

**SPROAT LAKE PROVINCIAL PARK  
Upper Campground  
2018 ANNUAL REPORT**

Reporting Period:	April 2018 – October 2018
Operating Permit Number:	1311686
Drinking Water System Owner:	BC Parks
Drinking Water System Contact:	
Name:	<u>Elizabeth Purkiss</u>
Phone No:	<u>(250)-337-2404</u>
Email:	<u>Elizabeth.Purkiss@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
4-Apr-2018	7	L1		Resampled
11-Apr-2018	L1	L1		
25-Apr-2018	L1	L1		
8-May-2018	L1	L1		
23-May-2018	L1	L1		
5-Jun-2018	L1	L1		
19-Jun-2018	L1	L1		
9-July-2018	L1	L1		
25-July-2018	L1	L1		
14-Aug-2018	L1	L1		
24-Sept-2018	L1	L1		
9-Oct-2018	L1	L1		

**SPROAT LAKE PROVINCIAL PARK  
Upper Campground  
2018 ANNUAL REPORT**

**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

**Water Quality Complaints:**

During the course of the year, the water system:

- did not receive water quality complaints (ie taste, odour, colour, etc)

**SPROAT LAKE PROVINCIAL PARK  
Upper Campground  
2018 ANNUAL REPORT**

received water quality complaints and are listed below:

**Water Quality Complaints:**

Date	Water quality complaint	Corrective action taken

**4 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

**5 Description of the system:**

Sources of raw water:

- Groundwater  
 Surface water  
 Other (specify): Lake water

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  
 Membrane filtration

**SPROAT LAKE PROVINCIAL PARK  
Upper Campground  
2018 ANNUAL REPORT**

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

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

Equipment repaired: \_\_\_\_\_  
 Equipment replaced: \_\_\_\_\_  
 Annual maintenance of system: (*system flushing, replacement of carbon filters, uv bulb, etc*) \_\_\_\_\_ *System flushed, filter replaced, UV bulb changed*  
 \_\_\_\_\_  
 Completion of specialist report (specify): \_\_\_\_\_  
 \_\_\_\_\_

**7 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): \_\_\_\_\_

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

**SPROAT LAKE PROVINCIAL PARK  
Upper Campground  
2018 ANNUAL REPORT**

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): \_\_\_\_\_

JL:kl  
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