

## Phase One Environmental Site Assessment



51 - 55 Dundas Street West and 60 - 76 Agnes Street  
Mississauga, Ontario  
G2S24602A

55 Dundas Developments Inc.  
c/o Sajecki Planning Inc.  
1629 Stillriver Crescent  
Mississauga, Ontario  
L5M 3X2

## Executive Summary

G2S Consulting Inc. (G2S) was retained by 55 Dundas Developments Ltd. (the Client) to complete a Phase One Environmental Site Assessment (ESA) for the properties located at 51, 53, 55 and 57 Dundas Street West and 60, 66, 70 and 78 Agnes Street in Mississauga, Ontario (hereinafter referred to as the 'Site'). Refer to Drawing 1 in Appendix A for the Site Location Plan. Authorization to proceed with the Phase One ESA was provided by Akeem Ameen of 55 Dundas Developments Ltd.

For the purpose of this report, Site North has been established as perpendicular to Dundas Street West, with Dundas Street West running east to west. The irregular shaped Site is located on the north side of Dundas Street West, at the northwest corner of the intersection with Cook Street and extends north to Agnes Street. The Site covers an approximate plan area of 0.44 hectares (1.1 acres). The Study Area consists of residential, community, and commercial land use.

G2S understands the Client requires a Phase One ESA for due diligence purposes related to potential acquisition and redevelopment of the Site for residential purposes. The Site was most recently used for mixed use residential, institutional and commercial purposes (office printing shop, travel agency, daycare, hair salon, and accounting office) and is proposed to be developed for residential use. Since there is a change in property use planned (commercial to residential), a Record of Site Condition (RSC) is required under O. Reg. 153/04, as amended. This Phase One ESA was completed in accordance with Schedule D. of O. Reg. 153/04.

This Phase One ESA was conducted to:

- i. Develop a preliminary determination of the likelihood that one or more contaminants have affected any land or water on, in or under the Phase One ESA property;
- ii. Determine the need for a Phase Two ESA; and
- iii. Provide a basis for carrying out any Phase Two ESA required.

The Site is currently developed with five buildings. An institutional building containing a daycare is present on the northwest portion of the Site (78 Agnes Street), two residential buildings are located on the north central portion (66 and 70 Agnes Street), and a mixed use commercial and residential use building occupied by a travel agency is located on the northeast portion of the Site (60 Agnes Street). A commercial building containing a copy shop, hair salon and accounting service are located on the southeast corner of the Site (51-57 Dundas Street West). Asphalt parking is present on the east central and north portions of the Site and grassed areas are located on the central portion of the Site.

The Site was first developed with a residential building in the east central area and general store at the southeast portion prior to 1909. Further development of the Site occurred prior to 1939 and included 78 Agnes Street developed with a building occupied by the Orange Hall and two residential buildings at 60 and 66 Agnes Street. 70 Agnes Street was developed between 1939 and 1956. Site occupants have historically consisted of residential uses, daycare, community hall and commercial use (hair salons, offices, copy shop and retail).

Historical review of the Site and surrounding properties within a 250 m radius of the Site identified on Site PCAs and several off-Site PCAs, as defined in O. Reg. 153/04. The PCAs were assessed based on observations of the operations, their location relative to the Site with respect to the inferred groundwater flow direction, their tenure, expected chemical storage amounts, etc. The following APECs have been identified.

- APEC 1A: East central portion of Site – Former presence of residential buildings, there is potential for fill material or demolition debris to be present.
- APEC1B: South portion of Site – Former presence of a general store, there is the potential for fill material or demolition debris to be present.
- APEC 2A: Northeast portion of Site - Historical presence of a furnace oil above ground storage tank (AST) within the basement in the south portion of 60 Agnes Street.
- APEC 2B: Northeast portion of Site – Historical presence of a furnace oil above ground storage tank (AST) within the west portion of the basement at 66 Agnes Street.
- APEC 2C: North portion of Site - Historical presence of a furnace oil AST within the west portion of the basement at 70 Agnes Street.
- APEC 3: Entire Site – Historical use of de-icing salt on the paved portion of the Site and adjacent roadways.

Regarding APEC 3 (de-icing salt use), per Section 49.1 of O. Reg 153/04, assessment of this APEC is not required. Under the Regulations, where a substance has been applied to surfaces for the safety of vehicular or pedestrian traffic under conditions of snow or ice or both, the applicable standard is deemed not to be exceeded. In this regard, further assessment of this APEC is not required.

A Phase Two ESA is recommended to investigate the potential for contamination related to the above-noted APECs.

## Table of Contents

Executive Summary .....	ii
1. Introduction .....	1
1.1 Terms of Reference.....	1
1.2 Phase One ESA Property Information .....	2
2. Scope of Investigation.....	3
3. Records Review.....	4
3.1 General .....	4
3.1.1 Phase One ESA Study Area Determination .....	4
3.1.2 First Developed Use Determination .....	4
3.1.3 Chain of Title .....	4
3.1.4 Fire Insurance Plans.....	5
3.1.5 Street Directories.....	6
3.1.6 Waste Management Records .....	7
3.1.7 Environmental Reports .....	10
3.2 Environmental Source Information .....	10
3.3 Physical Setting Sources.....	12
3.3.1 Aerial Photographs .....	12
3.3.2 Ontario Base Maps/Topographic and Other Maps.....	13
3.3.3 Hydrology and Hydrogeology .....	14
3.3.4 Water Bodies, Areas of Natural Significance and Groundwater Information .....	14
3.3.5 Well Records.....	14
3.4 Site Operating Records .....	14
4. Interviews.....	16
4.1 Site Personnel.....	16
4.2 Third Party Individuals.....	16
4.3 Government Officials.....	16
5. Site Reconnaissance .....	17
5.1 General Requirements .....	17
5.2 Specific Observations at the Phase One Property.....	17
5.2.1 Enhanced Investigation Property .....	21
5.3 Written Description of Investigation .....	21
6. Review and Evaluation of Information .....	22
6.1 Current and Past Uses .....	22
6.2 Potentially Contaminating Activities.....	26
6.3 Areas of Potential Environmental Concern .....	30
7. Phase One Conceptual Site Model .....	32

8. Conclusions and Recommendations .....	34
<b>8.1</b> Whether Phase Two Environmental Site Assessment Required Before Record of Site Condition Submitted.....	35
<b>8.2</b> Record of Site Condition Based on Phase One Environmental Site Assessment Alone ..	35
9. Qualifications of the Assessor .....	36
10. References and Supporting Documentation .....	37
11. Limitations .....	39
12. Signatures and Closing Remarks .....	40
13. Appendices .....	41

## **Appendices**

Appendix A:	Drawings
Appendix B:	Site Ownership
Appendix C:	Street Directories
Appendix D:	Environmental Source Information
Appendix E:	Well Records
Appendix F:	Phase One Questionnaires
Appendix G:	Site Photographs

## **List of Tables**

Table 1:	General Site Details
Table 2:	Fire Insurance Plans, Potentially Contaminating Activities
Table 3:	Street Directories, Site Occupant
Table 4:	HWIN Records
Table 5:	Environmental Source Information
Table 6:	Aerial Photographs
Table 7:	Topographic Maps
Table 8:	Site Operating Records
Table 9:	Site Reconnaissance
Table 10:	Summary of Current and Past Site Uses
Table 11:	Potentially Contaminating Activities
Table 12:	Areas of Potential Environmental Concern

## **1. Introduction**

G2S Consulting Inc. (G2S) was retained by 55 Dundas Developments Ltd. (the Client) to complete a Phase One Environmental Site Assessment (ESA) for the property located at 51, 53, 55 and 57 Dundas Street West and 60, 66, 70 and 78 Agnes Street in Mississauga, Ontario, hereinafter referred to as the 'Site'. Refer to Drawing 1 in Appendix A for the Site Location Plan. Authorization to proceed with the Phase One ESA was provided by Akeem Ameen of 55 Dundas Developments Ltd.

G2S understands the Client requires a Phase One ESA for due diligence purposes related to the potential acquisition and redevelopment of the Site for residential purposes. The Site was most recently used for residential, institutional (daycare) and commercial purposes (travel agency, office copy shop, braiding salon and tax office) and is proposed to be used for residential use. Since there is a change in property use planned (commercial to residential), a Record of Site Condition (RSC) is required under O. Reg. 153/04, as amended. This Phase One ESA was completed in accordance with Schedule D. of O. Reg. 153/04.

### **1.1 Terms of Reference**

The nature of a Phase One ESA by definition is a nonintrusive site examination of "readily accessible features"; therefore, the Phase One ESA does not quantify the chemical or physical quality of the exposed or inaccessible features such as materials beneath buildings or buried on Site. In this regard, the Phase One ESA must be viewed as a mechanism that may assist in reducing, rather than eliminating, the uncertainty of encountering environmental contaminants during future use of the Site.

This Phase One ESA was conducted to:

- i. Develop a preliminary determination of the likelihood that one or more contaminants have affected any land or water on, in or under the Phase One ESA property;
- ii. Determine the need for a Phase Two ESA; and
- iii. Provide a basis for carrying out any Phase Two ESA required.

## 1.2 Phase One ESA Property Information

**Table 1: General Site Details**

<b>Municipal Address:</b>	51-57 Dundas Street West & 60-78 Agnes Street, Mississauga, Ontario
<b>General Site Location:</b>	North side of Dundas Street West, west side of Cook Street and south side of Agnes Street.
<b>Approximate Plan Area:</b>	Approximate plan area of 0.44 hectares (1.1 acres) with frontage of approximately 100 m Cook Street, approximately 65 m of frontage on Agnes Street, frontage of approximately 21 m of frontage on Dundas Street West.
<b>Property Identification Number (PIN):</b>	51 - 57 Dundas Street West: 13151-0024 (LT) 60 Agnes Street: 13151-0261 (LT) 66 Agnes Street: 13151-0257 (LT) 70 Agnes Street: 13151-0256 (LT) 78 Agnes Street: 13151-0067 (LT)
<b>Legal Description:</b>	51 - 57 Dundas Street West: LT 10, WHS, "PL TOR-12", TORONTO; PT LT 29, WHS, "PL TOR-12", TORONTO AS IN RO586950; MISSISSAUGA. "AMENDED 1999/05/26, LAND REGISTRAR #17". 60 Agnes Street: PART OF LOT 29, PLAN TOR-12, WEST OF HURONTARIO STREET, DESIGNATED AS PART 1 ON REFERENCE PLAN 43R36324 IN THE CITY OF MISSISSAUGA, REGIONAL MUNICIPALITY OF PEEL. 66 Agnes Street: PT LT 29 WHS PL TOR-12 TORONTO DES PTS 3, 4 PL 43R-15014; MISSISSAUGA. 70 Agnes Street: PT LT 29 WHS PL TOR-12 TORONTO DES PTS 1, 2 PL 43R-15014; MISSISSAUGA. 78 Agnes Street: PT LT 29, WHS, "PL TOR-12", TORONTO, AS IN TT30150; MISSISSAUGA. *S/T AN INTEREST IN RO560617* "AMENDED 1999/05/27, LAND REGISTRAR #17". *ADDED 2001/05/17 BY C. COOPER*
<b>Current Site Owner and Contact Information:</b>	51 - 57 Dundas Street West: 4 CD's Inc. 60 Agnes Street: Shahida Khokar 66 Agnes Street: Marita and Daniel Pineda 70 Agnes Street: 2830569 Ontario Inc. 78 Agnes Street: Meghan Bhamatie
<b>Current Site Occupant:</b>	51 - 57 Dundas Street West: A1 Copy and Print, Mustay's Braiding Place, Promaster Services 60 Agnes Street: Airwings Travel and Tours, residential tenants 66 Agnes Street: residential tenants 70 Agnes Street: residential tenants 78 Agnes Street: Learning Jungle Cooksville

The Phase One Study Area includes the Site and lands within approximately 250 m of the Site, as shown on Drawing 2 in Appendix A (hereinafter referred to as the 'Study Area').

## **2. Scope of Investigation**

This assessment was performed in accordance with the Phase One ESA protocols and included the following tasks:

1. Records review.
2. Interviews with pertinent Site contacts.
3. A Site reconnaissance to assess current Site and Study Area conditions and the presence of any visual indications or olfactory evidence of potential contamination. A detailed review of regulatory compliance issues was not within the terms of reference for this assignment.
4. An evaluation of the information gathered from the records review, interviews, and Site reconnaissance.
5. Preparation of this report discussing the information compiled and the corresponding conclusions and recommendations.

### 3. Records Review

G2S reviewed reasonably accessible information and records to determine the land use history of the Site and Study Area.

#### 3.1 General

##### 3.1.1 Phase One ESA Study Area Determination

In accordance with O. Reg. 153/04, the Phase One ESA must include, at a minimum the Site and any other property that is located within 250 m of the Site boundaries. This is referred to as the Phase One ESA Study Area (Study Area) as depicted on Drawing 2 in Appendix A.

##### 3.1.2 First Developed Use Determination

In accordance with the O. Reg. 153/04, the following definition applies:

“First developed use” means *the earlier of*,

- i. The first use of a phase one property in or after 1875 that resulted in the development of a building or structure on the property, and
- ii. The first potentially contaminating use or activity on the phase one property.

Based on information from the records review, the first developed use of the Site was in 1909 for use by three residential buildings and one general store.

##### 3.1.3 Chain of Title

A land title search for the Site was conducted online at the Teranet Express website for the Peel Region Land Registry Office. The Land Registry documents indicate the following:

- 51-57 Dundas Street West was transferred to the current owner, 4 CD's Inc., in March 2005 from Laroian Corporation Inc., who acquired the parcel in July of 1981.
- 60 Agnes Street was transferred to the current owner, Shahida Khokar, from Mira Saric in February 2009.
- 66 Agnes Street was transferred to the current owner Marita Pineda in May 2006 from 661170 Ontario Limited. Daniel Pineda was added to the ownership in April of 2008.
- 70 Agnes Street was transferred to the current owner, 2830569 Ontario Inc., from James Kong-Poy in April 2021, and had been previously owned by 661170 Ontario Limited until 2006.
- 78 Agnes Street was transferred to current owner, Meghan Bhamatie, from the Cooksville Hall Corporation in September 2001. Meghan Dewindranauth was listed on the property ownership from September 2001 until September 2005.

For ease of reference, the Land Registry documents are included in Appendix B and summarized in Section 6.1 of this report.

### 3.1.4 Fire Insurance Plans

Fire Insurance Plans (FIPs) for the Site and surrounding properties were reviewed online through the University of Toronto website and in person at the Hazel McCallion Central Public Library in Mississauga.

The FIPs from 1909 indicate the following:

- The Study Area was predominantly residential.
- The north portion of the Site along Agnes Street was vacant/undeveloped land.
- Two detached buildings were present on Dundas Street West dissimilar to present with municipal addresses 40 and 42 Dundas Street West. 42 Dundas Street West was denoted to contain a general store.
- Two concrete/stone buildings were located on the east central portion of the Site with municipal addresses 36 and 38 Cook Street. The centrally located building was noted to be a two-storey building.

The 1939 FIPs indicated the following:

- The Study Area consisted of mixed residential, commercial, industrial and community land uses.
- 78 Agnes Street was developed and denoted to be occupied by Orange Hall. The address was historically known as 79 Agnes Street.
- Residential buildings in a similar location to 60 and 66 Agnes Street were constructed on the northeast portion of the Site, labelled historically as 61 and 65 Agnes Street respectively.
- A personal garage similar to present was located west of 66 Agnes Street (historically 65 Agnes Street).
- Personal garages labelled 61A Agnes Street and 62A Dundas Highway 5 were present at the east central portion of the Site.
- 70 Agnes Street remained undeveloped.
- One residential building was present on the southeast portion of 51-57 Dundas Street West and historically addressed as 62 Dundas Highway 5.

The following Potentially Contaminating Activities (PCAs) were identified:

**Table 2: Fire Insurance Plans, Potentially Contaminating Activities**

Address	Direction and Distance from Site	Potentially Contaminating Activity	Description	Years
51 – 57 Dundas Street West	On-Site	<b>PCA #30</b> – Importation of Fill Material of Unknown Quality	Two inferred residential buildings were present on the east portion of the Site and a general store was present on the southwest portion of the Site in the 1909 FIP. It is possible for fill material or demolition debris to be present within	1909

Address	Direction and Distance from Site	Potentially Contaminating Activity	Description	Years
			the footprints of the historic buildings.	
111-115 Dundas Street West (currently 126 Dundas Street West)	~130 m southwest	<b>PCA #28</b> – Gasoline and Associated Products Storage in Fixed Tanks	Property labelled as a service station (no fuel storage tanks were shown).	1939
38 Dundas Highway No 5 (Presently the Confederation Parkway Road allowance)	~145 m west	<b>PCA #10</b> – Commercial Autobody Shops	Korn Garage was denoted in a commercial building. The property is located in present day Confederation Parkway.	1939

The listed occupants were deemed to represent PCAs and are summarized in Section 6.2 of this report.

### 3.1.5 Street Directories

A street directories search was conducted for the Site and Study Area at the Hazel McCallion Central Public Library in Mississauga, Ontario and were reviewed in approximately five-year increments from 1968-2001, when publication ceased. The table below summarizes the directory information for the Site.

**Table 3: Street Directories, Site Occupant**

Address	Occupant/Site Use	Years Occupied
51 Dundas Street West	A-1 Copy Centre	1996 – 2001
	Nu-Wave Fashions and Gifts	1991
	Not listed	1968 - 1983
53 Dundas Street West	Vacuums and Sewing Machine Inc.	1996
	Not listed	1968 -1991, 2001
55 Dundas Street West	R D Russel Real Estate Ltd.	1983 – 2001
	Nicole Health and Body Spa	1996
	Mosto Portugues	1996
	Baird Moving and Storage	1983
	Corporate Moving Services Ltd.	1983
	Kronas Real Estate Ltd.	1977/1978
	Mississauga Business Machines Ltd.	1977/1978
	A Welke	1972-1973
	Bernard Oconell	1972-1973
	Carload Groceteria	1968-1972/1973

Address	Occupant/Site Use	Years Occupied
	Crothers Carson	1968-1972/1973
57 Dundas Street West	Bright Ideas	2001
	Vacuum Depot	2001
60 Agnes Street	Domljanovic J	2001
	Franjkovic Pavo	2001
	Olmstead E W	2001
	Opacak Slavko	2001
	Mrsic Ivan	1991-1996
	Popacak Slavko	1991-1996
	Reder Dragoslav	1991-1996
	Fazio Gaetano	1968-1983
66 Agnes Street	Not listed	1983 2001
	Curry Wes	1968-1977/1978
70 Agnes Street	Tupe Al	2001
	Not listed	1983-1996
	Curitti L	1968 -1977/1978
	Vierson Henry	1968
78 Agnes Street	Not Listed	1968 – 2001

The Site occupants were not deemed to represent a PCA. Land uses for the surrounding properties as described in the reviewed directories, as well as the distance and direction of the surrounding properties to the Site, are included in Appendix C. PCAs identified within the Study Area based on the reviewed directories and are summarized in Section 6.2 of the report.

### 3.1.6 Waste Management Records

The Site and properties within the Study Area were searched by address in the Hazardous Waste Information Network (HWIN) and the Hazardous Waste Information System (HWIS) databases every five years from 1986-1993 and every other year from 2003 – 2022. Properties within the Study Area were also searched for records currently registered on Resource Productivity and Recovery Authority (RPRA) (formerly HWIN), which are included in Appendix D. The following records were found:

**Table 4: HWIN Records**

Address Direction and Distance from Site	Generator Name	Registered Wastes
47 Dundas Street West ~15 m east	Christina Gamo Dentistry Professional Corporation ON5479360 2015 – 2017	312 - Pathological Waste

Address Direction and Distance from Site	Generator Name	Registered Wastes
66 Dundas Street West ~25 m south	Edward Grodecki Dentistry Professional Corporation ON7357464 2017	312 - Pathological Waste
37 Dundas Street West ~35 m east	xtremeties ON4590521 2015 - 2017	312 - Pathological Waste
71 King Street West ~70 m south	Dr. Andy Wong ON4648441 2013 - 2021	312 - Pathological Waste
	Dr. June Thompson and Dr David Brooks ON9376129 2013 - 2015	261 - Pharmaceuticals 312 - Pathological Waste
	Promed 71 King Inc. ON9147663 2013 - 2021	241 – Halogenated solvents
	Dr. Carnat/Dr. McIsaac ON4954040 2013 - 2021	312 - Pathological Waste
	City Centre Family Physicians ON2552387 2013 - 2021	261 - Pharmaceuticals 312 - Pathological Waste
	Dr Ling Huang & Dr Christine Whitmore ON7306369 2015 - 2021	312 - Pathological Waste
	Dr. Peter Strachan/Dr. M.L. Lester ON5351896 2015	312 - Pathological Waste
3024 Hurontario Street ~115 m east	Dr. Ryan Figueroa Medicine Professional Corp ON6565649 2021	312 - Pathological Waste
3100 Hurontario Street ~120 m north	Peel Board of Education ON0359821 1986 – 2021	146 - Other specified inorganic sludges, slurries or solids 148 - Miscellaneous waste inorganic chemicals 212 – Aliphatic solvents and residues 213 – Petroleum distillates 242 - Halogenated pesticides and herbicides 252 - Waste crankcase oils and lubricants

Address Direction and Distance from Site	Generator Name	Registered Wastes
		263 - Miscellaneous waste organic chemicals 264 - Photoprocessing wastes 263 - Miscellaneous waste organic chemical 331 - Organic tannery wastes
2550 Hurontario Street ~135 m south	Cooksville Cleaners ON1927200 2003 - 2021	213 - Petroleum distillates 241 - Halogenated solvents and residues
3038 Hurontario Street ~145 m northeast	Dr Arun Narang ON4317633 2017 - 2021	312 - Pathological Waste
3058 Hurontario Street ~165 m northeast	Pleasure and Pain ON5921582 2017	312 - Pathological Waste
3025 Hurontario Street ~205 m east	Life Labs ON5513274 2017 - 2021	312 - Pathological Waste
	Dr. S. Raveendran Dentistry Professional Corporation ON6445951 2017 - 2021	264 - Photoprocessing wastes 312 - Pathological Waste
	Algonquin Careers Academy ON6661544 2017 - 2021	312 - Pathological Waste
	Dr Sansone, Naccarato and Associates ON9259406 2017	261 - Pharmaceuticals 312 - Pathological Waste
	C. Kaur Dentistry Prof Corp. ON7388295 2109 - 2021	148 - Miscellaneous waste inorganic chemicals 312 - Pathological Waste
3035 Hurontario Street ~210 m northeast	Cooksville Pharmacy ON7513467 2019	261 - Pharmaceuticals 312 - Pathological Waste
134 Dundas Street West ~210 m west	SMD Medical ON9854478 2017 - 2021	312 - Pathological Waste
144 Dundas Street West ~225 m west	Crystal Cleaners International ON1677600 and ON7403317 1993 - 2011	241 - Halogenated solvents and residues 251 - Waste oils/sludges (petroleum based)

Address Direction and Distance from Site	Generator Name	Registered Wastes
	Metro Ontario Pharmacies ON8880762 2019 - 2021	312 - Pathological Waste
165 Dundas Street West ~235 m west	Canadian Academy of Dental Hygiene ON4235331 2009 - 2015	264 - Photoprocessing wastes 312 - Pathological Waste
	Nooruzzaman Inc. ON3760561 2015	261 - Pharmaceuticals
	Dundas Tower Dental Centre & Laboratory ON7454305 2015	312 - Pathological Waste
	Dr. Solon C. Guzman Dentistry Professional Corp ON7454305 2015 - 2017	312 - Pathological Waste

The dry-cleaning operations located at 2550 Hurontario Street and 144 Dundas Street West were deemed to represent PCAs. In addition, the generation of halogenated solvents at 71 King Street West by Promed 71 King Inc. was deemed to represent a PCA. The PCAs are summarized in Section 6.2 of the report.

Based on the distance from the Site (i.e., greater than 130 m), the nature of the wastes generated (i.e., pathological, pharmaceutical or photoprocessing wastes), the nature of the operations (i.e., school board) and/or the location relative to the inferred groundwater flow direction (i.e., down gradient) the remainder of the generators noted were not deemed to represent PCAs.

### 3.1.7 Environmental Reports

G2S was not provided with previous reports completed for the Site.

