedances
Plumbing	NA	NA	NA
Distribution	NA	NA	NA

Summary of Organic parameters sampled during this reporting period or the most recent sample results

Parameter	Sample Date	Result Value	Unit of Measure	Exceedance
HAA5 (NOTE: show latest annual average)	Refer to St. Thomas Drinking Water System Annual Report			ter System
THM (NOTE: show latest annual average)	Refer to St. Thomas Drinking Water System Annual Report			ter System

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
NA	NA	NA	NA
NA	NA	NA	NA