## 3.2 Environmental Source Information

**Table 5: Environmental Source Information**

Document	Source	Pertinent Information
The City of Mississauga Official Plan: Schedule 1 – Urban System  Schedule 1a – Urban System – Green System	City of Mississauga website	The Site and Study Area are generally classified as “Downtown”. A green system is located north of the Site.  The south portion of the Site facing Dundas Street West is classified as mixed use and the north half of the Site facing Agnes Street is classified as high

Document	Source	Pertinent Information
Schedule 3 – Natural Systems		<p>density residential. The Study area is primarily classified as mixed use and high density residential with an area of residential medium density located southwest of the Site.”</p> <p>No part of the Site or Study Area is classified as a natural heritage system.</p>
Ministry of Natural Resources (MNR) and Forestry, Ontario, Natural Heritage Areas database	MNR online	No wetlands, woodlands or Areas of Natural and Scientific Interest (ANSIs) are located on-Site or within the Study Area.
National Pollutant Release Inventory (NPRI) database	NPRI online	A search for records in the vicinity of the Site was conducted in two-year increments for the years 1993-2022. No records were found for the Site or Study Area.
Ontario Inventory of Polychlorinated Biphenyl (PCB) Storage Sites (1991 & 1995)	MECP	No records for Site or Study Area.
Environmental Bill of Rights Registry (EBR)	MECP	No records for Site or Study Area.
Inventory of Coal Gasification Plant Waste Sites in Ontario	MECP	No records for the Site or Study Area.
Inventory of Industrial Sites Producing and Using Coal Tar and Related Tars in Ontario	MECP	No records for the Site or Study Area.
Freedom of Information (FOI) Request	MECP	<p>An FOI was requested for available records for each Site address. No records were identified for 60 and 66 Agnes Street. Records concerning lead testing in drinking water were identified for 70 and 78 Agnes Street.</p> <p>A response has not been received for 51-57 Dundas Street West.</p> <p>Requests generally take several weeks to months to generate a response. Should a response from the government agency change the conclusions or recommendations of this report, an addendum letter will be provided along with the information received.</p>
Waste Disposal Site Inventory, June 1991	MECP	No records for the Site or Study Area.
Brownfields Environmental Site Registry	MECP online	An RSC was filed for the property at 85-95 Dundas Street West (west adjacent) in 2020. The following relevant information was contained within the RSC:

Document	Source	Pertinent Information
		-The RSC was filed based on the results of a Phase One ESA. No Areas of Potential Environmental Concern were identified on the property and a Phase Two ESA was not required.
Technical Standards and Safety Authority (TSSA)	TSSA via email	The Site and immediate adjacent properties were searched for TSSA records. No records were identified for the Site or the adjacent properties.

No PCAs were identified within the records reviewed. The environmental source information is included in Appendix D.

### 3.3 Physical Setting Sources

#### 3.3.1 Aerial Photographs

For ease of reference, select aerial photographs are included as Drawings 4 through 9 in Appendix A. The following table summarizes the information.

**Table 7: Aerial Photographs**

Year	Site Description	Study Area Description
1954	The Site is developed with a commercial building in the southeast and four residential buildings in the north. Two personal garages/sheds are located in the east-central portion of the Site.	Commercial buildings are present east and west along Dundas Street West. The northwestern portion of the Study Area appears to be used for agricultural use. Residential buildings and a school are developed in the north and residential buildings are developed in the south.
1961		Commercial buildings have been developed to the south and southeast. Residential buildings have been developed north of Agnes Street.
1981		The buildings west adjacent to the Site have been demolished and a commercial building has been developed. Two condominium buildings are developed to the northwest, a multi-storey office building has been developed on Dundas Street West to the southwest of the Site and further commercial buildings have been developed in the south of the Study Area. The school building in the north portion of the Study Area has been extended.
1995		Additional commercial buildings have been developed in the south and west of the Study Area and Confederation Parkway has been developed in the west. Residential buildings to the northeast and commercial buildings to the southeast of the Site have been demolished.
2008		Commercial buildings approximately 30 m west and 50 m southwest of the Study Area have been demolished. The Study Area appears similar to present.
2023		

### 3.3.2 Ontario Base Maps/Topographic and Other Maps

For ease of reference, selected maps are included as Drawings 10 through 13 in Appendix A. The following table summarizes the information.

**Table 8: Topographic and Other Maps**

Item	Year	Site Description	Study Area Description
Topographic Map	1909	A building is present on the southeast portion of the Site. The remainder of the Site is undeveloped.	A post office is located to the east. Dundas Street West, Cook Street and Agnes Street have been constructed. The Study Area consists of vacant land and small buildings.
Topographic Map	1951	The Site is shaded in black, suggesting it is developed along the east portion of the Site. The ground elevation is approximately 115 m above sea level (ASL).	The Study Area appears partially developed with buildings, majority of which are along Highway 10 (Hurontario Street) and Dundas Street West.
Topographic Map	1964	The Site is shaded red, indicating it is part of a developed area.	The majority of the south, east and western portions of the Study Area are shaded red indicating it is a developed area. A school and track are developed in the north portion of the Study Area and larger buildings are developed to the southeast.
Topographic Map	1994		
Community Map of Canada	2025	The Site is developed with five buildings similar to present.	Commercial buildings are developed to the east, south and west of the Site. Residential buildings are developed in the northeast of the Study Area, condominiums are developed in the northwest, and a school is developed in the north of the Study Area.
Southern Half of Toronto Township Historical Atlas	1877	The Site is shaded indicating it is in a developed area.	The Study Area is partially shaded, indicating it is a developed area. Dundas Street and Highway 10 (Hurontario Street) have been developed. Vineyards are located in the north and south of the Study Area.
Drift Thickness, Brampton Ontario. Department of Mines,	1969	Overburden materials were noted to have a depth of approximately 3.6 m throughout the Study Area.	
Physiography of Southern Ontario	1972	The Site is underlain by sand plains.	
Palaeozoic Geology of Southern Ontario, Map 2254, Ontario Division of Mines	1984	The Site is underlain by grey shale with limestone interbeds of the Georgian Bay (Carlsbad and Russell) Formation.	

### 3.3.3 Hydrology and Hydrogeology

Surface water from the Site is expected to infiltrate through the unpaved areas on the north side of the Site. Surface water is expected to runoff the paved surfaces and flow east towards catch basins located on Cook Street or Dundas Street West.

Cooksville Creek is located approximate 430 m east, and Mary Fix Creek is located approximately 590 m west of the Site, both flow south towards Lake Ontario located approximately 4.1 km south. Surface elevations in the area decrease to the south. Based on our observations and review, the expected direction of groundwater flow underlying the Site is south to southeast towards Cooksville Creek and Lake Ontario.

### 3.3.4 Water Bodies, Areas of Natural Significance and Groundwater Information

No creeks or woodlands, and no wellhead protection areas or intake protection zones were identified within the Study Area. No natural heritage systems are located in the Study Area, and the Study Area does not contain a significant woodland, wetland or watercourse or a provincially significant feature or area of natural and scientific interest (ANSI).

Several monitoring well records were identified within the Study Area; no drinking water well records were located. The Site is within a developed urban setting and potable water is provided from a piped municipal supply that is sourced from Lake Ontario.

### 3.3.5 Well Records

According to the MECP records, there were several monitoring well records within the Study Area (a selection are included in Appendix E) and none were located on-Site. A record from a monitoring well located southwest of the Site identified soil as brown clay with gravel to a depth of 3.1 m below ground surface (bgs) underlain by grey shale to a depth of 6.7 m bgs. The static water level was not recorded.

## 3.4 Site Operating Records

Site operating records were requested via a Phase One ESA questionnaire provided by G2S at the time of this Phase One ESA report. The following chart summarizes the records:

**Table 9: Site Operating Records**

Site Operating Records	
Regulatory Permits and Records	No records available
Material Safety Data Sheets	No records available
Underground Utility Drawings	No records available
Chemical Inventory and Storage	No records available
Storage Tanks	No records available
Environmental Monitoring Data	No records available
Waste Management Records	No records available
Process, Production and Maintenance Documents	No records available
Spills and Discharges	No records available

Site Operating Records	
Emergency Response and Contingency Plans	No records available
Environmental Audit Reports	No records available
Facility Site Plans	No records available

## **4. Interviews**

### **4.1 Site Personnel**

An interview regarding the Site was conducted with the following:

- 51-53 Dundas Street West: Mr Luei D’Guerre (owner)
- 60 Agnes Street: Mr. Zia Khokar (husband of the owner)
- 66 Agnes Street: Residential tenant of the building
- 70 Agnes Street: Residential Tenant of the building and an email correspondence with the realtor for the owner (James Kong-Poy)
- 78 Agnes Street: The manager of the on-Site daycare and email correspondence with the owner Meghan Bhamatie.

A Phase One Questionnaire was completed by the respective owners of each Site building. The completed questionnaires are included in Appendix F.

### **4.2 Third Party Individuals**

Third party individuals were not available for interview at the time of this Phase One ESA.

### **4.3 Government Officials**

The following government officials were contacted as part of this Phase One ESA:

1. Ministry of the Environment, Conservation and Parks (MECP), Freedom of Information and Protection of Privacy Office; and
2. Technical Standards and Safety Authority (TSSA).

## 5. Site Reconnaissance

Observations of the Site, adjacent, and surrounding properties were conducted by walking over the Site. Adjacent and surrounding properties were observed from within the Site or by other public means. Refer to Drawing 3 (Site Plan) in Appendix A. Photographs of the Site and the Study Area are included in Appendix G.

### 5.1 General Requirements

**Table 10: Site Reconnaissance**

Date:	January 21 and 27, 2025
Time:	1:00 p.m.
Weather:	Partial sun, ~ 10 °C
Person who conducted the Site visit:	Cait Worona, B.Sc.
Site Contact/Personnel accompanying G2S during Site visit	51-57 Dundas Street East - Mr. Luei 60 Agnes Street – Mr. Zia 66-70 Agnes Street- Residential tenants of each building 78 Agnes Street – Manager of the Learning Jungle Cooksville
Qualified Person supervising the Site visit:	Steve Campbell, P.Geo.
Facility Operating: (Yes/No)	Yes

### 5.2 Specific Observations at the Phase One Property

General Observations:
<p>The Site is developed with the following buildings:</p> <p>51-57 Dundas Street West – Developed with a commercial building located on the southeast portion of the Site containing three units. A-1 Copy and Print occupies the first floor and partial basement, located on the east portion of the Site building. The unit contains varying office printing supplies such as vinyl cutting for t-shirts, office printers of varying size and resolutions and print binders. Storage throughout the unit consists of various papers and cardstock. Bulk quantities of ink are not stored or used on the property. Mustays Braiding Place is located on the second storey. The unit was not accessible at the time of the reconnaissance. However, according to the owner, utility spaces are not located within the unit, and the unit consists of a typical salon with stations for hairstyling with hair products, chairs and combs, etc. Promaster Services is located in the west unit on the first floor of the Site building. It consists of offices and a kitchenette. A fenced backyard is present to the north of the unit at the west end of the building and a paved parking lot is located to the north of the building. The municipal address 57 Dundas Street West is not in use at this time.</p> <p>60 Agnes Street – Developed with a mixed use commercial and residential building located on the northeast portion of the Site. Three residential units are present throughout the first and second storey and in the basement. A commercial unit is located in the west portion of the first floor and is occupied by Airwings Travel and Tours, a travel agency consisting of offices, washrooms and a kitchenette. The heating system for the building is located in the south portion of the basement. A paved parking lot and patio are present to the south of the building.</p> <p>66 Agnes Street – Developed with a single storey residential building located on the north central portion of the Site. The furnace room and hot water heater are located in the west portion of the basement. A garage is located to the west of the building. Grassed and bare ground areas are located surrounding the</p>

building and to the portion of the lot central to the Site. The central portion contains recently cleared brush. A paved driveway is present to the west of the building.

70 Agnes Street – Developed with a single storey residential building located on the north central portion of the Site. The heating for the building is located in the north portion of the basement. An asphalt driveway is present to the west of the building. Grassed areas surround the building and are present in the fenced back yard.

78 Agnes Street – Developed with a single-storey institutional building located on the northwest portion of the Site and is occupied by Learning Jungle Cooksville, a daycare facility. The Site consists of a kitchen and several children's education rooms. The heating system is located on the roof and a utility room with the electrical panel and hot water heater is located in the south portion of the basement. A parking lot is present to the north of the building and a fenced asphalt children's play area surround the east, west and south portions of the building.

#### On-Site Potentially Contaminating Activities

##### PCA #28 – Gasoline and Associated Products Storage in Fixed Tanks

Historical oil above ground storage tanks (ASTs) were identified by the occupants and/or owner of 60, 66 and 70 Agnes Street.

#### Interior Observations

Item	Observations
Building Observations	<p>51-57 Dundas Street West – Drywall, plaster walls and concrete block, vinyl floor tiles, cement floor.</p> <p>60 Agnes Street – Plaster, drywall, concrete block and ceramic tile walls, carpet, ceramic tile and concrete floors.</p> <p>66 Agnes Street – Drywall, plaster, brick and concrete block walls. Ceramic tile, laminate and concrete floors.</p> <p>70 Agnes Street – Drywall, plaster, brick and concrete block walls. Ceramic tile, laminate and concrete floors.</p> <p>78 Agnes Street – Drywall, plaster and concrete block walls. Ceramic tile, laminate and concrete floors.</p>
Existing and Former Heating and Cooling Systems	<p>51-57 Dundas Street West – A natural gas-fired boiler system provides heating to the building. According to the owner, an additional boiler had been replaced in the 2000s. A reserve water tank for the former boiler was present in the ceiling within the basement. A pad mounted air conditioning unit is located north of the building provides cooling to select units.</p> <p>60 Agnes Street – A natural gas fired-forced air furnace provides heating to the building. Supplemental heating is provided by electrically powered baseboard units. A pad mounted air conditioning unit located on the east exterior of the building provides cooling.</p> <p>66 Agnes Street – A natural gas fired-forced air furnace provides heating to the building. Chimney cleanouts were present in the wall behind the hot water heater. According to the owner, the former furnace oil AST was removed from the basement in 2006. It should be noted that observations were limited by the presence of household storage.</p> <p>70 Agnes Street – A natural gas fired-forced air furnace provides heating to the building. According to the tenants, an oil AST had been present and removed in the early 2000s.</p> <p>78 Agnes Street – A roof mounted, natural gas-fired heating, ventilating and air conditioning (HVAC) unit is located in the south portion of the roof of the building.</p>

Description of Below-Ground Structures	<p>51-57 Dundas Street West – A basement is located beneath the east portion of the Site building. A crawlspace is located beneath the west portion of the building. Debris was present within the crawlspace.</p> <p>60 Agnes Street – A basement is present beneath the building footprint.</p> <p>66 Agnes Street – A basement is present beneath the building footprint, excluding the front porch.</p> <p>70 Agnes Street – A basement is present beneath the building footprint, excluding the front and rear porches.</p> <p>78 Agnes Street – A basement is present beneath the building footprint.</p>
Exit and Entry Points	<p>51-57 Dundas Street West – Exit and entry are provided through multiple points on the north and south sides of the building.</p> <p>60, 70 and 78 Agnes Street – Exit and entry are provided from the north and south sides of the buildings.</p> <p>66 Agnes Street – Exit and entry are provided from the north and west sides of the building.</p>
Drains, Pits and Sumps	None observed.
Mechanical Equipment	None observed.
Stained Materials	None observed.
Noise, Odours, Vibrations	None observed.
Storage Tanks and Bulk Containers	<p>None observed, however, chimney cleanouts were present in the basement of 66 Agnes Street. According to the owner and/or tenant of 60, 66 and 70 Agnes Street, the buildings were formerly heated by oil. The owner of 60 Agnes Street was unable to remember the previous location of the oil tank within the basement. Observations of the previous oil tank location were limited by the extension of the basement to the south and installation of a porch to the south of the building. The AST formerly located in 66 Agnes Street was located in the west portion of the basement.</p> <p>The former fuel oil AST in 70 Agnes Street had been located in the north portion of the basement.</p>
Unidentified Substances	None observed.
Hazardous Materials and Special Attention Items:	<p>It is noted that a Designated Substances Survey (DSS) was not within the requested scope of work for this Phase One ESA. Based on the age of the Site buildings, (i.e., constructed earlier than 1909 and as late as 1954), the presence of hazardous materials is possible within the Site buildings.</p>
Site Limitations	<p>51-57 Dundas Street West – Access was not provided to the second storey braiding studio.</p> <p>60 Agnes Street – The residential portions of the building were not observed to reduce tenant disturbance, with the exception of the furnace room within the basement. Observations within the basement were limited based on the presence of typical residential storage.</p> <p>66 Agnes Street – The first storey was not accessed to minimize tenant disturbance. Observations within the</p>

	<p>basement were limited based on the presence of typical residential storage.</p> <p>70 Agnes Street – The first floor was not observed to minimize tenant disturbance. Observations within the basement were limited based on typical residential storage.</p> <p>78 Agnes Street – The childcare areas of the building were not accessed.</p>
<b>Exterior Observations</b>	
<b>Item</b>	<b>Observations</b>
Structure Exteriors	<p>51-57 Dundas Street West – Stucco wall finish overlying brick, concrete foundation.</p> <p>60 Agnes Street – Brick walls and concrete floor tiles.</p> <p>66 Agnes Street – Drywall, plaster, brick and concrete block walls. Ceramic tile, laminate and concrete floors.</p> <p>70 Agnes Street – Drywall, plaster, brick and concrete block walls. Ceramic tile, laminate and concrete floors.</p> <p>78 Agnes Street – Drywall, plaster and concrete block walls. Ceramic tile, laminate and concrete floors.</p>
Hazardous Materials	None observed.
Storage Tanks and Containers	A seacan used for office and household storage is located on the east central portion of the Site.
Unidentified Substances	None observed.
Wells	No monitoring wells were identified on the Site, however, it should be noted that observations were limited by the snow covered ground surface.
Potable Water Supply	Municipal (Lake Ontario).
Underground Utility and Service Corridors	Underground utilities such as natural gas, water and sewage service the buildings on Site.
Sewage Disposal	Municipal.
Pits and Lagoons	None observed.
Stained Materials	None observed.
Stressed Vegetation	None observed.
Ground Surface	Asphalt, grass.
Fill Materials	No obvious signs of fill material such as berms, stockpiles and/or significant grade changes were observed.
Watercourses, Ditches and/or Standing Water	None observed on Site or in the Study Area.
Roads, Parking Facilities and Rights of Way	Access to the Site is via Dundas Street West, Cook Street and Agnes Street.
Noises, Odours, Vibrations	None observed.
Waste Disposal	Waste is collected by the municipality. Spent ink cartridges are disposed at an off-Site specialty collection area.
Storage	A seacan is located on the north portion of 51 – 57 Dundas Street West. Household storage is located in the garage present on the west portion of 66 Agnes Street.
<b>Adjacent Land Uses</b>	
North	Agnes Street followed by vacant undeveloped land.

South	56-58 Dundas Street West: Cash 4 Gold Bountiful Basket Arrangements. 62-68 Dundas Street West Golden Leaf Cannabis, Manila Foods and Crafts, Wafa Dental.
East	Cook Street followed by a parking lot and 47 Dundas Street West (Dentist office).
West	59 – 77 Dundas Street West (also located south of 66-78 Dundas Street West portion of Site): Braost Inn, Shawarma W, Komal Jain Dentistry, AKFA Computer, Hot Plate, Roay Jewellers, Dundas Jewelry and Pawn, Meena Beauty Parlour, African Caribbean Groceries, Las Delicias. 84 Agnes Street – Residential Followed by a multistorey residential development under construction.
Current or Former Railway Lines or Spurs	None observed on Site or in the Study Area.

### 5.2.1 Enhanced Investigation Property

An enhanced investigation of the Site is necessary when the Site is being used for one of the following uses as described in clause 32 (1) (b) of Ontario Regulation 153/04 of the Environmental Protection Act (EPA). Clause 32 (1) (b) identifies properties that are being used in whole or in part for:

- i. For industrial use
- ii. As a garage
- iii. As a bulk liquid dispensing facility including gasoline service station
- iv. For the operation of dry-cleaning equipment.

The Site is currently used for residential purposes (60, 66 and 70 Agnes Street), institutional purposes (78 Agnes Street, Learning Jungle Cooksville), mixed use commercial and residential purposes (60 Agnes Street with three residential units and Airwings Travel & Tours) and commercial purposes (51-57 Dundas Street West containing A-1 Copy and Print, Mustays Braiding Place and Promaster Services, an accounting office). The Site has historically been used for residential purposes, institutional (daycare), community use (Orange Lodge), offices and retail stores; therefore, an enhanced investigation is not required.

## 5.3 Written Description of Investigation

The investigation carried out by G2S included inspection and examination of the Site as well as a visual inspection of the Study Area from areas accessible to the public. The investigation included documenting Site and Study Area conditions through notes and photographs and review of reasonably accessible information. The data compiled was reviewed and evaluated for APECs, as presented in this report.

## 6. Review and Evaluation of Information

### 6.1 Current and Past Uses

Based on the information gathered from the Site visit, records review and interviews, the following is a summary of the current and past uses of the Site:

**Table 11: Summary of Current and Past Site Uses**

Year	Name of Owner	Description of Property Use	Property Use	Other Observations
<b>51 – 57 Dundas Street West PIN 13151-0024 (LT)</b>				
1909 - 1939	Unknown	Developed with a residential building on the southeast portion (40 Dundas Street) and general store (42 Dundas Street) on the southwest. Two inferred residential buildings are located on the northeast portion of the parcel with addresses 36 and 38 Cook Street.	Commercial and residential use.	Based on information from 1909 FIP, 1909 topographic map.
1939 - 1954		The building housing the general store has been demolished. The parcel was addressed 62 Dundas Street. A personal garage was located on the north portion of the parcel labelled 62A Dundas Street with a portion extending onto the north adjacent parcel.	Residential use.	Based on information from the 1939 FIP.
1954 - 1968		An addition was created to the east of the existing building. A garage dissimilar to that pictured in the 1939	Residential and commercial use.	Based on 1954 and 1961 aerial photographs.

Year	Name of Owner	Description of Property Use	Property Use	Other Observations
		FIP was present on the north portion of the Site.		
1968 - 1981		The Site is developed with a building similar to present and was used for commercial purposes including an office supply store, real estate office and grocery store. Three residential listings were present in the street directories until 1972/1973.	Residential and commercial use.	Based on street directories and aerial photographs.
1981 - 2005	Laroian Corporation Inc.	The Site was used for multi-tenant commercial use. Tenants included a real estate office, moving and storage business, vacuum store and vacuum repair, Portuguese retail and wellness spa.	Commercial use.	Based on property ownership document, aerial photographs, street directories from 1968-2001, and site visit.
2005 - Present	4 CD's Inc.			
60 Agnes Street PIN 13151-0261 (LT)				
1909 - 1939	Unknown	The Site consisted of vacant undeveloped land.	Agriculture or other use.	Based on 1909 FIP.
1939 - 1954		The parcel was developed with the present day two storey residential building. A garage was present on the south portion of the parcel.	Residential land use.	Based on the 1939 FIP, 1954 – 2008 aerial photographs and street directories from 1968 – 2001.
1954 - 1988				
1988 - 2009	Mira Saric			
2009 - Present	Shahida Khokar	The building was used for mixed residential and commercial purposes. The building consists of residential units and is currently also occupied by Airwings Travel and Tours with Marlin Travel Mississauga. A former	Residential and commercial land use.	Based on the property ownership document, information from the Site Representative, 2023 aerial photograph and Site reconnaissance.

Year	Name of Owner	Description of Property Use	Property Use	Other Observations
		furnace oil storage tank was removed sometime after the purchase of the building by the current owner.		
66 Agnes Street PIN 13151-0257 (LT)				
1909-1939	Unknown	Vacant undeveloped.	Agriculture or other use.	Based on the 1909 FIP.
1939 - 1986		The Site is developed with a single storey residence and personal garage were present and used for residential use. A furnace oil AST was reportedly removed in 2006 from the basement.	Residential land use.	Based on the 1939 FIP, 1954 – 2023 aerial photographs, Site reconnaissance and street directories from 1968 – 2001.
1986 - 2006	661170 Ontario Ltd.			
2006 – 2008	Marita Pineda Danieal Pineda			
2008 – Present	Marita Pineda			
70 Agnes Street PIN 13151-0256				
1909 - 1954	Unknown	Vacant, undeveloped.	Agriculture or other use.	Based on the 1909 and 1939 FIPs and 1954 aerial photograph.
1954 -2006		The present day residential single storey building was constructed.	Residential use.	Based on the street directories from 1968 – 1972/1973, 1954 – 1996 aerial photographs.
2006	661170 Ontario Inc.	The building was used for residential purposes. A furnace oil AST located adjacent to the furnace was removed at approximately this time.		Based on information from the owner and property ownership document, 2008 aerial photograph.
2006 - 2021	James Kong-Poy			
2021- Present	2830569 Ontario Inc.	The building was used for presidential purposes.		Based on the property ownership document, Site reconnaissance and 2023 aerial photograph.
78 Agnes Street PIN13151-0067 (LT)				

Year	Name of Owner	Description of Property Use	Property Use	Other Observations
1909 - 1928	Unknown	Vacant, undeveloped land.	Agriculture or other use.	Based on the 1909 FIP.
1928 - 1967	Cooksville Hall Corporation	The present-day one storey community use building was constructed in 1929. The building was used by the Orange Lodge as a meeting hall.	Community use.	Based on information from the Mississauga Heritage website, 1939 FIP and 1954 and 1961 aerial photographs.
1967 - 2001		The building was vacant until 2001.		Based on information from the Mississauga Heritage website and street directories.
2001 - 2005	Meghan Bhamatie Meghan Dewindranauth	The Site building was converted to a daycare and currently occupied by Learning Jungle Cooksville.	Community use.	Based on information from the Site representative and property ownership record as well as aerial photographs.
2005 - Present	Meghan Bhamatie			

## 6.2 Potentially Contaminating Activities

The following Potentially Contaminating Activities (PCAs) were identified for the Site and/or Study Area. Refer to Drawing 14 in Appendix A.

**Table 12: Potentially Contaminating Activities**

Address Direction and Distance from Site	Potentially Contaminating Activity (Refer to Table 2, Schedule D O.Reg. 153/04, as amended)	Description	Date(s)	Results in an APEC (Yes/No)
51 - 57 Dundas Street West and 60 – 78 Agnes Street (Site)	<b>PCA #30</b> – Importation of Fill Material of Unknown Quality	According to the FIPs, two buildings were present on the east central portion of the Site in 1909. It is unknown if the buildings contained basements.	1909 - 1939	Yes – APEC 1A
		A general store was formerly present at the south portion of the Site. It is unknown if the buildings contained basements.		Yes- APEC 1B
	<b>PCA #28</b> – Gasoline and Associated Products Storage in Fixed Tanks	A former AST containing furnace oil was suspected to have been located in the basement of 60 Agnes Street. The basement floors are concrete and in good condition with no evidence of staining.	Prior to 2005	Yes – APEC 2A
		A former AST containing furnace oil was reportedly removed from the basement of 66 Agnus Street in 2006. The basement floors are concrete and in good condition with no evidence of staining.	Prior to 2006	Yes – APEC 2B

Address Direction and Distance from Site	Potentially Contaminating Activity (Refer to Table 2, Schedule D O.Reg. 153/04, as amended)	Description	Date(s)	Results in an APEC (Yes/No)
		A former AST containing furnace oil was reportedly removed from the basement of 70 Agnes Street in the early 2000s. The basement floors are concrete and in good condition with no evidence of staining.	Prior to 2005	Yes – APEC 2C
	<b>PCA Other 1</b> – Use of De-Icing Salt	Historical use of de-icing salt on paved portions of the Site.	<1954 - Present	Yes – APEC 3 <b>Not Applicable</b> – Per Section 49.1 of O. Reg 153/04, assessment of this APEC is not required.
71 King Street West ~70 m south	<b>PCA Other 2</b> – Generation of hazardous wastes	Promed 71 King Inc. was registered as a generator of halogenated solvents from 2013 – 2021.	2021 - 2013	No – Due to the distance from the Site and the trans-gradient location with respect to the expected groundwater flow direction.
10 Dundas Street East (Historic 2596 Hurontario Street and 3-5 Dundas Highway 5) ~105 m east	<b>PCA #28</b> – Gasoline and Associated Products Storage in Fixed Tanks	Gas station (i.e., Sony's gas bar and Sunoco Service) were listed in the street directories.	1972 – 1991.	No – Due to the trans-gradient location with respect to the expected groundwater flow direction.
	<b>PCA #10</b> – Commercial Autobody Shops	Midtown Motors Cooksville was listed in the street directories.	1972/1973	No – Due to the trans-gradient location with respect to the expected groundwater flow direction.

Address Direction and Distance from Site	Potentially Contaminating Activity (Refer to Table 2, Schedule D O.Reg. 153/04, as amended)	Description	Date(s)	Results in an APEC (Yes/No)
3100 Hurontario Street ~120 m north	<b>PCA Other 2–</b> Generation of hazardous wastes	The Peel Board of Education was registered for the generation of various hazardous wastes including petroleum distillates, waste oil and lubricants and organic tannery wastes.	1986 - 2021	No – Due to the nature of operations (i.e., a high school) and distance between the property and the Site.
Present day Confederation Parkway Road Allowance (Historic 123 Dundas Street West and 38 Dundas Highway No 5) ~175 m west	<b>PCA #10 –</b> Commercial Autobody Shops	1939 FIPs identified the property as Korn Garage. Autosport Equipment Ltd. (sports cars) was listed in the street directory in 1972/1973.	1939, 1972/1973	No – Due to the trans-gradient location with respect to the expected groundwater flow direction.
126 Dundas Street West (historically 111-115 Dundas Street West) ~140 m southwest	<b>PCA #28 –</b> Gasoline and Associated Products Storage in Fixed Tanks	The 1939 FIP indicated a service station to be present on the property. No tanks were shown on the FIP.	1939	No – Due to the down-gradient location with respect to the expected groundwater flow direction.
2550 Hurontario Street ~135 m south	<b>PCA #37 –</b> Operation of Dry Cleaning Equipment (where chemicals are used)	Cooksville Cleaners was listed in the street directories from 1996 to 2001. Additionally, the property was registered as a generator of halogenated solvents and petroleum distillates from 2003 – Present. The operation was still in service during the Site reconnaissance.	1996- Present	No – Due to the down-gradient location with respect to the expected groundwater flow direction.
3024 Hurontario Street ~150 m east	<b>PCA #28 –</b> Gasoline and Associated Products Storage in Fixed Tanks	Passfield Service Station was listed in the street directories in 1972/1973. Based on a review of aerial photographs, the service station was present on the northeast portion of the property.	1954 – 1973	No – Due to the trans-gradient location with respect to the expected groundwater flow direction.

Address Direction and Distance from Site	Potentially Contaminating Activity (Refer to Table 2, Schedule D O.Reg. 153/04, as amended)	Description	Date(s)	Results in an APEC (Yes/No)
161 Dundas Street West (Present day 165 Dundas Street West) ~185 m west	<b>PCA #10</b> – Commercial Autobody Shops	Doby Maintenance Sales and Service was listed in the street directory from 1968 – 1972/1973.	1968 – 1973	No – Due to the trans- gradient location with respect to the expected groundwater flow direction.
	<b>PCA #37</b> – Operation of Dry Cleaning Equipment (where chemicals are used)	Advance Dry Cleaners was located in the street directories in 2001	2001	
144 Dundas Street West ~225 m west	<b>PCA #37</b> – Operation of Dry Cleaning Equipment (where chemicals are used)	Crystal Cleaners was registered to be a generator of halogenated solvents and waste oils and sludges. The dry- cleaning operations (i.e., Annita's Dry Cleaners and Crystal Cleaners International) were listed in the street directories from approximately 1991 – 2001.	1991 -2011	No – Due to the trans- gradient location with respect to the expected groundwater flow direction.
	<b>PCA #31</b> – Ink Manufacturing, Processing and Bulk Storage	Historical address of 150 Dundas Street West, various newspapers occupied this property in the street directories between 1968 – 2001.	1968 - 2001	No – Due to the trans- gradient location with respect to the expected groundwater flow direction.
3039 Hurontario Street ~225 m northeast	<b>PCA #10</b> – Commercial Autobody Shops	Autoventure Mississauga was listed in the street directory in 1972/1973	1972/1973	No – Due to the distance from this property to the Site.
3041 Hurontario Street ~230 m northeast	<b>PCA #37</b> – Operation of Dry Cleaning Equipment (where chemicals are used)	Factory Outlet Dry Cleaners was listed in the street directories in 2001.	2001	No – Due to the distance from the Site.

Notes: APEC – Area of Potential Environmental Concern  
FIP – Fire Insurance Plan

UST – Underground Storage Tank

AST – Aboveground Storage Tank

### 6.3 Areas of Potential Environmental Concern

Based on review and evaluation of the PCAs, the following APECS were identified at the Site. Refer to Drawing 15 in Appendix A.

**Table 13: Areas of Potential Environmental Concern**

APEC No.	Description of APEC/Rationale	Location of APEC on Phase One Property	Potentially Contaminating Activity	Location of PCA (on-Site or off-Site)	Contaminants of Potential Concern	Media Potentially Impacted (Groundwater, Soil and/or Sediment)
1A	Residential dwellings were historically present on the east central portion of the Site. It is unknown if the buildings contained basements. There is potential for fill materials and demolition debris to be present within the historic building footprints.	East central portion of Site.	<b>PCA#30</b> – Importation of Fill Material of Unknown Quality	On-Site	Metals and inorganics, PHCs F1 to F4, BTEX, PAHs	Soil
1B	A general store was historically present on the southeast portion of the Site. It is unknown if the building contained a basement. There is potential for fill materials and demolition debris to be present within the historic building footprint.	South portion of the Site	<b>PCA#30</b> – Importation of Fill Material of Unknown Quality	On-Site	Metals and inorganics, PHCs F1 to F4, BTEX, PAHs	Soil
2A	Historic presence of a furnace oil AST inside the south portion of 60 Agnes Street.	Northeast portion of Site	<b>PCA #28</b> – Gasoline and Associated Products Storage in Fixed Tanks	On-Site	PHCs F1 to F4, BTEX	Soil
2B	Historic presence of a furnace oil AST within the west portion of the basement at 66 Agnes Street.	North portion of Site	<b>PCA #28</b> – Gasoline and Associated Products Storage in Fixed Tanks	On-Site	PHCs F1 to F4, BTEX	Soil

APEC No.	Description of APEC/Rationale	Location of APEC on Phase One Property	Potentially Contaminating Activity	Location of PCA (on-Site or off-Site)	Contaminants of Potential Concern	Media Potentially Impacted (Groundwater, Soil and/or Sediment)
2C	Historic presence of a furnace oil AST within the west portion of the basement at 70 Agnes Street.	North portion of Site	<b>PCA #28</b> – Gasoline and Associated Products Storage in Fixed Tanks	On-Site	PHCs F1 to F4, BTEX	Soil
3	Historical use of de-icing salt located on paved portions of the Site and adjoining roadways.	Entire Site	Use of de-icing salt on paved portions of the Site. <b>Not Applicable</b> – Per Section 49.1 of O. Reg 153/04, assessment of this APEC is not required.	On-Site	EC, SAR Na, Cl	Soil & Groundwater

Notes: PHCs F1-F4 – Petroleum Hydrocarbon  
VOCs – Volatile Organic Compounds  
SAR – Sodium Adsorption Ratio

PAHs – Polycyclic Aromatic Hydrocarbons  
BTEX – Benzene, Toluene, Ethylbenzene, Xylenes  
Cl – Chloride

EC – Electrical Conductivity  
NA – Sodium

Regarding APEC 3 (de-icing salt use), per Section 49.1 of O. Reg 153/04, assessment of this APEC is not required. Under the Regulations, where a substance has been applied to surfaces for the safety of vehicular or pedestrian traffic under conditions of snow or ice or both, the applicable standard is deemed not to be exceeded. In this regard, further assessment of this APEC is not required.

## **7. Phase One Conceptual Site Model**

### **Site Description**

For the purpose of this report, Site North has been established as perpendicular to Dundas Street West, with Dundas Street West running east to west. The irregular shaped Site is located on the north side of Dundas Street West, at the northwest side of the intersection with Cook Street and extends north to Agnes Street. The Site covers an approximate plan area of 0.44 hectares (1.1 acres). The Study Area consists of residential, commercial, and institutional land use. The Site location is illustrated on Drawing 1 in Appendix A and photographs of Site are included in Appendix F.

The Site was first developed with a residential building in the east central area and general store at the southeast portion prior to 1909. Further development of the Site occurred prior to 1939 and included 78 Agnes Street developed with the Orange Hall and two residential buildings at 60 and 66 Agnes Street. 70 Agnes Street was developed between 1939 and 1956. Site occupants have historically consisted of residential uses, community uses (daycare and community hall) and commercial use (hair salons, offices, copy shop and retail).

### **Water Bodies/Areas of Natural Significance**

No woodlands, wetlands, ANSIs or natural heritage areas are located on Site or in the Study Area.

No wellhead protection areas or intake protection zones were identified within the Study Area.

Surface water from the Site is expected to infiltrate through the unpaved areas on the central and north portions of the Site. Surface water is expected to runoff the paved surfaces south towards catch basins along Dundas Street West.

### **Drinking Water Wells**

No drinking water well records were located within the Study Area. The Site is within a developed urban setting and potable water is provided from a piped municipal supply that is sourced from Lake Ontario.

### **Geological and Hydrogeological Setting**

The Site is located approximately 115 m above sea level. Cooksville Creek is located approximately 430 m east of the Site, flowing generally south towards Lake Ontario located approximately 4.1 km south. Surface elevations in the area decrease to the south and southeast. Based on our observations and review, the expected direction of groundwater flow underlying the Site is southeast towards Cooksville Creek and Lake Ontario.

Based on a review of soil and geological mapping for the area, the near surface overburden soils at and in the vicinity of the Site are comprised of sand. The bedrock comprises grey shale with limestone interbeds of the Upper Ordovician Georgian Bay (Carlsbad and Russel) Formation.

## **Underground Utilities**

Underground utilities such as natural gas, municipal water and municipal sewage are present on-Site. Based on the shallow depth of most utility lines and the expected depth of groundwater in the area, utilities are unlikely to affect contaminant distribution and transport.

## **Surrounding Properties**

The Phase One ESA Study Area is developed primarily for residential, commercial and institutional land use (as shown on Drawing 2 in Appendix A). A vacant property preparing for redevelopment is located across Agnes Street to the north. A parking lot and 47 Dundas Street West (dentist office) are located to the east. A multi-tenant commercial building located at 59-77 Dundas Street West (multiple restaurants, jewellers, a salon, and computer store) is located to the west and south of the Site, and a residential building is located west of 78 Agnes Street. South of 51-57 Dundas Street West are multi-tenant commercial buildings including 56-58 Dundas Street West (cash office and edible arrangements) and 62-68 Dundas Street West (cannabis store, specialty grocery and dentist office).

## **Potentially Contaminating Activities (PCAs)**

Historical review of the Site and surrounding properties within a 250 m radius of the Site identified six on-Site and several off-Site PCAs, as defined in O. Reg. 153/04. PCAs identified during the Phase One ESA are summarized in Section 6.2.

## **Areas of Potential Environmental Concern (APECs)**

The PCAs were assessed based on observations of the operations, their location relative to the Site with respect to the inferred groundwater flow direction, their tenure, expected chemical storage amounts, etc. Based on review and evaluation of the information gathered, six APECs were identified on-Site and are summarized in Section 6.3.

## 8. Conclusions and Recommendations

This Phase One ESA was conducted to:

- i) develop a preliminary determination of the likelihood that one or more contaminants have affected any land or water on, in or under the Phase One ESA property;
- ii) determine the need for a Phase Two ESA; and
- iii) provide a basis for carrying out any Phase Two ESA required.

The assessment was performed in accordance with the Phase One ESA protocols outlined in O.Reg. 153/04, as amended, which came into force on July 1, 2011 and meets the requirements of Schedule D of the Regulation.

The Site was first developed with a residential building in the east central area and general store at the southeast portion prior to 1909. Further development of the Site occurred prior to 1939 and included 78 Agnes Street developed with the Orange Hall and two residential buildings at 60 and 66 Agnes Street. 70 Agnes Street was developed between 1939 and 1956. Site occupants have historically consisted of residential uses, community and institutional uses (daycare and community hall) and commercial use (hair salons, offices, copy shop and retail).

Historical review of the Site and surrounding properties within a 250 m radius of the Site identified six on Site PCAs and several off-Site PCAs, as defined in O. Reg. 153/04. The PCAs were assessed based on observations of the operations, their location relative to the Site with respect to the inferred groundwater flow direction, their tenure, expected chemical storage amounts, etc. The following APECs have been identified:

- APEC 1A: East central portion of Site – Former presence of residential buildings, there is potential for fill material or demolition debris to be present.
- APEC1B: South portion of Site – Former presence of a general store, there is the potential for fill material or demolition debris to be present.
- APEC 2A: Northeast portion of Site - Historical presence of a furnace oil above ground storage tank (AST) within the basement in the south portion of 60 Agnes Street.
- APEC 2B: Northeast portion of Site – Historical presence of a furnace oil above ground storage tank (AST) within the west portion of the basement at 66 Agnes Street.
- APEC 2C: North portion of Site - Historical presence of a furnace oil AST within the west portion of the basement at 70 Agnes Street.
- APEC 3: Entire Site – Historical use of de-icing salt on the paved portion of the Site and adjacent roadways.

Regarding APEC 3 (de-icing salt use), per Section 49.1 of O. Reg 153/04, assessment of this APEC is not required. Under the Regulations, where a substance has been applied to surfaces for the safety of vehicular or pedestrian traffic under conditions of snow or ice or both, the

applicable standard is deemed not to be exceeded. In this regard, further assessment of this APEC is not required.

A Phase Two ESA is recommended to investigate the potential for contamination related to the above-noted APECs.

### **8.1 Whether Phase Two Environmental Site Assessment Required Before Record of Site Condition Submitted**

It is the opinion of G2S that a Phase Two ESA is required before an RSC can be submitted for the Site.

### **8.2 Record of Site Condition Based on Phase One Environmental Site Assessment Alone**

It is the opinion of G2S that an RSC cannot be submitted for the Site based on a Phase One ESA alone.

## **9. Qualifications of the Assessor**

This Phase One ESA was conducted by Cait Worona, B.Sc. Ms. Worona is responsible for the successful completion of field work and reporting. Ms. Worona has completed numerous projects on behalf of private and public sector clients for industrial, commercial, and residential sites.

This Phase One ESA was reviewed by Ms. Whitney Bowden, B.Sc. Ms. Bowden has been trained to conduct Phase One and Two ESAs in accordance with the CSA and O. Reg 153/04, as amended. She is a senior project manager with over 10 years of professional experience specializing in environmental investigations and project management. Her main areas of expertise include Phase One and Phase Two ESAs, project management, site cleanup/remediation, UST and AST removals, and site remediation. She has completed numerous projects on behalf of private and public-sector clients for industrial, commercial, and residential sites.

This Phase One ESA was reviewed by Mr. Steve Campbell, P. Geo. Mr. Campbell has over 20 years of environmental consulting experience, including Phase One and Two ESAs, hazardous materials management, contaminant hydrogeology, air quality, environmental monitoring, and remediation of contaminated sites. Mr. Campbell is responsible for the overall management of projects, QA/QC, and health and safety, as well as acting as a technical lead on projects. Mr. Campbell is a Qualified Person as defined in Ontario Regulation 153/04 for signing off on Phase One and Two ESAs, remediation reports and Records of Site Condition (RSCs). Mr. Campbell has managed numerous asbestos, designated substances and mould assessments, as well as remediation programs.

## 10. References and Supporting Documentation

- a) Canadian Standards Association, Z768-01, re-affirmed 2022. Phase One Environmental Site Assessment.
- b) Occupational Health and Safety Act - Ministry of Labour (MOL).
- c) Inventory of Coal Gasification Plant Waste Sites in Ontario. Ontario Ministry of the Environment, April 1987.
- d) Waste Disposal Site Inventory. Waste Management Branch Ontario Ministry of the Environment, June 1991.
- e) Waste Disposal Site Inventory. Waste Management Branch Ontario Ministry of the Environment, April 1995.
- f) Hazardous Waste Information Network (HWIN, 1986 – 2019), [www.hwin.ca](http://www.hwin.ca).
- g) Ministry of the Environment, Brownfields Environmental Site Registry, [www.ene.gov.on.ca/environet/BESR/index](http://www.ene.gov.on.ca/environet/BESR/index).
- h) National Pollutant Release Inventory, [www.ec.gc.ca](http://www.ec.gc.ca).
- i) Ontario's Environmental Registry, [www.ebr.gov.on.ca](http://www.ebr.gov.on.ca).
- j) "Ontario Inventory of PCB Storage Sites", Waste Management Branch, Ontario Ministry of the Environment, June 1991.
- k) "Ontario Inventory of PCB Storage Sites", Waste Management Branch, Ontario Ministry of the Environment, April 1995.
- l) Natural Heritage Information Centre (NHIC) and Land Information Ontario (LIO) Map, Ontario Ministry of Natural Resources (MNR) website.
- m) Peel Region Historical Atlas, 1877, McGill University digital library, website.
- n) "Paleozoic Geology of Southern Ontario, Ontario Division of Mines", Map 2254. Scale 1:1,013,760, Published 1972.
- o) "Physiography of the South-Central Portion of Southern Ontario," Ontario Department of Mines and Northern Affairs, Map 2226. Scale 1:253,440. Published 1984.
- p) "The City of Mississauga Official Plan," Schedule 1, Urban System. August 2024.
- q) "The City of Mississauga Official Plan," Schedule 1a, Green System. August 2024.
- r) "The City of Mississauga Official Plan," Schedule 3, Natural System. August 2024.
- s) "1954, 1995, 2008 and 2023 Aerial Photograph," viewed online at the City of Mississauga Interactive Map.

- t) “1961 and 1981 Aerial Photograph” Viewed online at the City of Toronto Aerial Photographs Collection.
- u) “Brampton, Ontario Topographic Map” Survey Division, Department of Militia and Defence. Map Sheet 030M12, ed. 1, 1951. Scale 1:63,360.
- v) “Brampton (East) Ontario Topographic Map” Natural Resources Canada. Map Sheet 030M12, ed. 2, 1951. Scale 1:50,000.
- w) “Brampton (East) Ontario Topographic Map” Natural Resources Canada. Map Sheet 030M12, ed. 4, 1964. Scale 1:50,000.
- x) “Brampton Ontario Topographic Map” Natural Resources Canada. Map Sheet 030M12, ed. 7, 1994. Scale 1:50,000.
- y) “Brampton Area, Southern Ontario, Drift Thickness Sheet” Department of Mines. Map 2179.

## 11. Limitations

This Phase One Environmental Site Assessment (ESA) has been prepared for the sole benefit of 55 Dundas Developments Inc. and is intended to provide a Phase One ESA for the Site, 51 – 57 Dundas Street West and 60 – 78 Agnes Street in Mississauga, Ontario. The Phase One ESA may not be relied upon by any other person or entity without the expressed written consent of the 55 Dundas Developments Ltd. and G2S Consulting Inc. (G2S). Any use which a third party makes of this Phase One ESA, or any reliance on decisions made based on it, is the responsibility of such third parties. G2S accepts no responsibility for any loss, damage, expenses, or penalties suffered by any third parties that may arise or result from the use of any information or recommendations contained in this report.

The report is based solely on the scope of services which are specifically referred to in this report. No physical or intrusive testing has been performed, except as specifically referenced in this report. This report is not a certification of compliance with past or present regulations, codes, guidelines and policies.

The findings in this Phase One ESA are limited to the conditions at the Site at the time of this investigation (April 2025) and supplemented by a historical review and data obtained by G2S as described herein as well as information provided by the Site representative as reported herein. Conclusions presented in this Phase One ESA should not be construed as legal advice.

If Site conditions, regulations, codes, guidelines and applicable standards change or if any additional information becomes available at a future date, changes to the findings, conclusions and recommendations in this Phase One ESA may be necessary.


This assessment does not wholly eliminate uncertainty regarding the potential for existing or future costs, hazards or losses in connection with the Site and must be viewed as a mechanism to reduce risk rather than eliminate the risk of contamination concerns.

## 12. Signatures and Closing Remarks

We trust this Phase One ESA is satisfactory for your purposes. Should you have any questions, please do not hesitate to contact this office.

Yours truly,

**G2S Consulting Inc.**



Whitney Bowden, B.Sc.  
Senior Project Manager

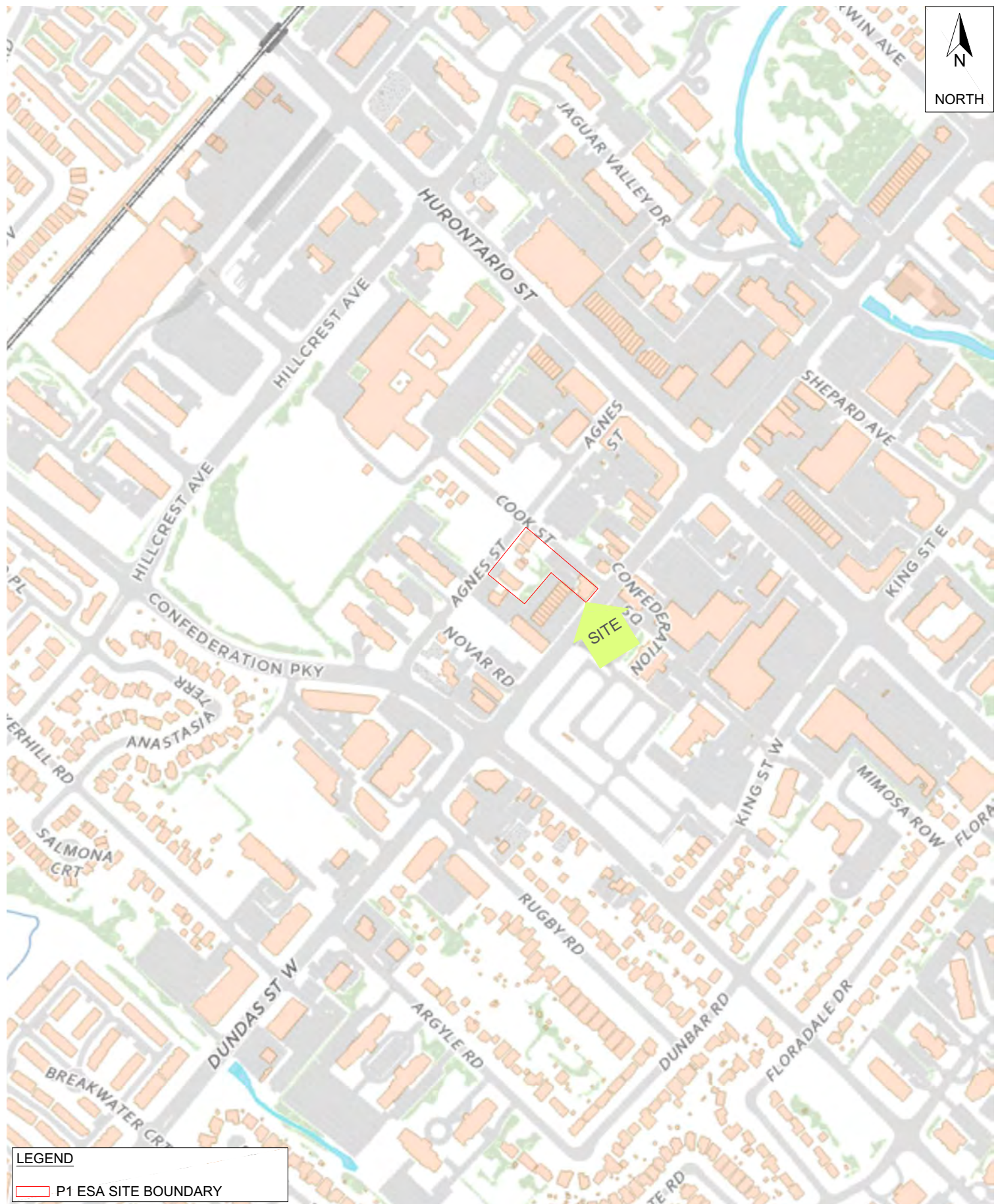


Steve Campbell, P.Geo.  
Principal, Senior Geoscientist

### **13. Appendices**

The following are Appendices A to G which must be read in conjunction with this report.

## **Appendix A: Drawings**



**LEGEND**

P1 ESA SITE BOUNDARY

Scale: N.T.S.  
Project No.: G2S24602A  
Date: APRIL 2025  
Drawn by: CW  
File name: G2S24602A.dwg

**SITE LOCATION PLAN  
51-57 DUNDAS STREET WEST  
& 60-78 AGNES STREET**

MISSISSAUGA

ONTARIO



Drawing No.

**1**







LEGEND

P1 ESA SITE BOUNDARY

Scale: N.T.S.  
Project No.: G2S24602A  
Date: APRIL 2025  
Drawn by: CW  
File name: G2S24602A.dwg

1954 AERIAL PHOTOGRAPH  
51-57 DUNDAS STREET WEST &  
60-78 AGNES STREET

MISSISSAUGA

ONTARIO



Drawing No.

4



Scale: N.T.S.  
Project No.: G2S24602A  
Date: APRIL 2025  
Drawn by: CW  
File name: G2S24602A.dwg

1995 AERIAL PHOTOGRAPH  
51-57 DUNDAS STREET WEST &  
60-78 AGNES STREET

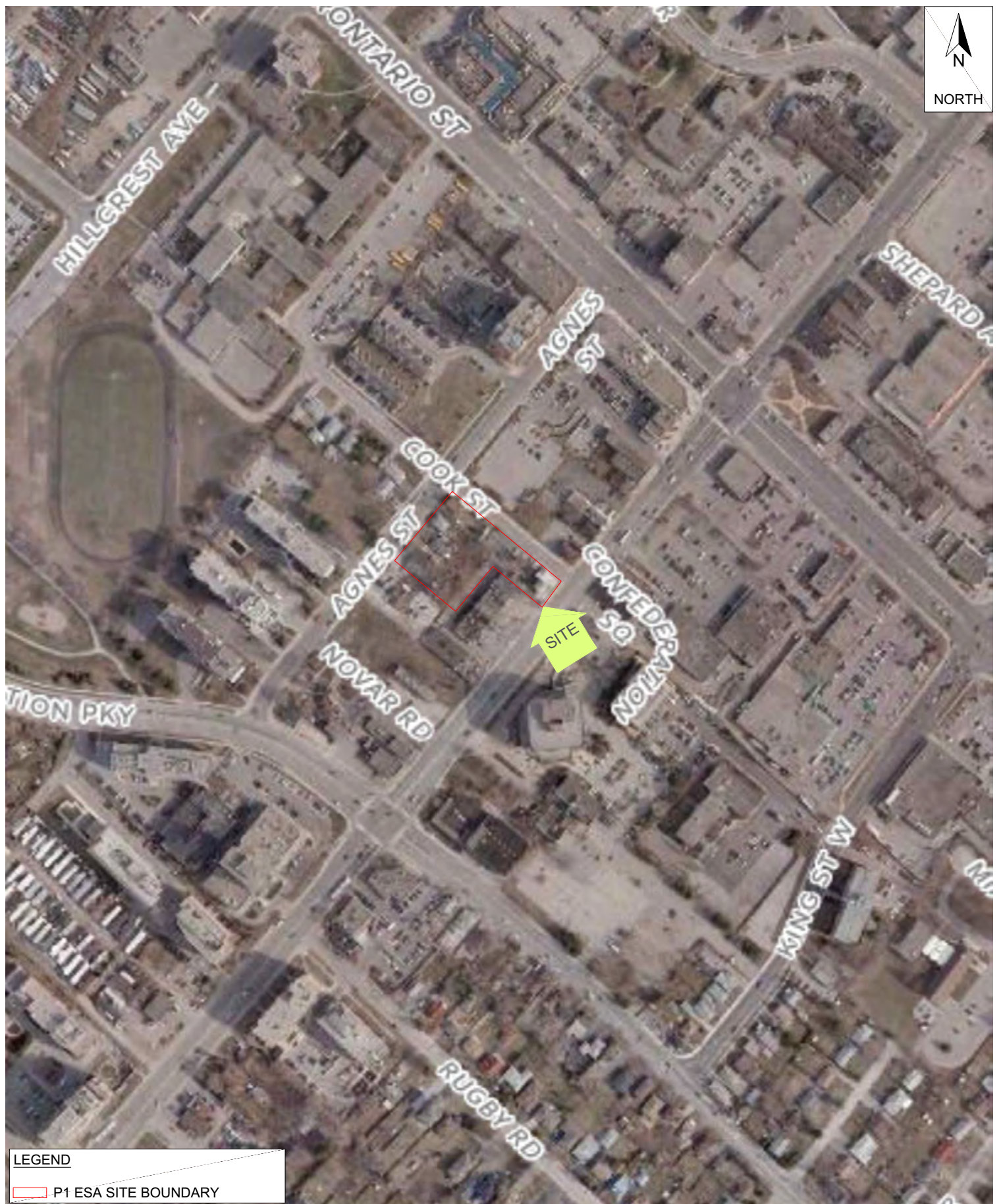
MISSISSAUGA

ONTARIO



Drawing No.

5



#### LEGEND

P1 ESA SITE BOUNDARY

Scale: N.T.S.  
 Project No.: G2S24602A  
 Date: APRIL 2025  
 Drawn by: CW  
 File name: G2S24602A.dwg

2008 AERIAL PHOTOGRAPH  
 51-57 DUNDAS STREET WEST &  
 60-78 AGNES STREET

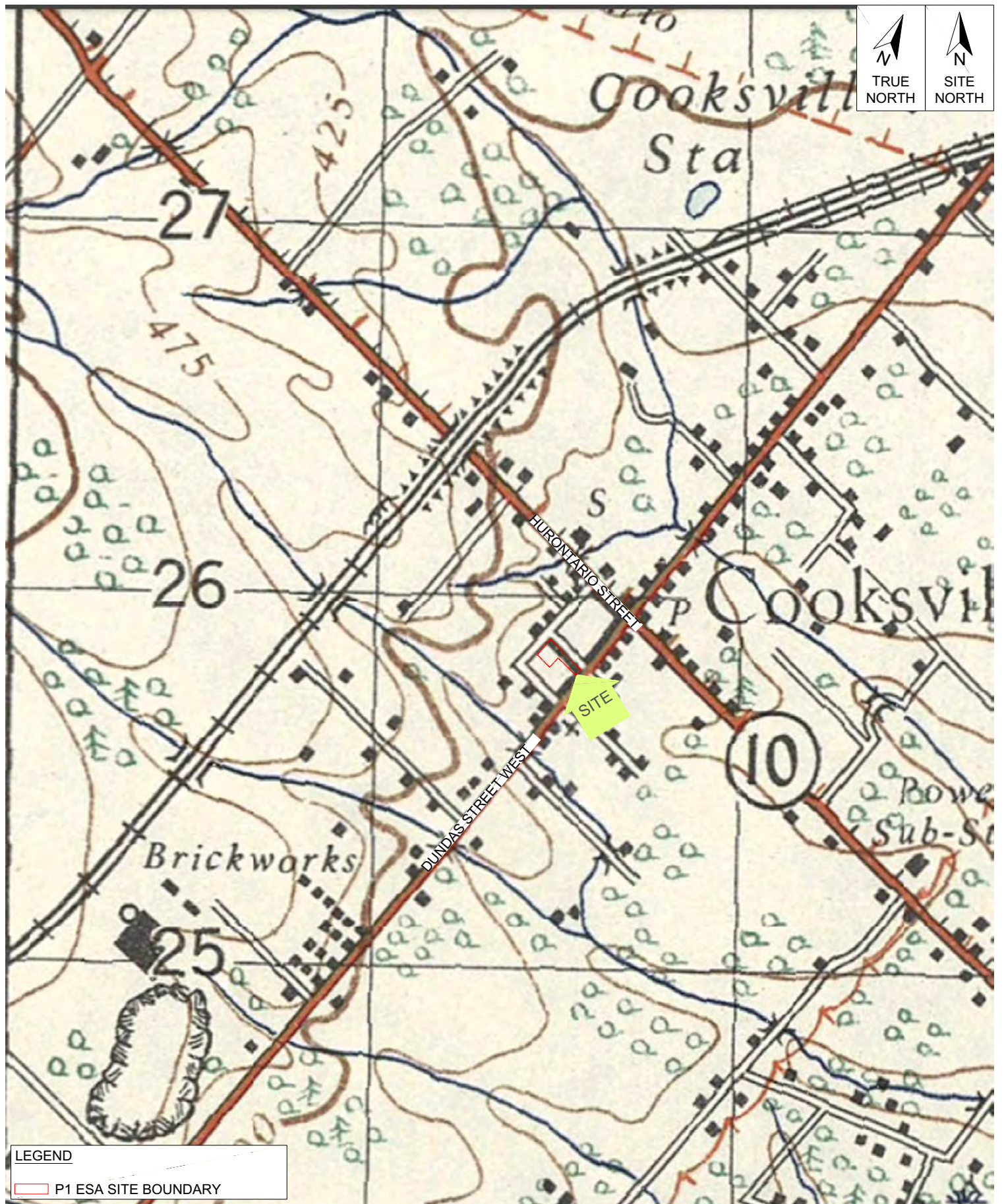
MISSISSAUGA

ONTARIO



Drawing No.

6



Scale: N.T.S.  
 Project No.: G2S24602A  
 Date: APRIL 2025  
 Drawn by: CW  
 File name: G2S24602A.dwg

1951 TOPOGRAPHIC MAP  
 51-57 DUNDAS STREET WEST &  
 60-78 AGNES STREET

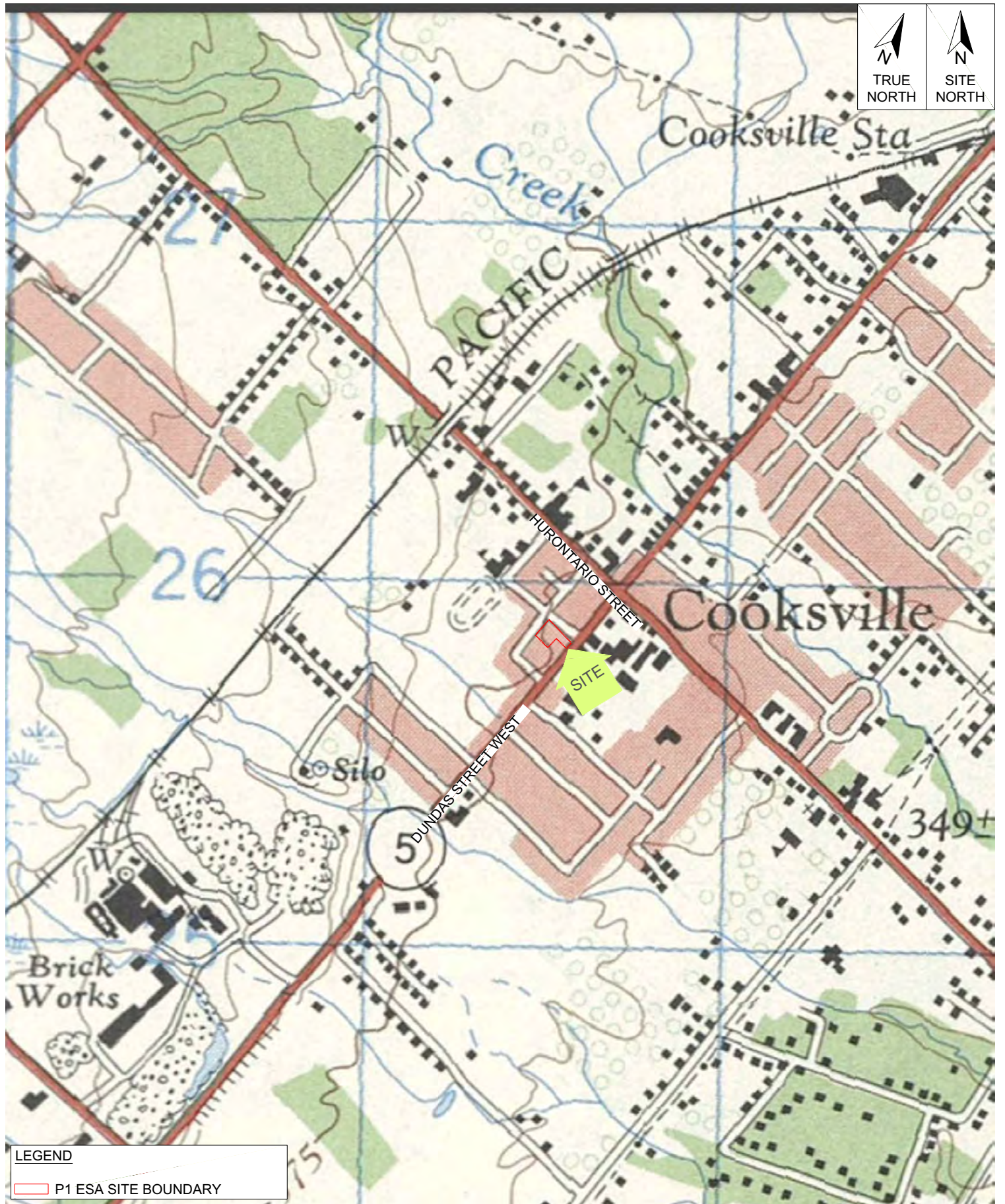
MISSISSAUGA

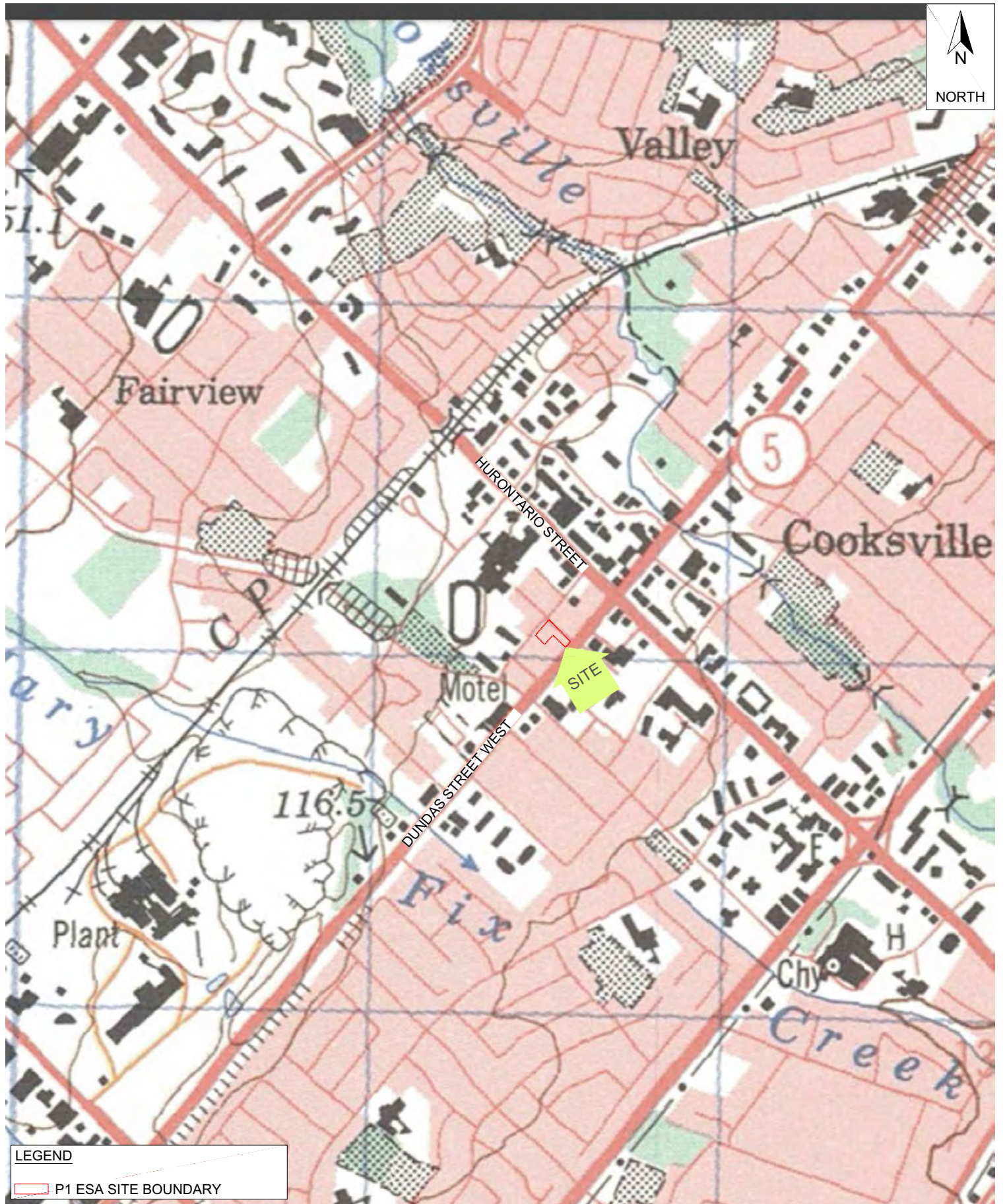
ONTARIO

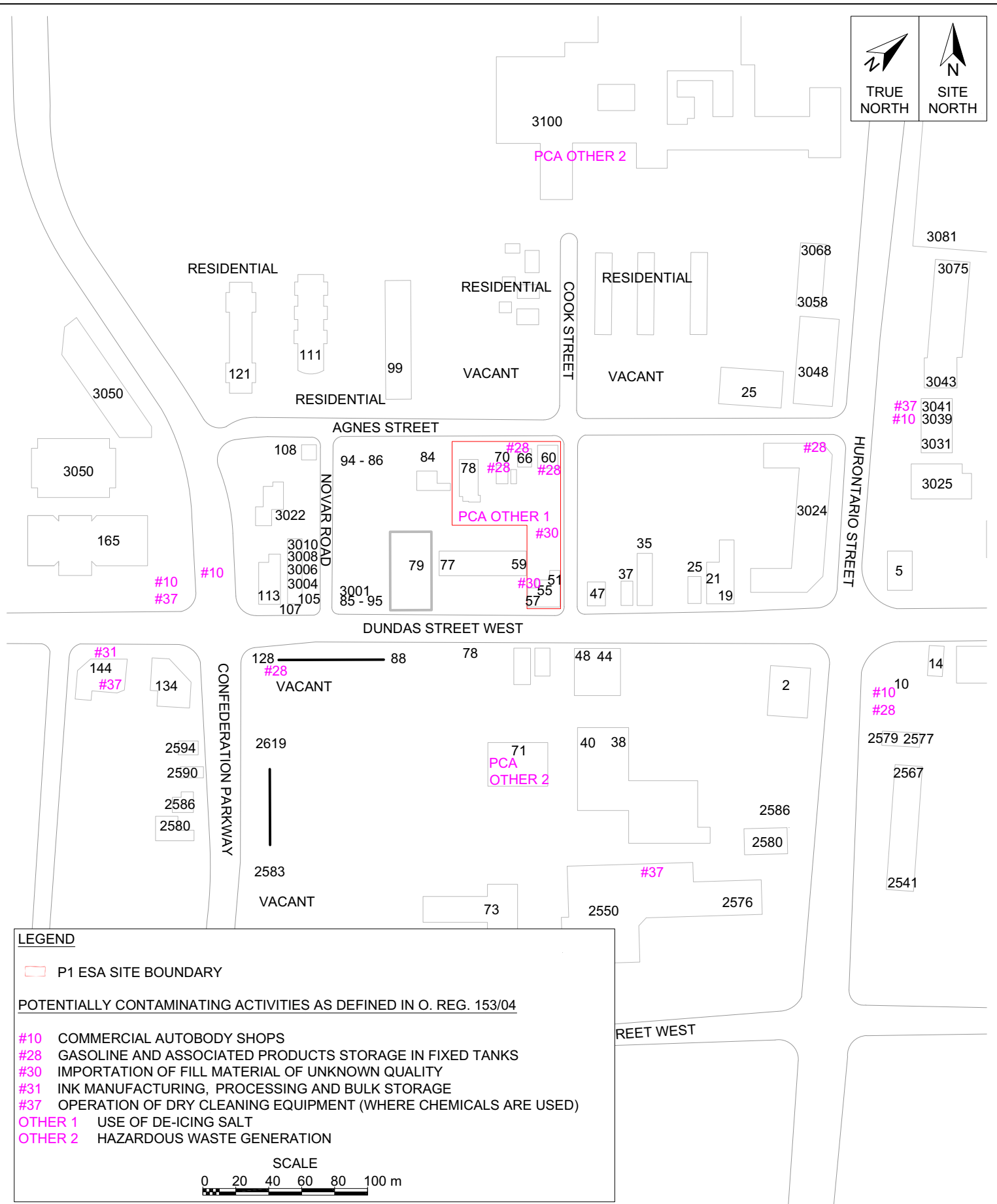
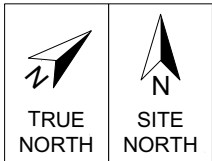


Drawing No.

7





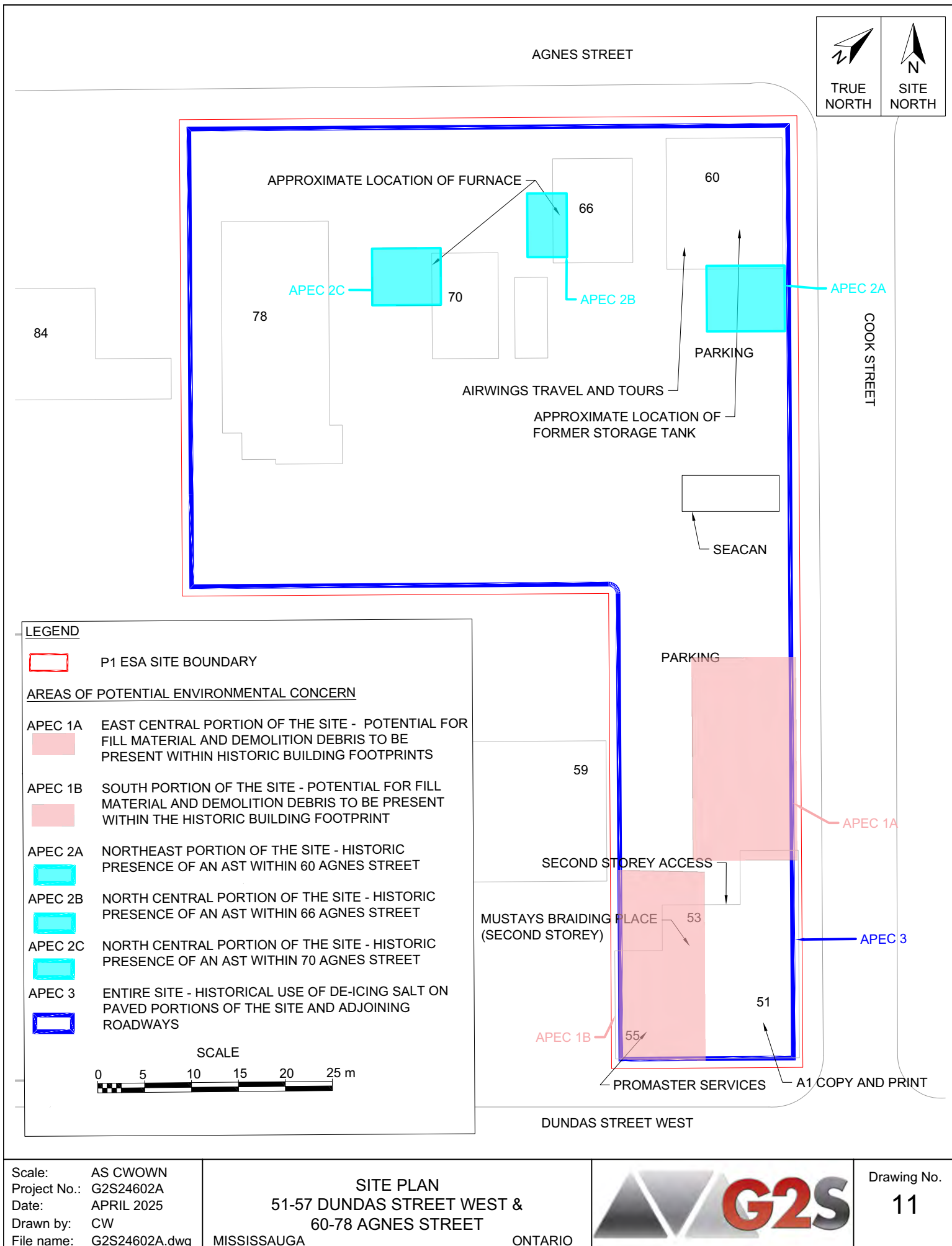


Scale: AS SHOWN  
Project No.: G2S24602A  
Date: APRIL 2025  
Drawn by: CW  
File name: G2S24602A.dwg

**POTENTIALLY CONTAMINATING  
ACTIVITIES**  
**51-57 DUNDAS STREET WEST &  
60-78 AGNES STREET**  
MISSISSAUGA ONTARIO



Drawing No.  
**10**



## **Appendix B: Site Ownership**

PROPERTY DESCRIPTION:

PART OF LOT 29, PLAN TOR-12, WEST OF HURONTARIO STREET, DESIGNATED AS PART 1 ON REFERENCE PLAN 43R36324 IN THE CITY OF MISSISSAUGA, REGIONAL MUNICIPALITY OF PEEL.

PROPERTY REMARKS:

ESTATE/QUALIFIER:

FEE SIMPLE  
LT CONVERSION QUALIFIED

RECENTLY:

DIVISION FROM 13151-0071

PIN CREATION DATE:

2015/06/19

OWNERS' NAMES

KHOKHAR, SHAHIDA

CAPACITY SHARE

ROWN

REG. NUM.	DATE	INSTRUMENT TYPE	AMOUNT	PARTIES FROM	PARTIES TO	CERT/ CHKD
<div><div>** PRINTOUT INCLUDES ALL DOCUMENT TYPES AND DELETED INSTRUMENTS SINCE 2015/06/19 **</div><div>**SUBJECT, ON FIRST REGISTRATION UNDER THE LAND TITLES ACT, TO:</div><div>** SUBSECTION 44(1) OF THE LAND TITLES ACT, EXCEPT PARAGRAPH 11, PARAGRAPH 14, PROVINCIAL SUCCESSION DUTIES *</div><div>** AND ESCHEATS OR FORFEITURE TO THE CROWN.</div><div>** THE RIGHTS OF ANY PERSON WHO WOULD, BUT FOR THE LAND TITLES ACT, BE ENTITLED TO THE LAND OR ANY PART OF</div><div>** IT THROUGH LENGTH OF ADVERSE POSSESSION, PRESCRIPTION, MISDESCRIPTION OR BOUNDARIES SETTLED BY</div><div>** CONVENTION.</div><div>** ANY LEASE TO WHICH THE SUBSECTION 70(2) OF THE REGISTRY ACT APPLIES.</div><div>**DATE OF CONVERSION TO LAND TITLES: 1998/12/22 **</div></div>						
PR1609171	2009/02/27	TRANSFER	\$460,000	SARIC, MIRA	KHOKHAR, SHAHIDA	C
PR1609172	2009/02/27	CHARGE	\$450,766	KHOKHAR, SHAHIDA	HOME TRUST COMPANY	C
43R36324	2015/01/15	PLAN REFERENCE				C
PR3268191	2018/01/11	TRANSFER OF CHARGE		HOME TRUST COMPANY	COMPUTERSHARE TRUST COMPANY OF CANADA	C
REMARKS: PR1609172						

NOTE: ADJOINING PROPERTIES SHOULD BE INVESTIGATED TO ASCERTAIN DESCRIPTIVE INCONSISTENCIES, IF ANY, WITH DESCRIPTION REPRESENTED FOR THIS PROPERTY.

NOTE: ENSURE THAT YOUR PRINTOUT STATES THE TOTAL NUMBER OF PAGES AND THAT YOU HAVE PICKED THEM ALL UP.

PROPERTY DESCRIPTION: PT LT 29 WHS PL TOR-12 TORONTO DES PTS 3, 4 PL 43R-15014; MISSISSAUGA.

PROPERTY REMARKS:

ESTATE/QUALIFIER:

FEE SIMPLE  
LT CONVERSION QUALIFIED

RECENTLY:

DIVISION FROM 13151-0068

PIN CREATION DATE:

2006/05/29

OWNERS' NAMES

PINEDA, MARITA  
PINEDA, DANIEL

CAPACITY SHARE

JTEN  
JTEN

REG. NUM.	DATE	INSTRUMENT TYPE	AMOUNT	PARTIES FROM	PARTIES TO	CERT/ CHKD
<div>** PRINTOUT INCLUDES ALL DOCUMENT TYPES AND DELETED INSTRUMENTS SINCE 2006/05/29 **</div> <div>**SUBJECT, ON FIRST REGISTRATION UNDER THE LAND TITLES ACT, TO:</div> <div>** SUBSECTION 44(1) OF THE LAND TITLES ACT, EXCEPT PARAGRAPH 11, PARAGRAPH 14, PROVINCIAL SUCCESSION DUTIES *</div> <div>** AND ESCHEATS OR FORFEITURE TO THE CROWN.</div> <div>** THE RIGHTS OF ANY PERSON WHO WOULD, BUT FOR THE LAND TITLES ACT, BE ENTITLED TO THE LAND OR ANY PART OF</div> <div>** IT THROUGH LENGTH OF ADVERSE POSSESSION, PRESCRIPTION, MISDESCRIPTION OR BOUNDARIES SETTLED BY</div> <div>** CONVENTION.</div> <div>** ANY LEASE TO WHICH THE SUBSECTION 70(2) OF THE REGISTRY ACT APPLIES.</div> <div>**DATE OF CONVERSION TO LAND TITLES: 1998/12/22 **</div>						
RO752557	1986/05/21	TRANSFER		*** DELETED AGAINST THIS PROPERTY ***	661170 ONTARIO LIMITED	C
RO803485	1987/06/12	TRANSFER		*** DELETED AGAINST THIS PROPERTY ***	661170 ONTARIO LIMITED	
43R15014	1987/10/07	PLAN REFERENCE				
RO822357	1987/10/27	TRANSFER		*** DELETED AGAINST THIS PROPERTY ***	661170 ONTARIO LIMITED	
PR1069656	2006/05/31	TRANSFER		*** COMPLETELY DELETED *** 661170 ONTARIO LIMITED	PINEDA, MARITA	
REMARKS: PLANNING ACT STATEMENT.						
PR1069657	2006/05/31	CHARGE		*** COMPLETELY DELETED *** PINEDA, MARITA	ROYAL BANK OF CANADA	C
PR1452515	2008/04/29	TRANSFER	\$2	PINEDA, MARITA	PINEDA, MARITA PINEDA, DANIEL	

NOTE: ADJOINING PROPERTIES SHOULD BE INVESTIGATED TO ASCERTAIN DESCRIPTIVE INCONSISTENCIES, IF ANY, WITH DESCRIPTION REPRESENTED FOR THIS PROPERTY.  
NOTE: ENSURE THAT YOUR PRINTOUT STATES THE TOTAL NUMBER OF PAGES AND THAT YOU HAVE PICKED THEM ALL UP.

REG. NUM.	DATE	INSTRUMENT TYPE	AMOUNT	PARTIES FROM	PARTIES TO	CERT/ CHKD
PR1452516	2008/04/29	CHARGE	\$500,000	PINEDA, MARITA PINEDA, DANIEL	ROYAL BANK OF CANADA	C
PR1456650	2008/05/06	DISCH OF CHARGE		*** COMPLETELY DELETED *** ROYAL BANK OF CANADA		
REMARKS: RE: PR1069657						
PR2559398	2014/07/03	LIEN		*** COMPLETELY DELETED *** HER MAJESTY THE QUEEN IN RIGHT OF CANADA AS REPRESENTED BY THE MINISTER OF NATIONAL REVENUE		
REMARKS: INCOME TAX ACT						
PR2559483	2014/07/03	LIEN		*** COMPLETELY DELETED *** HER MAJESTY THE QUEEN IN RIGHT OF CANADA AS REPRESENTED BY THE MINISTER OF NATIONAL REVENUE		
REMARKS: EXCISE TAX ACT						
PR3354847	2018/07/25	DISCHARGE INTEREST		*** COMPLETELY DELETED *** HER MAJESTY THE QUEEN IN RIGHT OF CANADA AS REPRESENTED BY THE MINISTER OF NATIONAL REVENUE		
REMARKS: PR2559398.						
PR3384438	2018/09/26	DISCHARGE INTEREST		*** COMPLETELY DELETED *** HER MAJESTY THE QUEEN IN RIGHT OF CANADA AS REPRESENTED BY THE MINISTER OF NATIONAL REVENUE		
REMARKS: PR2559483.						
PR3411431	2018/11/22	LIEN		*** COMPLETELY DELETED *** HER MAJESTY THE QUEEN IN RIGHT OF CANADA AS REPRESENTED BY THE MINISTER OF NATIONAL REVENUE		
REMARKS: THE EXCISE TAX ACT						
PR3569686	2019/11/12	DISCHARGE INTEREST		*** COMPLETELY DELETED *** HER MAJESTY THE QUEEN IN RIGHT OF CANADA AS REPRESENTED BY THE MINISTER OF NATIONAL REVENUE		
REMARKS: PR3411431.						

NOTE: ADJOINING PROPERTIES SHOULD BE INVESTIGATED TO ASCERTAIN DESCRIPTIVE INCONSISTENCIES, IF ANY, WITH DESCRIPTION REPRESENTED FOR THIS PROPERTY.  
NOTE: ENSURE THAT YOUR PRINTOUT STATES THE TOTAL NUMBER OF PAGES AND THAT YOU HAVE PICKED THEM ALL UP.

LAND  
REGISTRY  
OFFICE #43

13151-0256 (LT)

PAGE 1 OF 2  
PREPARED FOR G2S CONSULTING INC  
ON 2025/01/29 AT 15:37:26

\* CERTIFIED IN ACCORDANCE WITH THE LAND TITLES ACT \* SUBJECT TO RESERVATIONS IN CROWN GRANT \*

PROPERTY DESCRIPTION: PT LT 29 WHS PL TOR-12 TORONTO DES PTS 1, 2 PL 43R-15014; MISSISSAUGA.

PROPERTY REMARKS: PLANNING ACT CONSENT ATTACHED TO PR1063378.

ESTATE/QUALIFIER:  
FEE SIMPLE  
LT CONVERSION QUALIFIED

RECENTLY:  
DIVISION FROM 13151-0068

PIN CREATION DATE:  
2006/05/29

OWNERS' NAMES  
2830569 ONTARIO INC.

CAPACITY SHARE  
ROWN

REG. NUM.	DATE	INSTRUMENT TYPE	AMOUNT	PARTIES FROM	PARTIES TO	CERT/ CHKD																																																									
<div>** PRINTOUT INCLUDES ALL DOCUMENT TYPES AND DELETED INSTRUMENTS SINCE 2006/05/29 **</div> <div>**SUBJECT, ON FIRST REGISTRATION UNDER THE LAND TITLES ACT, TO:</div> <div>**</div> <div>SUBSECTION 44(1) OF THE LAND TITLES ACT, EXCEPT PARAGRAPH 11, PARAGRAPH 14, PROVINCIAL SUCCESSION DUTIES *</div> <div>**</div> <div>AND ESCHEATS OR FORFEITURE TO THE CROWN.</div> <div>**</div> <div>THE RIGHTS OF ANY PERSON WHO WOULD, BUT FOR THE LAND TITLES ACT, BE ENTITLED TO THE LAND OR ANY PART OF</div> <div>**</div> <div>IT THROUGH LENGTH OF ADVERSE POSSESSION, PRESCRIPTION, MISDESCRIPTION OR BOUNDARIES SETTLED BY</div> <div>**</div> <div>CONVENTION.</div> <div>**</div> <div>ANY LEASE TO WHICH THE SUBSECTION 70(2) OF THE REGISTRY ACT APPLIES.</div> <div>**DATE OF CONVERSION TO LAND TITLES: 1998/12/22 **</div> <tr><td>43R15014</td><td>1987/10/07</td><td>PLAN REFERENCE</td><td></td><td></td><td></td><td rowspan="7">C</td></tr> <tr><td>PR1063378</td><td>2006/05/18</td><td>TRANSFER</td><td></td><td>*** DELETED AGAINST THIS PROPERTY *** 661170 ONTARIO LIMITED</td><td>KONG-POY, JAMES</td></tr> <tr><td>PR1706426</td><td>2009/09/18</td><td>CHARGE</td><td></td><td>*** COMPLETELY DELETED *** KONG-POY, JAMES</td><td>THE BANK OF NOVA SCOTIA</td></tr> <tr><td>PR2621140</td><td>2014/10/27</td><td>CHARGE</td><td></td><td>*** COMPLETELY DELETED *** KONG-POY, JAMES</td><td>CANADIAN IMPERIAL BANK OF COMMERCE</td></tr> <tr><td>PR2621141</td><td>2014/10/27</td><td>NO ASSGN RENT GEN</td><td></td><td>*** COMPLETELY DELETED *** KONG-POY, JAMES</td><td>CANADIAN IMPERIAL BANK OF COMMERCE</td></tr> <tr><td colspan="4">REMARKS: PR2621140.</td><td></td><td></td></tr> <tr><td>PR2635523</td><td>2014/11/24</td><td>DISCH OF CHARGE</td><td></td><td>*** COMPLETELY DELETED *** THE BANK OF NOVA SCOTIA</td><td></td></tr> <tr><td colspan="4">REMARKS: PR1706426.</td><td></td><td></td><td></td></tr> <tr><td>PR3816109</td><td>2021/04/15</td><td>TRANSFER</td><td>\$2</td><td>KONG-POY, JAMES</td><td>2830569 ONTARIO INC.</td><td>C</td></tr>							43R15014	1987/10/07	PLAN REFERENCE				C	PR1063378	2006/05/18	TRANSFER		*** DELETED AGAINST THIS PROPERTY *** 661170 ONTARIO LIMITED	KONG-POY, JAMES	PR1706426	2009/09/18	CHARGE		*** COMPLETELY DELETED *** KONG-POY, JAMES	THE BANK OF NOVA SCOTIA	PR2621140	2014/10/27	CHARGE		*** COMPLETELY DELETED *** KONG-POY, JAMES	CANADIAN IMPERIAL BANK OF COMMERCE	PR2621141	2014/10/27	NO ASSGN RENT GEN		*** COMPLETELY DELETED *** KONG-POY, JAMES	CANADIAN IMPERIAL BANK OF COMMERCE	REMARKS: PR2621140.						PR2635523	2014/11/24	DISCH OF CHARGE		*** COMPLETELY DELETED *** THE BANK OF NOVA SCOTIA		REMARKS: PR1706426.							PR3816109	2021/04/15	TRANSFER	\$2	KONG-POY, JAMES	2830569 ONTARIO INC.	C
43R15014	1987/10/07	PLAN REFERENCE				C																																																									
PR1063378	2006/05/18	TRANSFER		*** DELETED AGAINST THIS PROPERTY *** 661170 ONTARIO LIMITED	KONG-POY, JAMES																																																										
PR1706426	2009/09/18	CHARGE		*** COMPLETELY DELETED *** KONG-POY, JAMES	THE BANK OF NOVA SCOTIA																																																										
PR2621140	2014/10/27	CHARGE		*** COMPLETELY DELETED *** KONG-POY, JAMES	CANADIAN IMPERIAL BANK OF COMMERCE																																																										
PR2621141	2014/10/27	NO ASSGN RENT GEN		*** COMPLETELY DELETED *** KONG-POY, JAMES	CANADIAN IMPERIAL BANK OF COMMERCE																																																										
REMARKS: PR2621140.																																																															
PR2635523	2014/11/24	DISCH OF CHARGE		*** COMPLETELY DELETED *** THE BANK OF NOVA SCOTIA																																																											
REMARKS: PR1706426.																																																															
PR3816109	2021/04/15	TRANSFER	\$2	KONG-POY, JAMES	2830569 ONTARIO INC.	C																																																									

NOTE: ADJOINING PROPERTIES SHOULD BE INVESTIGATED TO ASCERTAIN DESCRIPTIVE INCONSISTENCIES, IF ANY, WITH DESCRIPTION REPRESENTED FOR THIS PROPERTY.  
NOTE: ENSURE THAT YOUR PRINTOUT STATES THE TOTAL NUMBER OF PAGES AND THAT YOU HAVE PICKED THEM ALL UP.

LAND  
REGISTRY  
OFFICE #43

13151-0256 (LT)

PAGE 2 OF 2  
PREPARED FOR G2S CONSULTING INC  
ON 2025/01/29 AT 15:37:26

\* CERTIFIED IN ACCORDANCE WITH THE LAND TITLES ACT \* SUBJECT TO RESERVATIONS IN CROWN GRANT \*

REG. NUM.	DATE	INSTRUMENT TYPE	AMOUNT	PARTIES FROM	PARTIES TO	CERT/ CHKD
PR3829180	2021/05/06	DISCH OF CHARGE		*** COMPLETELY DELETED *** CANADIAN IMPERIAL BANK OF COMMERCE		
PR3982472	2022/01/25	CHARGE	\$150,000	2830569 ONTARIO INC.	MERIDIAN CREDIT UNION LIMITED	C
PR3982473	2022/01/25	NO ASSGN RENT GEN		2830569 ONTARIO INC.	MERIDIAN CREDIT UNION LIMITED	C

NOTE: ADJOINING PROPERTIES SHOULD BE INVESTIGATED TO ASCERTAIN DESCRIPTIVE INCONSISTENCIES, IF ANY, WITH DESCRIPTION REPRESENTED FOR THIS PROPERTY.  
NOTE: ENSURE THAT YOUR PRINTOUT STATES THE TOTAL NUMBER OF PAGES AND THAT YOU HAVE PICKED THEM ALL UP.

PROPERTY DESCRIPTION: LT 10, WHS, "PL TOR-12", TORONTO; PT LT 29, WHS, "PL TOR-12", TORONTO AS IN RO586950; MISSISSAUGA. "AMENDED 1999/05/26, LAND REGISTRAR #17".

PROPERTY REMARKS:

ESTATE/QUALIFIER:

FEE SIMPLE  
LT CONVERSION QUALIFIED

RECENTLY:

RE-ENTRY FROM 13151-0148

PIN CREATION DATE:

1998/12/21

OWNERS' NAMES

4 CD'S INC.

CAPACITY SHARE

BENO

REG. NUM.	DATE	INSTRUMENT TYPE	AMOUNT	PARTIES FROM	PARTIES TO	CERT/ CHKD
<div><div>**EFFECTIVE 2000/07/29</div><div>THE NOTATION OF THE "BLOCK IMPLEMENTATION DATE" OF 1996/11/19 ON THIS PIN**</div><div>**WAS REPLACED WITH THE "PIN CREATION DATE" OF 1998/12/21**</div><div>** PRINTOUT INCLUDES ALL DOCUMENT TYPES AND DELETED INSTRUMENTS SINCE 1998/12/21 **</div><div>**SUBJECT, ON FIRST REGISTRATION UNDER THE LAND TITLES ACT, TO:</div><div>**</div><div>SUBSECTION 44(1) OF THE LAND TITLES ACT, EXCEPT PARAGRAPH 11, PARAGRAPH 14, PROVINCIAL SUCCESSION DUTIES *</div><div>**</div><div>AND ESCHEATS OR FORFEITURE TO THE CROWN.</div><div>**</div><div>THE RIGHTS OF ANY PERSON WHO WOULD, BUT FOR THE LAND TITLES ACT, BE ENTITLED TO THE LAND OR ANY PART OF</div><div>**</div><div>IT THROUGH LENGTH OF ADVERSE POSSESSION, PRESCRIPTION, MISDESCRIPTION OR BOUNDARIES SETTLED BY</div><div>**</div><div>CONVENTION.</div><div>**</div><div>ANY LEASE TO WHICH THE SUBSECTION 70(2) OF THE REGISTRY ACT APPLIES.</div><div>**DATE OF CONVERSION TO LAND TITLES: 1998/12/22 **</div></div>						
RO586950	1981/07/31	TRANSFER		*** DELETED AGAINST THIS PROPERTY ***	LAROIAN CORPORATION INC.	
RO883788	1989/02/23	CHARGE		*** COMPLETELY DELETED ***	THE ROYAL BANK OF CANADA	
RO1168851	1998/04/22	CHARGE		*** DELETED AGAINST THIS PROPERTY *** LAROIAN CORPORATION INC.	CITIZENS BANK OF CANADA	
RO1168852	1998/04/22	ASSIGNMENT GENERAL		*** DELETED AGAINST THIS PROPERTY *** LAROIAN CORPORATION INC.	CITIZENS BANK OF CANADA	
REMARKS: RENTS RE: CHARGE NO. RO1168852						
PR428061	2003/05/01	CHARGE		*** COMPLETELY DELETED *** LAROIAN CORPORATION INC.	LILLEY, KENNETH	
PR434928	2003/05/16	DISCH OF CHARGE		*** COMPLETELY DELETED ***		

NOTE: ADJOINING PROPERTIES SHOULD BE INVESTIGATED TO ASCERTAIN DESCRIPTIVE INCONSISTENCIES, IF ANY, WITH DESCRIPTION REPRESENTED FOR THIS PROPERTY.  
NOTE: ENSURE THAT YOUR PRINTOUT STATES THE TOTAL NUMBER OF PAGES AND THAT YOU HAVE PICKED THEM ALL UP.

LAND  
REGISTRY  
OFFICE #43

13151-0024 (LT)

PAGE 2 OF 2  
PREPARED FOR G2S CONSULTING INC  
ON 2025/01/29 AT 16:19:46

\* CERTIFIED IN ACCORDANCE WITH THE LAND TITLES ACT \* SUBJECT TO RESERVATIONS IN CROWN GRANT \*

REG. NUM.	DATE	INSTRUMENT TYPE	AMOUNT	PARTIES FROM	PARTIES TO	CERT/ CHKD
PR812066	2005/03/01	DISCH OF CHARGE	\$950,000	CITIZENS BANK OF CANADA  *** COMPLETELY DELETED *** LILLEY, KENNETH	4 CD'S INC.  LAROIAN CORPORATION INC.	C
PR812140	2005/03/01	TRANSFER		LAROIAN CORPORATION INC.		
PR812146	2005/03/01	CHARGE		*** COMPLETELY DELETED *** 4 CD'S INC.		
PR1968663	2011/03/01	DISCH OF CHARGE		*** COMPLETELY DELETED *** LAROIAN CORPORATION INC.		
PR4315678	2024/03/26	APL DEPOSIT PLAN		*** COMPLETELY DELETED ***		
43R41335	2024/03/27	PLAN REFERENCE				C

NOTE: ADJOINING PROPERTIES SHOULD BE INVESTIGATED TO ASCERTAIN DESCRIPTIVE INCONSISTENCIES, IF ANY, WITH DESCRIPTION REPRESENTED FOR THIS PROPERTY.  
NOTE: ENSURE THAT YOUR PRINTOUT STATES THE TOTAL NUMBER OF PAGES AND THAT YOU HAVE PICKED THEM ALL UP.

## **Appendix C: Street Directories**

Site		
Address	Property Use	Years Occupied
60 Agnes Street (Northeast portion)	Domljanovic, J	2001
	Franjkovic, Pavo	2001
	Olmstead, E W	2001
	Opacak, Slavko	2001
	Mrsic, Ivan	1991 – 1996
	Popacak, Slavko	1991 – 1996
	Reder, Dragoslav	1991 – 1996
	Fazio, Gaetano	1968 - 1983
66 Agnes Street (North central portion)	Not listed	1983 - 2001
	Curry, Wes	1968 – 1977/1978
70 Agnes Street (North central portion)	Tupe, Al	2001
	Not listed	1983-1996
	Curitti, L	1968 – 1977/1978
	Vierson, Henry	1968
78 Agnes Street (Northwest portion)	Not listed	1968 - 2001
51 Dundas Street West (South portion)	A-1 Copy Centre	1996 – 2001
	Nu Wave Fashions and Gifts	1991
	Not listed	1968 – 1983
53 Dundas Street (South portion)	Vacuums and Sewing Machines Inc.	1996
55 Dundas Street West (South portion)	Nicole Health and Body Spa	1996
	R D Russell Real Estate	1983 – 2001
	Mosto Portugues	1996
	Baird Moving and Storage	1983
	Corporate Moving Services Ltd	1983
	Kronas Real Estate Ltd.	1972/1973 - 1977/1978
	Mississauga Business Machines Ltd.	1977/1978
	Carload Groceteria	1968 - 1972/1973
	Crothers Carson	1968 - 1972/1973
	Oconell, Bernard T	1972/1973
	Welke, A	1972/1973
57 Dundas Street West (South portion)	Bright Ideas	2001
	Vacuum Depot	2001

Agnes Street		
Address	Property Use	Years Occupied
25 Agnes Street ~95 m east	Multi-tenant plaza (jeweler, grocery, self care, tailor)	1991 - 2001
	Home Systems Ltd	1996
	Martin Doors and Windows	1996
41 Agnes Street ~30 m northeast	1293267 Ontario Ltd BOCA Square	2001
111 Agnes Street ~60 m northwest	Ontario March of Dimes	1996 - 2001

Confederation Parkway		
Address	Property Use	Years Occupied
2574 Confederation Parkway ~240 m southwest	Zupet F Construction Co Ltd	1977/1978
2482 Confederation Parkway ~230 m southwest	Silmar	2001
2586 Confederation Parkway ~225 m southwest	Four Season Wildlife Control	1991 – 2001
	Rawleigh Products Distributor	2001
2590 Confederation Parkway ~220 m southwest	Barber	1996 – 2001
3050 Confederation Parkway ~175 m west	Multi-Tenant Commercial (restaurants, salons, offices, florists, realtor etc.)	2001

Dundas Street West		
Address	Property Use	Years Occupied
1 Dundas Street West ~140 m east	Jeweller	1972/1973
2 Dundas Street West ~105 m east	Bank	1977/1978 – 2001
3 Dundas Street West ~130 m east	Clothier	1968 - 1972/1973
11 Dundas Street West ~120 m east	Restaurant	1972/1973
15 Dundas Street West ~110 m east	Multi-tenant Offices	1968 - 2001
19 Dundas Street West ~95 m east	CIYC	20018
	Offices	1968 – 2001
	Bank	1968 – 2001
	Comcare Ltd	1983
21 Dundas Street West ~95 m east	Clothier	1968 – 2001
	Grocery	1977/1978 – 2001
22 Dundas Street West ~95 m east	Appliance Store	1968 - 1972/1973
25 Dundas Street West	Pet Shop	1996

Dundas Street West		
Address	Property Use	Years Occupied
~75 m east	Bank	1991
	Clothier	2001
	Dixon & Schramm Ltd	1977/1978
	Offices	1972/1973
	Innes E L & Co Radio Electric	1968
35 Dundas Street West ~45 m east	Restaurant	1977/1978-2001
	Turf Lawn Care & Maintenance Inc	2001
	Big Apple	1983
	Pharmacy	1972/1973
	Retail	1968
37 Dundas Street West ~35 m east	Offices	1983 – 2001
	Tanning Salon	1996-2001
38 Dundas Street West ~45 m east	Fabric Store	1991
	Video Rental	2001
	Grocery	2001
40 Dundas Street West ~55 m southeast	Anman Coil Laundry	1996 - 2001
	Arco Computers	2001
	Restaurant	2001
	Barber	1983 - 2001
	Kopywell Printing	1991 - 1996
	Retail	1968 - 1991
	Delicatessen	1977/1978 - 1996
	Bakery	1991 - 2001
	Dog Grooming	1983 - 1991
	Realtor	1977/1978
	Bank	1972/1973
	Music Studio	1972/1973
	Smoke Shop	1972/1973
	Shoe store	1968 - 1972/1973
42 Dundas Street West ~40 m southeast	Fabric Store	1996 – 2001
	Cycling Store	1991
	Offices	1968 – 1977/1978
44 Dundas Street West ~35 m southeast	Electrolux Canada Division of CfC Products Ltd	1983 – 2001
	Office	1968 - 1972/1973
46 Dundas Street West ~30 m southeast	Florist	1991 – 1996
47 Dundas Street West 15 m east	Multi-tenant medical/dental	1968 - 2001
48 Dundas Street West ~25 m south	Meat Market	1996 – 2001
	Peggy Law Interiors	1972/1973 - 1977/1978
	Furniture Store	1968 - 1972/1973

Dundas Street West		
Address	Property Use	Years Occupied
56 Dundas Street West ~5 m south	Pharmacy	2001
	Salon	1983 – 1996
58 Dundas Street West ~25 m south	Sooter's	1991 – 2001
	Realtor	1977/1978
	Delcomm Electronics	1977/1978
	Office	1968
59 Dundas Street West (west adjacent)	Grocers	1996-2001
	Bazaar	1983 – 1991
	Video Store	1991
	Photo Studio	1983
	Salon	1977/1978
61 Dundas Street West ~15 m south	Tailor	1977/1978 – 2001
62 Dundas Street West ~25 m south	Manila Foods and Crafts	1991 - 1996
	Analytic TV Service	1977/1978
	Urgency & Analytic Electronics Ltd	1977/1978
	Veterinary	1968
63 Dundas Street West ~15 m south	Retail	1972/1973 – 2001
64 Dundas Street West ~25 m south	Salon	1968 – 2001
65 Dundas Street West ~15 m south	Market	1991 - 1996
	Credit Union	1977/1978
66 Dundas Street West ~25 m south	Offices	1996 – 2001
	Dentist	1977/1978 – 1991
67 Dundas Street West ~15 m south	Jewellers	1996 – 2001
	Framing	1977/1978 – 1991
	Art Gallery	1983
68 Dundas Street West ~25 m southwest	Offices	1977/1978
69 Dundas Street West ~15 m south	Restaurant	1991 – 2001
71 Dundas Street West ~15 m south	Health Studio	1996
	Restaurant	1972/1973 - 2001
73 Dundas Street West ~15 m south	Meat Store	1996
	Poulous Renovations	2001
	Good Guys Pools and Supplies Ltd.	1983
	Solar Pools	1977/1978
	Offices	1972/1973
75 Dundas Street West ~15 m south	Fish Market	1996
	Bakery	2001
	TV Store	1983

Dundas Street West		
Address	Property Use	Years Occupied
	Clothier	1972/1973
77 Dundas Street West ~15 m south	Doctor	1996
	Fabric Store	1991
79 Dundas Street West ~15 m southwest	Billiards	1991 - 1996
	Grocery	1996
	Bowling/Arcade	1968 - 1983
	Police	1968 - 1972/1973
81 Dundas Street West ~30 m southwest	Retail	1968
90 Dundas Street West ~60 m southwest	AnTech Hair Clinic	2001
	An-Tech Research Laboratories	1991 - 1996
	Multi-tenant medical	2001
	Multi-tenant offices	1983 - 2001
	Kinkos	2001
	Belcash Holdings Ltd.	1983
	Complete Building Maintenance and Carpet Cleaning	1983
	Board of Education	1972/1973
93 Dundas Street West ~30 m west	Offices	1977/1978 – 2001
95 Dundas Street West ~50 m west	Traditional Chinese Medicine	2001
	Salon	1996 - 2001
	Tooth Tech Dental Laboratory	1991
	Offices	1968 - 2001
	Driving School	2001
	Security	1983
	Medical	1983
100 Dundas Street West ~90 m southwest	Offices	1972/1973 – 2001
	Sinclair Construction Limited	1972/1973
105 Dundas Street West ~125 m west	Video Rental	1996 - 2001
	Offices	2001
	Security	1996
	Sport Retail	1983
107 Dundas Street West ~140 m west	Travel Agency	1972/1973– 1996
	Salon	1968
110 Dundas Street West ~110 m southwest	Counter Act	2001
	Offices	2001
	Central Library	1968 - 1977/1978
113 Dundas Street West ~120 m southwest	Market	1968 – 2001
123 Dundas Street West ~175 m southwest	Autosport Equipment Ltd – Sport Cars	1972/1973

Dundas Street West		
Address	Property Use	Years Occupied
124 Dundas Street West ~135 m southwest	Optometry	2001
134 Dundas Street West ~190 southwest	Pharmacy	2001
	Ayyran Co	2001
	Multisystem Electronics Ltds	1996
	Video 99	1991 - 2001
	Restaurant	1991 - 2001
139 Dundas Street West ~180 m west	Johnston & Magwood Ltd Tire	1968 - 1972/1973
144 Dundas Street West ~205 m southwest	Crystal Cleaners International	2001
	Annita's Dry Cleaners	1991 - 1996
	Market	2001
	Coffee	2001
	Salon	2001
147 Dundas Street West ~240 m southwest	Tailor	1968 - 1972/1973
150 Dundas Street West ~240 m west	Toronto Township News	1968 - 2001
	Cooksville Review Newspaper	1968 - 1972/1973
	Mississauga Review	1968 - 1972/1973
161 Dundas Street West ~185 m west	Doby Maintenance Sales & Services Ltd.	1968 - 1972/1973
	Peel Blue Print Co	1968 - 1972/1973
	Peel Television & Stereo	1972/1973
	Power Centre	1972/1973
	Salon	1968
165 Dundas Street West ~185 m west	Advance Dry Cleaners	2001
	Offices	1977/1978 - 2001
	Salon	1983 - 2001
	Gym	1991
	Microbus	2001
	Café	2001
	Dentist	2001
	Travel Agency	1991
	Venpower Ltd.	1977/1978 - 1991
	Restaurant	1983 - 1991
	Phil Construction Co Ltd.	1972/1973

Hurontario Street		
Address	Property Use	Years Occupied
2550 Hurontario Street	Multi-tenant Commercial Plaza (i.e., video rental store, dollar store, restaurant, etc.)	1983 - 2001
	Restaurant	1977/1978
	Cooksville Cleaners	1996 - 2001

Huronario Street		
Address	Property Use	Years Occupied
2576 Hurontario Street	Motel and restaurant	1968 - 1972/1973
2580 Hurontario Street ~165 m southeast	Canada Trust Dyna-Temo Systems Inc	2001
	Tele-Call Communications Co.	2001
	Locksmithing	1996
	Action Cleaning SVC	1996
	AJK Graphics Co.	1996
	Call Direct	1996
	Canada Trust Chequewriter Co of Canada	1996
	Dominion Waterproofing	1996
	Eagle Paving Co.	1996
	Security	1996
	Jandci Inc	1996
	Peel Paving Co Ltd.	1996
	Rapid Ride Delivery SVC	1996
	Aardvark Plumbing & Mechanical Ltd.	1991
	Bedferd L & S Towing	1991
	Canadian Descrambler Sales	1991
	Offices	1972/1973 - 2001
	Methflex Inovations Inc.	1991
2581 Hurontario Street ~200 m east	Television Store & Television Repair	1972/1973
	Optometrists	1972/1973
2586 Hurontario Street ~150 m southeast	Convenience Store	1983 – 1991
2596 Hurontario Street ~105 m east	Elmar Seafood Limited	1991
	Mississauga Auto Wholesale Centre	1991
	Mississauga Fish Wholesale Ltd.	1991
	Suny's Gasbar	1991
	Sunoco Service	1972/1973 - 1983
	Holiday Rent-A-Truck System	1977/1978 - 1893
	Keen Eric Ltd.	1977/1978
	Midtown Motors Cooksville	1972/1973
3012 Hurontario Street ~110 m east	Optometry	1977/1978 – 1996
3020 Hurontario Street ~110 m east	Travel Agency	1977/1978 - 1996
	Optometry	1996
	Allstar Car and Truck Rental	1991
	The Gordon Group	1983
	Offices	1983
	Fleuty Funeral Home and Ambulance	1972/1973
3024 Hurontario Street ~150 m east	Passfield Service Station	1972/1973
3025 Hurontario Street	Offices	1972/1973 – 2001

Huronario Street		
Address	Property Use	Years Occupied
~200 m east	Gregory System Ltd.	1996
	MCTU Diagnostics Ltd.	1996
	Mississauga X Ray SVC Ltd.	1977/1978 - 2001
	Excel Bestview Medical Labs	1983 - 1996
	Multitenant Medical	1972/1973 - 2001
	Pharmacy	2001
	Dataprep Canada Limited	1977/1978
	B & Z Construction Co.	1972/1973
	F B M Construction	1972/1973
	G & Z Construction Co.	1972/1973
	Mattress Store	2001
	Tips	2001
	Pharmacy	1977/1978 - 1996
	Tanning	1991 - 1996
3033 Hurontario Street ~220 m east	Pharmacy	1991 - 2001
	Restaurant	1972/1973 - 1983
3035 Hurontario Street ~220 m east	Massage	2001
	Pharmacy	2001
	Realtor	1991
	Restaurant	1977/1978 - 1983
3037 Hurontario Street ~225 m east	Health shop	2001
	Multi-tenant Medical	2001
	Sheers Company	1977/1978
	Sheers Draperies	1972/1973 - 1977/1978
3038 Hurontario Street ~140 m northeast	Retail	1996 - 2001
	Offices	1991 - 2001
	Coffee	1991 - 2001
	Restaurants	1991 - 2001
3039 Hurontario Street ~225 m northeast	Sai Baba Textiles	1996 - 2001
	Boutique	1983
	Autoventure Mississauga	1972/1973
3041 Hurontario Street ~230 m northeast	Factory Outlet Dry Cleaners	2001
	Optical	1996
	Minuteman Press	1983 - 1991
	Credit Union	1977/1978
	Offices	1977/1978
3043 Hurontario Street ~230 m northeast	Tanning	2001
	Offices	1991 - 1996
	TV Store	1977/1978 - 1983
3045 Hurontario Street ~230 m northeast	Zupmar Construction Ltd	1991 – 2001
	Offices	1983 - 1996
3047 Hurontario Street	Multi-tenant Medical	2001

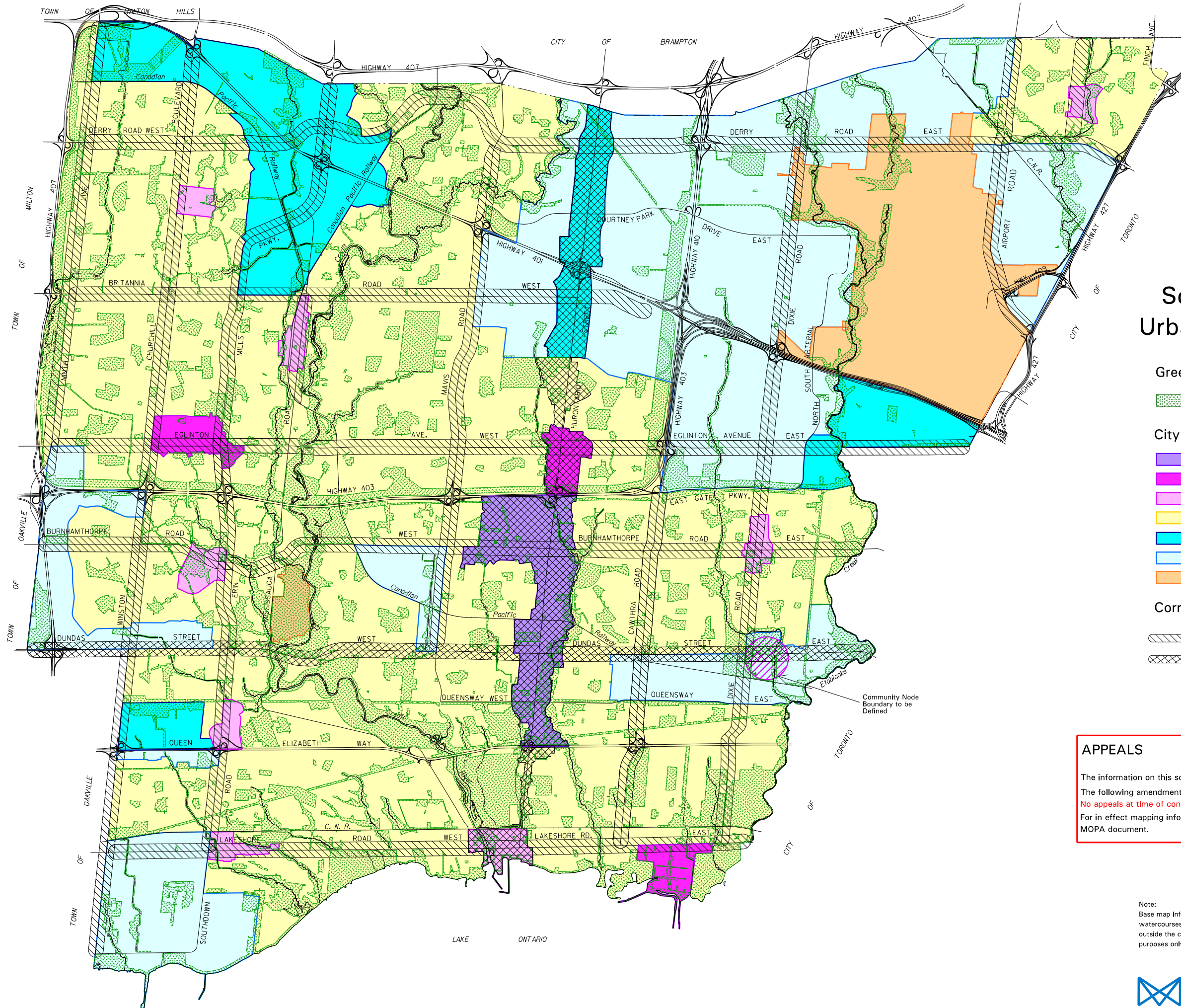
Hurontario Street		
Address	Property Use	Years Occupied
~240 m northeast	Pharmacy	2001
	Dentist	1991 - 1996
	Film Production	1991 - 2001
	Stereo Retail	1983
	Office	1977/1978
3055 Hurontario Street ~245 m northeast	Restaurant	1983 – 2001
3056 Hurontario Street ~160 m northeast	Multi-tenant offices	1977/1978
3057 Hurontario Street ~230 m northeast	Grocery	1996 - 2001
	Teknekron Infoswitch Corporation	2001
	Salon	1983 - 1991
	Beauty Supply	1991
	Radio Shack	1977/1978
3058 Hurontario Street ~165 m northeast	Dental	2001
3059 Hurontario Street ~240 m northeast	Office Equipment	1977/1978 - 2001
3060 Hurontario Street ~170 m northeast	Danitel Ltd.	2001
	Restaurant	1977/1978 – 2001
3061 Hurontario Street ~240 m northeast	Hurontario HiFi	1996 - 2001
	Fabric Store	1991
	Shoe Stores	1983
3062 Hurontario Street ~180 m northeast	Insurance	1991 - 1996
	Beauty Supply	1983 - 1996
	Office	1972/1973 - 1983
3063 Hurontario Street ~240 m northeast	Salon	1972 – 1973 - 2001
	Skincare	1991
	Jennifer's Cleaning Services	1983
3064 Hurontario Street ~180 m northeast	Beauty Store	1996 - 2001
	Realtor	1977/1978 - 1991
3065 Hurontario Street ~245 m northeast	Convenience Store	1977/1978-2001
3066 Hurontario Street ~185 m northeast	Restaurant	1996 - 2001
	Office	1977/1978 – 1983
	Delicatessen	1972/1973
3067 Hurontario Street ~245 m northeast	Music Store	1983 – 2001
	Optician	1972/1973 – 1977/1978
3068 Hurontario Street ~190 m northeast	Beauty store and food market	1996 - 2001
	Restaurant	1977/1978 - 1991
3069 Hurontario Street ~245 m northeast	Hi Tech World	1996 - 2001
	Chiropractor	1972/1973 – 1991
3070 Hurontario Street	A J M P Ghalioungui	1996

Hurontario Street		
Address	Property Use	Years Occupied
~190 m northeast	Maximum Management Co Inc	1991
	Medical office	1977/1978
	Realtor	1972/1973
3071 Hurontario Street ~250 m northeast	Food market	1991 - 2001
	Sport Store	1983
	Optometry	1977/1978
3073 Hurontario Street ~250 m northeast	Restaurant	1977/1978 - 1991
	Bahr Saddlery	1972/1973
	Book Store	1972/1973
	Convenience Store	1972/1973 - 2001

Novar Road		
Address	Property Use	Years Occupied
3004 Novar Road ~105 m southwest	Salon	1996 - 2001
	Sport Store	1972/1973 - 1977/1978
	Travel Agency	1972/1973
3006 Novar Road ~100 m southwest	Barking Dog Productions	1996
	Filtronics Repair	1996
3008 Novar Road ~95 m southwest	Restaurant	1977/1978 - 2001
	Carpet store	1977/1978
	Rayment R Sales	1968 - 1972/1973
3010 Novar Road ~90 m southwest	Sport Retail	1968 - 2001
	Intersound	1977/1978 - 2001
	Shoe Repair	1968 - 1991
3022 Novar Road ~80 m southwest	Travel Agency	1996 – 2001
	Realtor	1972/1973 – 2001

**Appendix D:**  
**Environmental Source Information**





# Schedule 1 Urban System

## Green System

Green System

## City Structure

- Downtown
- Major Node
- Community Node
- Neighbourhood
- Corporate Centre
- Employment Area
- Special Purpose Area

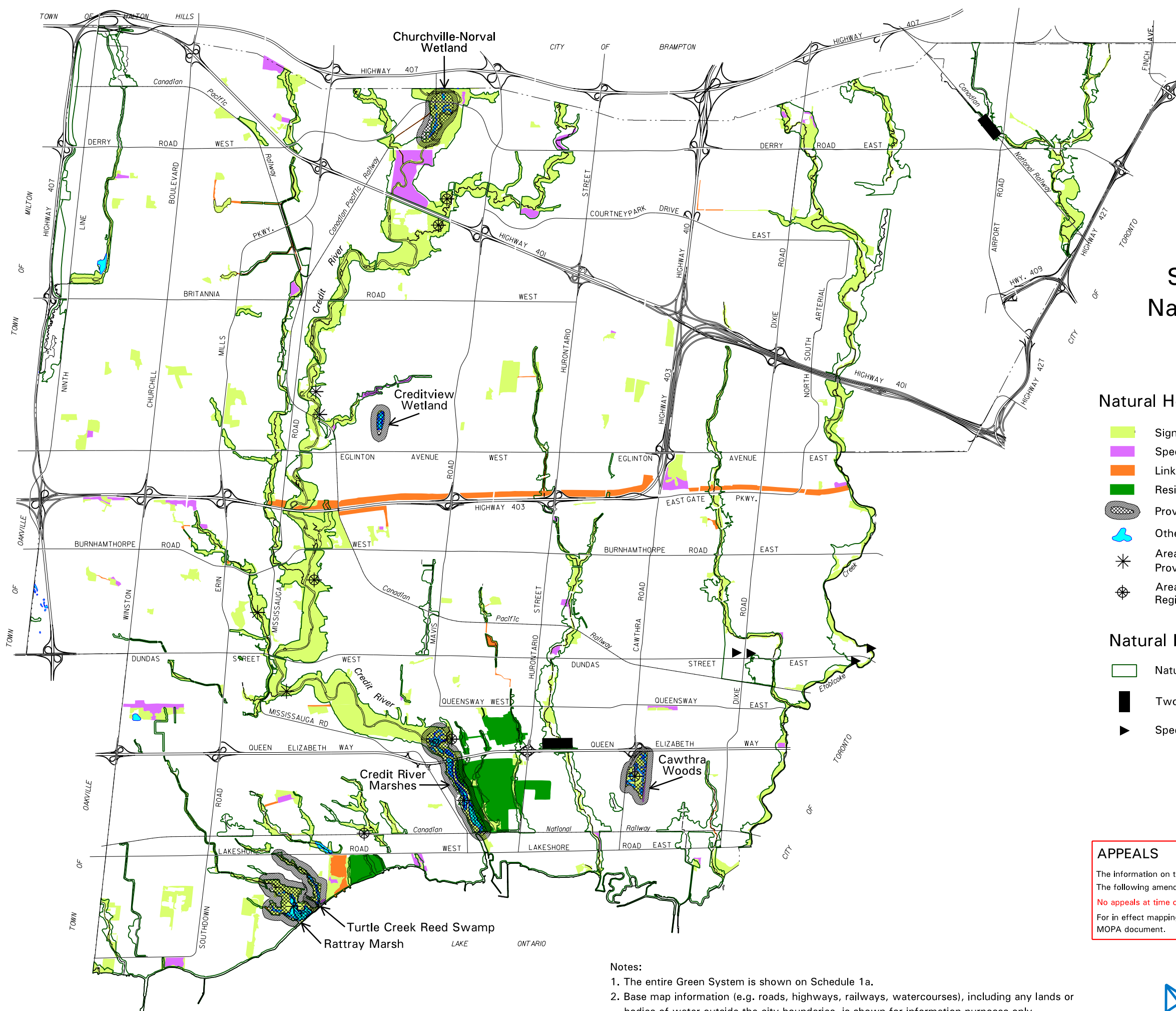
## Corridors

- Corridor
- Intensification Corridor

## APPEALS

The information on this schedule reflects Council adopted amendments.  
 The following amendments are under appeal and affect this schedule:  
**No appeals at time of consolidation.**  
 For in effect mapping information refer to the Consolidation Tables and MOPA document.

**Note:**  
 Base map information (e.g. roads, highways, railways, watercourses), including any lands or bodies of water outside the city boundaries, is shown for information purposes only.



0 500 1000 1500 2000  
metres

## Schedule 3 Natural System

### Natural Heritage System:

- Significant Natural Areas and Natural Green Spaces
- Special Management Areas
- Linkages
- Residential Woodlands
- Provincially Significant Wetlands
- Other Wetlands
- Areas of Natural and Scientific Interest - Provincial Significance
- Areas of Natural and Scientific Interest - Regional Significance

### Natural Hazards:

- Natural Hazards
- Two Zone Floodplain Regulations
- Special Policy Area Floodplain

### APPEALS

The information on this schedule reflects Council adopted amendments. The following amendments are under appeal and affect this schedule:  
**No appeals at time of consolidation.**  
For in effect mapping information refer to the Consolidation Tables and MOPA document.

### Notes:

1. The entire Green System is shown on Schedule 1a.
2. Base map information (e.g. roads, highways, railways, watercourses), including any lands or bodies of water outside the city boundaries, is shown for information purposes only.
3. The limits of the Natural Hazards shown on this Schedule are for illustrative purposes only. The appropriate Conservation Authority should be consulted to determine their actual location.



Ministry of the Environment, Conservation and Parks  
Environmental Assessment and Permissions Division

## Confirmation of Registration

Registration Number: R-009-1295666523

Version Number: 1.0

Date Registration Filed: June 25, 2024 16:42:25

Date Registration Updated: June 25, 2024 16:42:25

INSITU CONTRACTORS INC.

null 48 DAWSON RD  
GUELPH  
ON  
N1H5V1

You have registered, in accordance with Section 20.21 (1) (a) of the Environmental Protection Act, for the taking of water from a water body for creating or maintaining one or more dewatered work areas within a construction site for a single construction project, as prescribed in O. Reg. 63/16.

45 Agnes Street  
Mississauga ON L5B 4J7

Ministry District Office: Halton-Peel District Office

Please note that the water taking for construction site dewatering are subject to the applicable provisions of O. Reg. 245/11 and O. Reg. 63/16. The activity related information provided during the registration process is included as part of the confirmation of registration as schedule 'A'.

Dated on June 25, 2024 16:42:25

Director  
Client Services and Permissions Branch  
Ministry of the Environment, Conservation and Parks  
135 St. Clair Avenue West, 1st Floor Toronto ON M4V 1P5

Any questions related to this registration and the Environmental Activity and the Sector Registry should be directed to:

Client Services and Permissions Branch  
Ministry of the Environment, Conservation and Parks  
Phone:(416) 314-8001  
Toll free: 1-800-461-6290  
Email: [enviroperrmissions@ontario.ca](mailto:enviroperrmissions@ontario.ca)

**Activity Information**Registration Information

Will you be taking water for the purpose of creating or maintaining one or more dewatered work areas within a construction site? Yes

Will you be taking more than 50,000 litres per day on any day? Yes

Will you be taking only storm water? No

Is the site where the activity will occur used for mining, mine development, mine reclamation, pits or quarrying? No

Does the taking involve a transfer from a water basin described in subsection 34.3 (1) of the *Ontario Water Resources Act* or a transfer as defined in subsection 34.5 (1) of that Act? No

Will the water taken be used for human consumption, agriculture or in an industrial or manufacturing process? No

Does the construction site dewatering include discharge to land located within an area that is part of a wellhead protection area and that is identified as a WHPA-A in a source protection plan approved by the Minister under the *Clean Water Act, 2006*? No

Please describe what the site is currently used for.  
Vacant land

Please select the type of project that aligns best with this construction site dewatering registration.  
Construction site dewatering project at a fixed site location



Fixed Site Location Type  
Other

Construction site dewatering project along a linear alignment



Please add a description of the project associated with this registration.  
Construction for condominium

Has a Qualified Person (QP) prepared a water taking plan? Yes

Please provide the Name(s) of the Qualified Person(s) and the date that the water taking plan was prepared.

First Name	Last Name	Company Name (if applicable)	Licence Number(s)	Date Signed
Harry	Oussoren	Insitu Contractors Inc	35036508	2024-06-25

Does the assessment undertaken by the Qualified Person in the water taking plan Yes

indicate that the groundwater taking meets the following requirements:

- When the areas of influence of dewatered work areas do not overlap, the taking of groundwater from each dewatered work area is less than or equal to 400,000 L/day; OR
- When the areas of influence overlap, the combined groundwater taking from the overlapping dewatered work areas is less than or equal to 400,000 L/day.

Has a Qualified Person (QP) prepared a discharge plan?

Yes

Please provide the Name(s) of the Qualified Person(s) and the date that the discharge plan was prepared.

First Name	Last Name	Company Name (if applicable)	Licence Number(s)	Date Signed
Harry	Oussoren	Insitu Contractors Inc.	35036508	2024-06-25

According to the discharge plan, where is the discharge recommended to be directed? (select all that apply)

Discharge to municipal storm sewer(s)

Discharge to municipal sanitary sewer(s)

Please provide additional information if available:

Discharge water to be directed to either the storm sewer or the sanitary sewer depending on discharge agreement direction provided by the municipality which is currently in process.

Has a Qualified Person (QP) included one or more of the following as part of the water taking or discharge plans? (select all that apply)

Monitoring of discharge (flow, chemical parameters, etc.)

## Source Information

On this page you will enter information about each work area you plan to remove water from. Each work area will have its own set of UTM coordinates. You can add each area by clicking on the blue button 'Add Source'." Please select the source type 'Excavation' if you are removing water from an excavated work area without using dewatering wells (i.e. using a sump pump). Please select the source type 'Well' if you will be dewatering the work area using a dewatering well array. Please note the source(s) specified here will each be required to report daily water taking volumes on an annual basis. Registrations can be updated to add sources.

MW Condo

Address

45 Agnes ST, ONTARIO, L5B 4J7

Special Policy Area

### Excavation

Source

Source Type

Excavation

Excavation Name\*

MW Condo

Geographic (GPS) Coordinates (to be provided in Datum NAD83)

Method of Collection	Accuracy Estimate	UTM Zone	UTM East (M)	UTM North (M)
Map	1-10 M(Map)	17	611514.26	4826153.85

Watershed Name	Watershed Use - Annual	Watershed Use - Summer
West Lake Ontario Shoreline	<u>N/A</u>	<u>N/A</u>

Source Protection Area

Source Protection Area (SPA)	Wellhead Protection Area Q1	Wellhead Protection Area Q1
Credit Valley	No	Stress
		<u>N/A</u>

Intake Protection Zone Q1	Intake Protection Zone Q1 -
No	Stress
	<u>N/A</u>

Excavation Related Information

Estimated start date of water taking \*

2024-07-02

## Water Taking Information (Units in Litres)

Descriptor (i.e. Nickname)	Purpose Category	Specific Purpose	Activity	Maximum rate per minute	Maximum number of hours of taking a day	Maximum volume per day	Typical volume per day	Maximum number of days of taking in a year	Earliest month of taking	Latest month of taking
MW Condo	23 - Construction	Construction	Dewatering	96.5	24	138867	138867	365	January	December

If the information for the following fields is not in the QP report or if you do not know the value of these fields, enter "0" in the field.

- Maximum rate per minute
- Maximum number of hours of taking a day
- Maximum volume per day
- Typical Volume per day

## Water Taking Summary

Descriptor (i.e. Nickname)	Purpose Category	Specific Purpose	Activity	Maximum rate per minute	Maximum number of hours of taking a day	Maximum volume per day	Typical volume per day	Maximum number of days of taking in a year	Earliest month of taking	Latest month of taking
Site Name:MW Condo 45 Agnes ST, ONTARIO, L5B 4J7							Special Policy Area:			
Source Name:Excavation						UTM: 17 / 611514.26 / 4826153.85				
MW Condo	23 - Construction	Construction	Dewatering	96.5	24	138867	138867	365	January	December
Calculated Total Maximum Daily Volume (L/day)						138867	Total Number of Excavation Intakes		1	

## Related Approvals

### Water Taking Permissions Information:

---

Do you have a Permit to Take Water for other water taking activities on the site that you are registering? No

Do you have another EASR registration for water taking activities at the site that you are registering? No

The fee for this registration is \$1190

[Français](#)[Back to Hazardous Waste Homepage](#)


Generator Number: ON7306369

## Generator Registration Report

Facility Name	ON7306369-71 King Street West, Suite 401	Submitted Date	Nov 14, 2022
Legal Business Name	Dr Ling Huang Medicine Professional Corporation	Company Name	Dr Ling Huang Medicine Professional Corporation

### Facility Address

#### Location

Municipality  Peel, Regional Municipality of

Address 71 King Street West, Suite 401  
Mississauga, Ontario L5B4A2 Canada

Latitude 51.253775

Longitude -85.3232139

Description

#### Mailing Address

Address 71 King Street West, Suite 401  
Mississauga, Ontario L5B4A2 Canada

### Facility Contact

#### Primary Contact

Name Delta Tracado

Job Title administrator

Emailkingmedicalarts@gmail.com

Primary905-273-4115

Phone

Number

Phone

Extension

Secondary

Phone

Number

Phone

Extension

Additional information

NAICS Code621110IndustryOffices of physicians

NAICS CodeIndustry

(Optional)

NAICS CodeIndustry

(Optional)

Is your facility a waste transfer facility with an Ontario Environmental Compliance Approval to operate a waste transfer or transfer/processing facility?

No

Is your facility a Municipal Hazardous or Special Waste depot operated or exclusively for a municipality or the Crown? Please see section 3.1.1.11 of the Registration Guidance Manual.

No

Is your facility a contaminated facility and all waste results from activities carried on at the facility for the purpose of remediating contaminated soil or other contaminated materials located on, in, or under the site? Please see section 3.1.1.12 of the Registration Guidance Manual.

No

Waste Streams

**Active Waste Streams**

Waste Number	Waste Class	Primary Characterization	Physical State	Specific Gravity	Hazardous Waste Number	Submitted Date
312 P	Pathological Wastes	P - Pathological	Solid		N/A	Nov 12, 2022

1 entries
<<
<
Page 1 of 1
>
>>
5 entries per page

[Terms of Use](#)

[Privacy \(https://rpra.ca/access-and-privacy-code/\)](https://rpra.ca/access-and-privacy-code/)

[Accessibility \(https://rpra.ca/accessibility/\)](https://rpra.ca/accessibility/)

[Services en français \(https://rpra.ca/services-en-francais/\)](https://rpra.ca/services-en-francais/)

[Contact Us](#)

[Français](#)[Back to Hazardous Waste Homepage](#)

Generator Number: ONS0305-1-3grt5y-1

## Generator Registration Report

Facility Name	Spill 77 Dundas st w	Submitted Date	May 17, 2023
Legal Business Name	First Response Environmental 2021 Inc	Company Name	First Response Environmental

### Facility Address

#### Location

Municipality Mississauga, City of



Address 77 Dundas Street West  
Mississauga, Ontario  
L5B 1H7 Canada

Latitude 43.5787483

Longitude -79.6187054

Description

#### Mailing Address

Address 3185 Mavis Rd  
Mississauga, Ontario  
L5C 1T7 Canada

### Facility Contact

#### Primary Contact

Name Steve TYLLIROS

Job Title Operations manager

Email            **steve@first-er.com**

Primary        **4166882879**

Phone

Number

Phone

Extension

Secondary

Phone

Number

Phone

Extension

**Additional information**

---

NAICS Code	<b>913150</b>	Industry	<b>Municipal regulatory services</b>
NAICS Code (Optional)		Industry	
NAICS Code (Optional)		Industry	

Is your facility a waste transfer facility with an Ontario Environmental Compliance Approval to operate a waste transfer or transfer/processing facility?

Is your facility a Municipal Hazardous or Special Waste depot operated or exclusively for a municipality or the Crown? Please see section 3.1.1.11 of the Registration Guidance Manual.

Is your facility a contaminated facility and all waste results from activities carried on at the facility for the purpose of remediating contaminated soil or other contaminated materials located on, in, or under the site? Please see section 3.1.1.12 of the Registration Guidance Manual.

**Waste Streams**

Active Waste Streams

Waste Number	Waste Class	Primary Characterization	Physical State	Specific Gravity	Hazardous Waste Number	Submitted Date
251 L	Oil Skimmings & Sludges	L - Liquid Industrial Waste	Liquid		N/A	May 17, 2023

1 entries

<<

<

Page 1 of 1

>

>>

5 entries per page

[Terms of Use](#)  
[Privacy \(https://rpra.ca/access-and-privacy-code/\)](https://rpra.ca/access-and-privacy-code/)  
[Accessibility \(https://rpra.ca/accessibility/\)](https://rpra.ca/accessibility/)  
[Services en français \(https://rpra.ca/services-en-francais/\)](https://rpra.ca/services-en-francais/)  
[Contact Us](#)

https://hazardouswaste-registrations.rpra.ca/s/generator-details?facilityId=a0i5o000000IW01AAG#waste-stream-section

3/3



[Français](#)

< [Back to Hazardous Waste Homepage](#)

Generator Number: ON001067663

# Generator Registration Report

Facility Name	Dr. Luis Ezqueda Dental Office	Submitted Date	Jun 13, 2024
Legal Business Name	Dr. Luis A. Ezqueda Dentistry Professional Corporation	Company Name	Dr. Luis Ezqueda Dental Office

## Facility Address

### Location

### Mailing Address

Municipality Mississauga, City of



Address 165 Dundas Street West  
201  
Mississauga, Ontario  
L5B 2N6 Canada

Address 165 Dundas Street West  
201  
Mississauga, Ontario  
L5B 2N6 Canada

Latitude 43.5773647

Longitude -79.620537

Description

## Facility Contact

### Primary Contact

Name Dr. Luis Ezqueda  
Job Title Dentist

Email            **luisezqueda@gmail.com**

Primary        **9058049080**

Phone

Number

Phone

Extension

Secondary

Phone

Number

Phone

Extension

**Additional information**

---

NAICS Code	<b>621210</b>	Industry	<b>Offices of dentists</b>
NAICS Code		Industry	
(Optional)			
NAICS Code		Industry	
(Optional)			

Is your facility a waste transfer facility with an Ontario Environmental Compliance Approval to operate a waste transfer or transfer/processing facility?            **No**

Is your facility a Municipal Hazardous or Special Waste depot operated or exclusively for a municipality or the Crown? Please see section 3.1.1.11 of the Registration Guidance Manual.            **No**

Is your facility a contaminated facility and all waste results from activities carried on at the facility for the purpose of remediating contaminated soil or other contaminated materials located on, in, or under the site? Please see section 3.1.1.12 of the Registration Guidance Manual.            **No**

**Waste Streams**

---

Active Waste Streams

Waste Number	Waste Class	Primary Characterization	Physical State	Specific Gravity	Hazardous Waste Number	Submitted Date
312 P	Pathological Wastes	P - Pathological	Solid		N/A	Jun 13, 2024

1 entries

<<

<

Page 1 of 1

>

>>

5 entries per page

- [Terms of Use](#)
- [Privacy \(https://rpra.ca/access-and-privacy-code/\)](https://rpra.ca/access-and-privacy-code/)
- [Accessibility \(https://rpra.ca/accessibility/\)](https://rpra.ca/accessibility/)
- [Services en français \(https://rpra.ca/services-en-francais/\)](https://rpra.ca/services-en-francais/)
- [Contact Us](#)

https://hazardouswaste-registrations.rpra.ca/s/generator-details?facilityId=a0iOG000000VtJZYA0#waste-stream-section

3/3

[Français](#)[Back to Hazardous Waste Homepage](#)

Generator Number: ON5205321

## Generator Registration Report

Facility Name	ON5205321-165 Dundas Street West	Submitted Date	Nov 14, 2022
Legal Business Name	Johnson Business Academy	Company Name	Anderson College of Health Business and Technology

### Facility Address

#### Location

Municipality  Peel, Regional Municipality of

Address 165 Dundas Street West  
Mississauga, Ontario  
L5B2N6 Canada

Latitude 51.253775

Longitude -85.3232139

Description

#### Mailing Address

Address 165 Dundas Street West  
Mississauga, Ontario  
L5B2N6 Canada

### Facility Contact

#### Primary Contact

Name Brenton Barnaby  
Job Title Director of Education

#### Alternate Contact

Name Elizabeth Evangelista  
Job Title Director of Education

Email	<b>brenton.barnaby@andersoncollege.com</b>	Email	<b>melizabeth@nahb.ca</b>
Primary Phone Number	<b>9052736656</b>	Primary Phone Number	<b>905-273-6656</b>
Phone Extension		Phone Extension	
Secondary Phone Number		Secondary Phone Number	
Phone Extension		Phone Extension	

Additional information

NAICS Code	<b>621210</b>	Industry	<b>Offices of dentists</b>
NAICS Code (Optional)		Industry	
NAICS Code (Optional)		Industry	

Is your facility a waste transfer facility with an Ontario Environmental Compliance Approval to operate a waste transfer or transfer/processing facility?	<b>No</b>
---	-----------

Is your facility a Municipal Hazardous or Special Waste depot operated or exclusively for a municipality or the Crown? Please see section 3.1.1.11 of the Registration Guidance Manual.	<b>No</b>
---	-----------

Is your facility a contaminated facility and all waste results from activities carried on at the facility for the purpose of remediating contaminated soil or other contaminated materials located on, in, or under the site? Please see section 3.1.1.12 of the Registration Guidance Manual.	<b>No</b>
--	-----------

Waste Streams

## Active Waste Streams

Waste Number	Waste Class	Primary Characterization	Physical State	Specific Gravity	Hazardous Waste Number	Submitted Date
312 P	Pathological Wastes	P - Pathological	Solid		N/A	Nov 12, 2022
264 T	Photoprocessing Wastes	T - Leachate Toxic	Liquid	1	D011	Nov 12, 2022
264 L	Photoprocessing Wastes	L - Liquid Industrial Waste	Liquid	1	N/A	Nov 12, 2022
148 L	Inorganic Laboratory Chemicals	L - Liquid Industrial Waste	Liquid	14	N/A	Jan 22, 2024
<div> 4 entries &lt;&lt; &lt; Page 1 of 1 &gt; &gt;&gt; 5 entries per page </div>						

[Terms of Use](#)

[Privacy \(https://rpra.ca/access-and-privacy-code/\)](https://rpra.ca/access-and-privacy-code/)

[Français](#)[Back to Hazardous Waste Homepage](#)


Generator Number: ON1927200

## Generator Registration Report

Facility Name	Cooksville Cleaners ON1927200	Submitted Date	Nov 14, 2022
Legal Business Name	1090624 ONTARIO LIMITED	Company Name	COOKSVILLE CLEANERS

### Facility Address

#### Location

Municipality  Peel, Regional Municipality of

Address 2550 HURONTARIO STREET  
Unit #5  
MISSISSAUGA, Ontario  
L5B1N5 Canada

Latitude 51.253775

Longitude -85.3232139

Description

#### Mailing Address

Address 2550 HURONTARIO STREET,  
Unit #5  
MISSISSAUGA, Ontario  
L5B1N5 Canada

### Facility Contact

#### Primary Contact

Name JAGRANT SINGH

Job Title

PRESIDENT

Email

jagrantgill@icloud.com

Primary Phone Number

(905)273-4136

Phone Extension

Secondary Phone Number

Phone Extension

Additional information

NAICS Code	812320	Industry	Dry cleaning and laundry services (except coin-operated)
NAICS Code (Optional)		Industry	
NAICS Code (Optional)		Industry	

Is your facility a waste transfer facility with an Ontario Environmental Compliance Approval to operate a waste transfer or transfer/processing facility?

No

Is your facility a Municipal Hazardous or Special Waste depot operated or exclusively for a municipality or the Crown? Please see section 3.1.1.11 of the Registration Guidance Manual.

No

Is your facility a contaminated facility and all waste results **No** from activities carried on at the facility for the purpose of remediating contaminated soil or other contaminated materials located on, in, or under the site? Please see section 3.1.1.12 of the Registration Guidance Manual.

## Waste Streams

Active Waste Streams						
Waste Number	Waste Class	Primary Characterization	Physical State	Specific Gravity	Hazardous Waste Number	Submitted Date
213 L	Petroleum Distillates	L - Liquid Industrial Waste	Liquid	0.9	N/A	Nov 12, 2022
213 L	Petroleum Distillates	L - Liquid Industrial Waste	Liquid	0.9	N/A	Nov 12, 2022
2 entries    <<    <    Page 1 of 1    >    >>    5 entries per page						

[Terms of Use](#)

[Privacy \(https://rpra.ca/access-and-privacy-code/\)](https://rpra.ca/access-and-privacy-code/)

[Accessibility \(https://rpra.ca/accessibility/\)](https://rpra.ca/accessibility/)

[Français](#)[Back to Hazardous Waste Homepage](#)

Generator Number: ON8880762

## Generator Registration Report

Facility Name	Food Basics Pharmacy # 567	Submitted Date	Nov 14, 2022
Legal Business Name	Metro Ontario Pharmacies Limited	Company Name	Food Basics Pharmacy # 567

### Facility Address

#### Location

Municipality  Peel, Regional Municipality of

Address 2550 Hurontario Street  
Mississauga, Ontario  
L5B1N5 Canada

Latitude 51.253775

Longitude -85.3232139

Description

#### Mailing Address

Address 5559 Dundas St. W.  
Etobicoke, Ontario  
M9B1B9 Canada

### Facility Contact

#### Primary Contact

Name Emil Laswardi  
Job Title Director of Pharmacy Operations

#### Alternate Contact

Name Alvin Kochhar  
Job Title Director of Pharmacy Operations

Email	laswarde@metro.ca	Email	kochhara@metro.ca
Primary Phone Number	416-234-6537	Primary Phone Number	416-234-6572
Phone Extension		Phone Extension	
Secondary Phone Number		Secondary Phone Number	
Phone Extension		Phone Extension	

Additional information

NAICS Code	446110	Industry	Pharmacies and drug stores
NAICS Code (Optional)		Industry	
NAICS Code (Optional)		Industry	

Is your facility a waste transfer facility with an Ontario Environmental Compliance Approval to operate a waste transfer or transfer/processing facility? No

Is your facility a Municipal Hazardous or Special Waste depot operated or exclusively for a municipality or the Crown? Please see section 3.1.1.11 of the Registration Guidance Manual. No

Is your facility a contaminated facility and all waste results from activities carried on at the facility for the purpose of remediating contaminated soil or other contaminated materials located on, in, or under the site? Please see section 3.1.1.12 of the Registration Guidance Manual. No

Waste Streams

**Active Waste Streams**

Waste Number	Waste Class	Primary Characterization	Physical State	Specific Gravity	Hazardous Waste Number	Submitted Date
312 P	Pathological Wastes	P - Pathological	Solid		N/A	Nov 12, 2022

1 entries
<<
<
Page 1 of 1
>
>>
5 entries per page

[Terms of Use](#)

[Privacy \(https://rpra.ca/access-and-privacy-code/\)](https://rpra.ca/access-and-privacy-code/)

[Accessibility \(https://rpra.ca/accessibility/\)](https://rpra.ca/accessibility/)

[Services en français \(https://rpra.ca/services-en-francais/\)](https://rpra.ca/services-en-francais/)

[Contact Us](#)

< [Back to Hazardous Waste Homepage](#)

Generator Number: ON001067863

# Generator Registration Report

Facility Name	G Cruz Medicine Professional Corp	Submitted Date	Jun 25, 2024
Legal Business Name	G. Cruz Medicine Professional Corp	Company Name	G. Cruz Medicine Professional Corp

## Facility Address

<u>Location</u>		<u>Mailing Address</u>	
Municipality	Peel, Regional Municipality of	Address	3024 Hurontario St 310 Mississauga, Ontario L5M 4M4 Canada
Address	3024 Hurontario Street 310 Mississauga, Ontario L5B 4M4 Canada		
Latitude	43.5804853		
Longitude	-79.61726689999999		
Description			

## Facility Contact

<u>Primary Contact</u>	
Name	Margie Cruz
Job Title	Medical Assisstant

Emailmaggiebcruz@yahoo.com

Primary9058482789

Phone

Number

Phone

Extension

Secondary

Phone

Number

Phone

Extension

Additional information

NAICS Code621110

IndustryOffices of physicians

NAICS Code

Industry

(Optional)

NAICS Code

Industry

(Optional)

Is your facility a waste transfer facility with an Ontario Environmental Compliance Approval to operate a waste transfer or transfer/processing facility?

No

Is your facility a Municipal Hazardous or Special Waste depot operated or exclusively for a municipality or the Crown? Please see section 3.1.1.11 of the Registration Guidance Manual.

No

Is your facility a contaminated facility and all waste results from activities carried on at the facility for the purpose of remediating contaminated soil or other contaminated materials located on, in, or under the site? Please see section 3.1.1.12 of the Registration Guidance Manual.

No

Waste Streams

Active Waste Streams

Waste Number	Waste Class	Primary Characterization	Physical State	Specific Gravity	Hazardous Waste Number	Submitted Date
312 P	Pathological Wastes	P - Pathological	Solid		N/A	Jun 25, 2024
312 P	Pathological Wastes	P - Pathological	Solid		N/A	Jun 25, 2024
2 entries						
<div><div>&lt;&lt;</div><div>&lt;</div><div>Page 1 of 1</div><div>&gt;</div><div>&gt;&gt;</div><div>5 entries per page</div></div>						

[Terms of Use](#)  
[Privacy \(https://rpra.ca/access-and-privacy-code/\)](https://rpra.ca/access-and-privacy-code/)  
[Accessibility \(https://rpra.ca/accessibility/\)](https://rpra.ca/accessibility/)  
[Services en français \(https://rpra.ca/services-en-francais/\)](https://rpra.ca/services-en-francais/)  
[Contact Us](#)

[Français](#)[Back to Hazardous Waste Homepage](#)

Generator Number: ON6565649

## Generator Registration Report

Facility Name	ON6565649-312-3024 HURONTARIO STREET	Submitted Date	Nov 14, 2022
Legal Business Name	Dr. Ryan Figueroa Medicine Professional Corporation	Company Name	Cooksville Family Clinic

### Facility Address

#### Location

Municipality  Peel, Regional Municipality of

Address 312-3024 HURONTARIO STREET  
MISSISSAUGA, Ontario  
L5B4M4 Canada

Latitude 51.253775

Longitude -85.3232139

Description

#### Mailing Address

Address 312-3024 HURONTARIO STREET  
MISSISSAUGA, Ontario  
L5B4M4 Canada

### Facility Contact

#### Primary Contact

Name RYAN FIGUEROA  
Job Title FAMILY PHYSICIAN

#### Alternate Contact

Name HAN NGUYEN  
Job Title FAMILY PHYSICIAN

Email	drfigueroa@cooks villeclinic.com	Email	drnguyen@cooks villeclinic.com
Primary Phone Number	9052325006	Primary Phone Number	9052325006
Phone Extension		Phone Extension	
Secondary Phone Number		Secondary Phone Number	
Phone Extension		Phone Extension	

Additional information

NAICS Code	621110	Industry	Offices of physicians
NAICS Code (Optional)		Industry	
NAICS Code (Optional)		Industry	

Is your facility a waste transfer facility with an Ontario Environmental Compliance Approval to operate a waste transfer or transfer/processing facility? No

Is your facility a Municipal Hazardous or Special Waste depot operated or exclusively for a municipality or the Crown? Please see section 3.1.1.11 of the Registration Guidance Manual. No

Is your facility a contaminated facility and all waste results from activities carried on at the facility for the purpose of remediating contaminated soil or other contaminated materials located on, in, or under the site? Please see section 3.1.1.12 of the Registration Guidance Manual. No

Waste Streams

**Active Waste Streams**

Waste Number	Waste Class	Primary Characterization	Physical State	Specific Gravity	Hazardous Waste Number	Submitted Date
312 P	Pathological Wastes	P - Pathological	Solid		N/A	Nov 12, 2022

1 entries
<<
<
Page 1 of 1
>
>>
5 entries per page

[Terms of Use](#)

[Privacy \(https://rpra.ca/access-and-privacy-code/\)](https://rpra.ca/access-and-privacy-code/)

[Accessibility \(https://rpra.ca/accessibility/\)](https://rpra.ca/accessibility/)

[Services en français \(https://rpra.ca/services-en-francais/\)](https://rpra.ca/services-en-francais/)

[Contact Us](#)

[Français](#)[Back to Hazardous Waste Homepage](#)

Generator Number: ONS0306-1-3N6QIH-1

## Generator Registration Report

Facility Name	Spill at 3024 hurontario	Submitted Date	Jul 17, 2023
Legal Business Name	First Response Environmental 2021 Inc	Company Name	First Response Environmental

### Facility Address

#### Location

Municipality **Peel, Regional Municipality of**

**Address** 3024 Hurontario Street  
Mississauga, Ontario  
L5B 4M4 Canada

**Latitude** 43.5804853

**Longitude** -79.61726689999999

**Description**

#### Mailing Address

**Address** 3515 wolfedale rd  
Mississauga, Ontario  
L5C 1V8 Canada

### Facility Contact

#### Primary Contact

**Name** Steve Tylliros

**Job Title** Operations manager

Email

steve@first-er.com

Primary Phone Number

4166882879

Phone Extension

Secondary Phone Number

Phone Extension

Additional information

NAICS Code	913150	Industry	Municipal regulatory services
NAICS Code (Optional)		Industry	
NAICS Code (Optional)		Industry	

Is your facility a waste transfer facility with an Ontario Environmental Compliance Approval to operate a waste transfer or transfer/processing facility?

Is your facility a Municipal Hazardous or Special Waste depot operated or exclusively for a municipality or the Crown? Please see section 3.1.1.11 of the Registration Guidance Manual.

Is your facility a contaminated facility and all waste results from activities carried on at the facility for the purpose of remediating contaminated soil or other contaminated materials located on, in, or under the site? Please see section 3.1.1.12 of the Registration Guidance Manual.

Waste Streams

Active Waste Streams

Waste Number	Waste Class	Primary Characterization	Physical State	Specific Gravity	Hazardous Waste Number	Submitted Date
251 L	Oil Skimmings & Sludges	L - Liquid Industrial Waste	Liquid		N/A	Jul 18, 2023

1 entries

<<

<

Page 1 of 1

>

>>

5 entries per page

[Terms of Use](#)  
[Privacy \(https://rpra.ca/access-and-privacy-code/\)](https://rpra.ca/access-and-privacy-code/)  
[Accessibility \(https://rpra.ca/accessibility/\)](https://rpra.ca/accessibility/)  
[Services en français \(https://rpra.ca/services-en-francais/\)](https://rpra.ca/services-en-francais/)  
[Contact Us](#)

https://hazardouswaste-registrations.rpra.ca/s/generator-details?facilityId=a0iOG00000004V3YAI#waste-stream-section

3/3

[Français](#)[Back to Hazardous Waste Homepage](#)

Generator Number: ON001060317

## Generator Registration Report

Facility Name	TOTAL HEALTH PHARMACY 117	Submitted Date	Sep 7, 2023
Legal Business Name	NSJRX INC.	Company Name	TOTAL HEALTH PHARMACY #117

### Facility Address

#### Location

Municipality Mississauga, City of



Address 3024 Hurontario Street  
308  
Mississauga, Ontario  
L5B 4M4 Canada

Latitude 43.5804853

Longitude -79.61726689999999

Description THIRD FLOOR

#### Mailing Address

Address 3024 Hurontario Street  
308  
Mississauga, Ontario  
L5B 4M4 Canada

### Facility Contact

#### Primary Contact

Name LEONORA CABADING

Job Title PHARMACY MANAGER

Emailgabinoc@yahoo.com

Primary Phone Number9058489955

Phone Extension

Secondary Phone Number

Phone Extension

Additional information

NAICS Code446110IndustryPharmacies and drug stores

NAICS Code (Optional)Industry

NAICS Code (Optional)Industry

Is your facility a waste transfer facility with an Ontario Environmental Compliance Approval to operate a waste transfer or transfer/processing facility?No

Is your facility a Municipal Hazardous or Special Waste depot operated or exclusively for a municipality or the Crown? Please see section 3.1.1.11 of the Registration Guidance Manual.No

Is your facility a contaminated facility and all waste results from activities carried on at the facility for the purpose of remediating contaminated soil or other contaminated materials located on, in, or under the site? Please see section 3.1.1.12 of the Registration Guidance Manual.No

Waste Streams

Active Waste Streams

Waste Number	Waste Class	Primary Characterization	Physical State	Specific Gravity	Hazardous Waste Number	Submitted Date
261 A	Pharmaceuticals	A - Acutely Hazardous Waste Chem.	Solid		P001	Sep 7, 2023
261 A	Pharmaceuticals	A - Acutely Hazardous Waste Chem.	Solid		P001	Sep 7, 2023
261 A	Pharmaceuticals	A - Acutely Hazardous Waste Chem.	Solid		P001	Sep 7, 2023
<div>3 entries</div> <div><div>&lt;&lt;</div><div>&lt;</div><div>Page 1 of 1</div><div>&gt;</div><div>&gt;&gt;</div><div>5 entries per page</div></div>						

Primary Phone Number	905 270 7844	Primary Phone Number	9052707844
Phone Extension		Phone Extension	
Secondary Phone Number		Secondary Phone Number	
Phone Extension		Phone Extension	

Additional information

NAICS Code	621390	Industry	Offices of all other health practitioners
NAICS Code (Optional)		Industry	
NAICS Code (Optional)		Industry	

Is your facility a waste transfer facility with an Ontario Environmental Compliance Approval to operate a waste transfer or transfer/processing facility? **No**

Is your facility a Municipal Hazardous or Special Waste depot operated or exclusively for a municipality or the Crown? Please see section 3.1.1.11 of the Registration Guidance Manual. **No**

Is your facility a contaminated facility and all waste results from activities carried on at the facility for the purpose of remediating contaminated soil or other contaminated materials located on, in, or under the site? Please see section 3.1.1.12 of the Registration Guidance Manual. **No**

Waste Streams

Active Waste Streams						
Waste Number	Waste Class	Primary Characterization	Physical State	Specific Gravity	Hazardous Waste Number	Submitted Date
312 P	Pathological Wastes	P - Pathological	Solid		N/A	Nov 12, 2022
<div>1 entries</div> <div><div>&lt;&lt;</div><div>&lt;</div><div>Page 1 of 1</div><div>&gt;</div><div>&gt;&gt;</div><div>5 entries per page</div></div>						

[Terms of Use](#)  
[Privacy \(https://rpra.ca/access-and-privacy-code/\)](https://rpra.ca/access-and-privacy-code/)  
[Accessibility \(https://rpra.ca/accessibility/\)](https://rpra.ca/accessibility/)  
[Services en français \(https://rpra.ca/services-en-francais/\)](https://rpra.ca/services-en-francais/)  
[Contact Us](#)

[Français](#)[Back to Hazardous Waste Homepage](#)

Generator Number: ON6661544

## Generator Registration Report

Facility Name **ON6661544-3025**  
**Hurontario, Suite 600**

Submitted Date **Nov 14, 2022**

Legal Business Name **6425518 Canada Inc.**

Company Name **Anderson College of Health, Business and Technology**

### Facility Address

#### Location

Municipality **Peel, Regional Municipality of**

Address **3025 Hurontario, Suite 600  
Mississauga, Ontario  
L5A2H1 Canada**

Latitude **51.253775**

Longitude **-85.3232139**

Description

#### Mailing Address

Address **3025 Hurontario, Suite 600  
Mississauga, Ontario  
L5A2H1 Canada**

### Facility Contact

#### Primary Contact

Name **April Lerette**

Job Title **Education Manager**

Email **april.lerette@andersoncollege.com**

Primary Phone Number **9053612380**

#### Alternate Contact

Name **Christine Gregory**

Job Title **MLAT/Coordinator**

Email **christine.gregory@andersoncollege.com**

Primary Phone Number **9053612380**

Phone  
Extension

Phone  
Extension

Secondary  
Phone  
Number

Secondary  
Phone  
Number

Phone  
Extension

Phone  
Extension

Additional information

---

NAICS Code	611690	Industry	All other schools and instruction
NAICS Code (Optional)		Industry	
NAICS Code (Optional)		Industry	

Is your facility a waste transfer facility with an Ontario Environmental Compliance Approval to operate a waste transfer or transfer/processing facility? No

Is your facility a Municipal Hazardous or Special Waste depot operated or exclusively for a municipality or the Crown? Please see section 3.1.1.11 of the Registration Guidance Manual. No

Is your facility a contaminated facility and all waste results from activities carried on at the facility for the purpose of remediating contaminated soil or other contaminated materials located on, in, or under the site? Please see section 3.1.1.12 of the Registration Guidance Manual. No

Waste Streams

---

Active Waste Streams						
Waste Number	Waste Class	Primary Characterization	Physical State	Specific Gravity	Hazardous Waste Number	Submitted Date
312 P	Pathological Wastes	P - Pathological	Solid		N/A	Nov 12, 2022
<div>1 entries</div> <div><div>&lt;&lt;</div><div>&lt;</div><div>Page 1 of 1</div><div>&gt;</div><div>&gt;&gt;</div><div>5 entries per page ▾</div></div>						

[Terms of Use](#)  
[Privacy \(https://rpra.ca/access-and-privacy-code/\)](https://rpra.ca/access-and-privacy-code/)  
[Accessibility \(https://rpra.ca/accessibility/\)](https://rpra.ca/accessibility/)  
[Services en français \(https://rpra.ca/services-en-francais/\)](https://rpra.ca/services-en-francais/)  
[Contact Us](#)

< [Back to Hazardous Waste Homepage](#)

Generator Number: ON001071487

# Generator Registration Report

Facility Name	Castlemore Dental	Submitted Date	Nov 15, 2024
Legal Business Name	Drs D Chudasama & G Chudasama DPC	Company Name	Castlemore Dental

## Facility Address

<u>Location</u>		<u>Mailing Address</u>	
Municipality Mississauga, City of			
<div><div></div></div>			
Address	3037 Hurontario Street A Mississauga, Ontario L5A 2G9 Canada	Address	3037 Hurontario Street A Mississauga, Ontario L5A 2G9 Canada
Latitude	43.5812789		
Longitude	-79.61715749999999		
Description			

## Facility Contact

<u>Primary Contact</u>	
Name	Neil Khanuja
Job Title	Administrator

Emailneilkhanuja@yahoo.ca

Primary Phone Number9057832273

Phone Extension

Secondary Phone Number

Phone Extension

Additional information

NAICS Code	621210	Industry	Offices of dentists
NAICS Code (Optional)		Industry	
NAICS Code (Optional)		Industry	

Is your facility a waste transfer facility with an Ontario Environmental Compliance Approval to operate a waste transfer or transfer/processing facility?	No
---	----

Is your facility a Municipal Hazardous or Special Waste depot operated or exclusively for a municipality or the Crown? Please see section 3.1.1.11 of the Registration Guidance Manual.	No
---	----

Is your facility a contaminated facility and all waste results from activities carried on at the facility for the purpose of remediating contaminated soil or other contaminated materials located on, in, or under the site? Please see section 3.1.1.12 of the Registration Guidance Manual.	No
--	----

Waste Streams

Active Waste Streams

Waste Number	Waste Class	Primary Characterization	Physical State	Specific Gravity	Hazardous Waste Number	Submitted Date
312 P	Pathological Wastes	P - Pathological	Solid		N/A	Nov 15, 2024

1 entries

<<

<

Page 1 of 1

>

>>

5 entries per page

[Terms of Use](#)  
[Privacy \(https://rpra.ca/access-and-privacy-code/\)](https://rpra.ca/access-and-privacy-code/)  
[Accessibility \(https://rpra.ca/accessibility/\)](https://rpra.ca/accessibility/)  
[Services en français \(https://rpra.ca/services-en-francais/\)](https://rpra.ca/services-en-francais/)  
[Contact Us](#)

https://hazardouswaste-registrations.rpra.ca/s/generator-details?facilityId=a0iOG000000iQ5FYAU#waste-stream-section

3/3

[Français](#)[Back to Hazardous Waste Homepage](#)

Generator Number: ON4317633

## Generator Registration Report

Facility Name	ON4317633-3038 Hurontario Street	Submitted Date	Nov 14, 2022
Legal Business Name	A.NARANG DENTISTRY CORPORATION	Company Name	A.NARANG DENTISTRY CORPORATION

### Facility Address

#### Location

Municipality  Peel, Regional Municipality of

Address 3038 Hurontario Street  
Mississauga, Ontario  
L5B3B9 Canada

Latitude 51.253775

Longitude -85.3232139

Description

#### Mailing Address

Address 3038 Hurontario Street,  
unit 4  
Mississauga, Ontario  
L5B3B9 Canada

### Facility Contact

#### Primary Contact

Name Arun Narang  
Job Title Dentist

#### Alternate Contact

Name Edibe Ibraimi  
Job Title Dental Assistant

Email	aknarang@rogers.com	Email	aknarang@rogers.com
Primary Phone Number	9058971166	Primary Phone Number	9058971166
Phone Extension		Phone Extension	
Secondary Phone Number		Secondary Phone Number	
Phone Extension		Phone Extension	

Additional information

NAICS Code	621210	Industry	Offices of dentists
NAICS Code (Optional)		Industry	
NAICS Code (Optional)		Industry	

Is your facility a waste transfer facility with an Ontario Environmental Compliance Approval to operate a waste transfer or transfer/processing facility? No

Is your facility a Municipal Hazardous or Special Waste depot operated or exclusively for a municipality or the Crown? Please see section 3.1.1.11 of the Registration Guidance Manual. No

Is your facility a contaminated facility and all waste results from activities carried on at the facility for the purpose of remediating contaminated soil or other contaminated materials located on, in, or under the site? Please see section 3.1.1.12 of the Registration Guidance Manual. No

Waste Streams

**Active Waste Streams**

Waste Number	Waste Class	Primary Characterization	Physical State	Specific Gravity	Hazardous Waste Number	Submitted Date
312 P	Pathological Wastes	P - Pathological	Solid		N/A	Nov 12, 2022

1 entries
<<
<
Page 1 of 1
>
>>
5 entries per page

[Terms of Use](#)

[Privacy \(https://rpra.ca/access-and-privacy-code/\)](https://rpra.ca/access-and-privacy-code/)

[Accessibility \(https://rpra.ca/accessibility/\)](https://rpra.ca/accessibility/)

[Services en français \(https://rpra.ca/services-en-francais/\)](https://rpra.ca/services-en-francais/)

[Contact Us](#)

[Français](#)[Back to Hazardous Waste Homepage](#)

Generator Number: ON001061285

## Generator Registration Report

Facility Name	The Tooth Corner	Submitted Date	Oct 13, 2023
Legal Business Name	The Tooth Corner	Company Name	The Tooth Corner

### Facility Address

#### Location

Municipality **Peel, Regional Municipality of**

Address **3050 Confederation Parkway  
101  
Mississauga, Ontario  
L5B 3Z6 Canada**

Latitude **43.5779766**

Longitude **-79.6214761**

Description

#### Mailing Address

Address **101-3050 Confederation parkway  
101  
Mississauga, Ontario  
L5B 3Z6 Canada**

### Facility Contact

#### Primary Contact

Name **rand khalaf**

#### Alternate Contact

Name **Rand khalaf**

Job Title	Manager	Job Title	Manager
Email	rand@toothcorner.com	Email	confederation@toothcorner.com
Primary Phone Number	9052321880	Primary Phone Number	9052321880
Phone Extension		Phone Extension	
Secondary Phone Number		Secondary Phone Number	9052321880
Phone Extension		Phone Extension	

Additional information

NAICS Code	621210	Industry	Offices of dentists
NAICS Code (Optional)		Industry	
NAICS Code (Optional)		Industry	

Is your facility a waste transfer facility with an Ontario Environmental Compliance Approval to operate a waste transfer or transfer/processing facility? No

Is your facility a Municipal Hazardous or Special Waste depot operated or exclusively for a municipality or the Crown? Please see section 3.1.1.11 of the Registration Guidance Manual. No

Is your facility a contaminated facility and all waste results from activities carried on at the facility for the purpose of remediating contaminated soil or other contaminated materials located on, in, or under the site? Please see section 3.1.1.12 of the Registration Guidance Manual. No

Waste Streams

Active Waste Streams						
Waste Number	Waste Class	Primary Characterization	Physical State	Specific Gravity	Hazardous Waste Number	Submitted Date
312 P	Pathological Wastes	P - Pathological	Solid		N/A	Oct 13, 2023
1 entries						
<div><div>&lt;&lt;</div><div>&lt;</div><div>Page 1 of 1</div><div>&gt;</div><div>&gt;&gt;</div><div>5 entries per page</div></div>						

[Terms of Use](#)  
[Privacy \(https://rpra.ca/access-and-privacy-code/\)](https://rpra.ca/access-and-privacy-code/)  
[Accessibility \(https://rpra.ca/accessibility/\)](https://rpra.ca/accessibility/)  
[Services en français \(https://rpra.ca/services-en-francais/\)](https://rpra.ca/services-en-francais/)  
[Contact Us](#)

[Français](#)[Back to Hazardous Waste Homepage](#)

Generator Number: ON0359821

## Generator Registration Report

Facility Name	ON0359821-Thomas L. Kennedy Secondary School, 3100 Hurontario Street	Submitted Date	Nov 14, 2022
Legal Business Name	The Peel District School Board	Company Name	The Peel District School Board

### Facility Address

#### Location

Municipality **Peel, Regional Municipality of**



Address **3100 Hurontario Street  
Mississauga, Ontario  
L5B1N7 Canada**

Latitude **51.253775**

Longitude **-85.3232139**

Description **Thomas L. Kennedy  
Secondary School**

#### Mailing Address

Address **5650 Hurontario Street  
Mississauga, Ontario  
L5R1C6 Canada**

### Facility Contact

#### Primary Contact

Name **Josip Bosnjak**

Job Title

Health & Safety Specialist

Email

josip.bosnjak@peelsb.com

Primary Phone Number

905-890-1010

Phone Extension

2494

Secondary Phone Number

Phone Extension

Additional information

NAICS Code	611710	Industry	Educational support services
NAICS Code (Optional)	611110	Industry	Elementary and secondary schools
NAICS Code (Optional)		Industry	

Is your facility a waste transfer facility with an Ontario Environmental Compliance Approval to operate a waste transfer or transfer/processing facility?

No

Is your facility a Municipal Hazardous or Special Waste depot operated or exclusively for a municipality or the Crown? Please see section 3.1.1.11 of the Registration Guidance Manual.

No

Is your facility a contaminated facility and all waste results **No** from activities carried on at the facility for the purpose of remediating contaminated soil or other contaminated materials located on, in, or under the site? Please see section 3.1.1.12 of the Registration Guidance Manual.

## Waste Streams

Active Waste Streams						
Waste Number	Waste Class	Primary Characterization	Physical State	Specific Gravity	Hazardous Waste Number	Submitted Date
264 T	Photoprocessing Wastes	T - Leachable Toxic	Liquid	1	D011	Nov 12, 2022
264 L	Photoprocessing Wastes	L - Liquid Industrial Waste	Liquid	1	N/A	Nov 12, 2022
263 I	Organic Laboratory Chemicals	I - Ignitable	Liquid	1	D001	Nov 12, 2022
252 L	Waste Oils & Lubricants	L - Liquid Industrial Waste	Liquid	1	N/A	Nov 12, 2022

Waste Number	Waste Class	Primary Characterization	Physical State	Specific Gravity	Hazardous Waste Number	Submitted Date
243 D	PCBs	D - PCB Waste	Solid		N/A	Nov 12, 2022
212 B	Aliphatic Solvents	B - Hazardous Waste Chemical	Liquid	1	U122	Mar 28, 2023
148 T	Inorganic Laboratory Chemicals	T - Leachable Toxic	Solid		E118	Nov 12, 2022
148 R	Inorganic Laboratory Chemicals	R - Reactive	Solid		D003	Nov 12, 2022
148 C	Inorganic Laboratory Chemicals	C - Corrosive	Liquid	1	D002	Mar 28, 2023

Waste Number	Waste Class	Primary Characterization	Physical State	Specific Gravity	Hazardous Waste Number	Submitted Date
148 C	Inorganic Laboratory Chemicals	C - Corrosive	Solid		D002	Nov 12, 2022
148 C	Inorganic Laboratory Chemicals	C - Corrosive	Liquid	1	D002	Nov 12, 2022
11 entries << < Page 1 of 1 > >> 25 entries per						

[Terms of Use](#)[Privacy \(https://rpra.ca/access-and-privacy-code/\)](https://rpra.ca/access-and-privacy-code/)[Accessibility \(https://rpra.ca/accessibility/\)](https://rpra.ca/accessibility/)[Services en français \(https://rpra.ca/services-en-francais/\)](https://rpra.ca/services-en-francais/)[Contact Us](#)

Ministry of the Environment,  
Conservation and Parks

Corporate Services Branch  
40 St. Clair Avenue West  
Toronto ON M4V 1M2

Ministère de l'Environnement, de la  
Protection de la nature et des Parcs

Direction des services ministériels  
40, avenue St. Clair Ouest  
Toronto ON M4V 1M2



February 27, 2025

Ms. Caitlin Worona  
G2S Consulting Inc.  
4361 Harvester Road, Unit 12  
Burlington, Ontario L7L 5M4  
caitw@g2sconsulting.com

Dear Caitlin Worona:

**RE: MECP FOI A-2025-00855 - Record Release Letter**

This letter is further to your request made pursuant to the Freedom of Information and Protection of Privacy Act (the Act) relating to 78 Agnes Street, Mississauga.

Attached is a copy of the records.

You may request a review of my decision within 30 days from the date of this letter by contacting the Information and Privacy Commissioner/Ontario at <http://www.ipc.on.ca>. Please note there may be a fee associated with submitting the appeal.

If you have any questions regarding this matter, contact Tara Hachey at [tara.hachey@ontario.ca](mailto:tara.hachey@ontario.ca).

Yours truly,

A handwritten signature in cursive script that reads "Tara Hachey".

For:

Josephine DeSouza  
Manager, Access, and Privacy Office

Attachment

**Page 1**

**is withheld pursuant to section  
est retenue en vertu de l'article**

**N/R**

**of the Freedom of Information and Protection of Privacy Act  
de la Freedom of Information and Protection of Privacy Act**

## Post Inspection Compliance Checklist

School Name

Date for Compliance Reminder Telephone Call

Learning Jungle.

<u>Actions Required Items</u>	<u>Date Due</u>	<u>Date Received</u>
Flushing Records		N/A
Flushing Written Procedure		N/A
Flushing as Required		N/A
Sample Record		N/A
Written Sample Procedure		N/A
Sample Results		N/A
Written Lab Procedures		N/A
Laboratory Services Notification (LSN)		N/A

\* Note: Create bring forward dates in Outlook for Actions Required

**Darby, Ann (ENE)**

---

**From:** Pahai Kuo [pkuo@learningjungle.com]  
**Sent:** October 10, 2008 3:03 PM  
**To:** Darby, Ann (ENE)  
**Subject:** Re: Ontario Regulation 243/07 - Inspection  
**Attachments:** LJS Cooksville - LSN-243-07.Oct-2008.pdf

Hello Anne:

Kindly note that we are in receipt of your letter date September 5, and have worked on the Actions Required for follow up of the Water Testing for lead. Our laboratory, the York-Durham Regional Environmental Lab provided us with instructions which we complied with at that point in time. We will continue to receive guidance from the Lab and work accordingly.

We will continue to monitor on an annual basis for lead and we will retain for our records any information that is required.

Please also note that LSN forms for Learning Jungle School have been submitted by e-mail to reg170 e-mail address from the Ministry of the Environment. Attached here for your reference.

I trust that everything is satisfactory.

Kindest regards,

Pahai Kuo

On Tue, Aug 19, 2008 at 1:03 PM, Pahai Kuo <pkuo@learningjungle.com> wrote:  
 Hello Anne:

Sorry for the delay in getting back to you. Here are some responses to your questions below:

1. the date that the building was constructed and/or the date that the plumbing was installed in writing;
  1. This is an old building, so we flush daily for lead.
2. source of your drinking water in writing (for example municipal or well water);
  1. Our water supply is municipal
3. log sheets for flushing – Months of July and June (please see the at a glance guides for proper record keeping methods);
  1. Attached are the log sheets.
4. any written procedures which provide direction to operators for flushing and/or sampling (including any written instructions from the lab);
  1. Attached are the procedures for flushing of lead. - 3 pages.
5. lab results (the results of the analysis of your water samples from the lab);
  1. Attached are the results of testing this year.
6. chain of custody form (details when you took your samples – is a record of who handled the sample between when it was taken and when it made it to the lab); and
  1. As the owner/operator I picked up the samples and the record of the sampling and submitted to the Testing Lab.
7. sample records (detailing where, when, and who took the sample, and also ensure that you record on the record the approximate amount of time that the water was standing in the pipes unused prior to

taking your first sample.); -

1. As above. We do not keep track of this information.

Regards,  
Pahai

On Fri, Aug 15, 2008 at 2:15 PM, Jeanine Kaps <jkaps@learningjungle.com> wrote:

----- Forwarded message -----

From: **Darby, Ann (ENE)** <Ann.Darby@ontario.ca>

Date: Fri, Aug 15, 2008 at 11:15 AM

Subject: Ontario Regulation 243/07 - Inspection

To: jkaps@learningjungle.com

Hello Janine,

Thanks for taking the time to speak with me today.

The Ministry of the Environment has commenced a telephone inspection program to assess compliance with Ontario Regulation 243/07, and to ensure that all schools, private schools, and day nurseries are taking the necessary action to safeguard against the potential consumption of elevated levels of lead in drinking water.

As discussed on the phone this afternoon, I have scheduled a telephone inspection with you to discuss O. Reg. 243/07 on **Thursday, August 21, 2008 at 1:30 pm.**

In order to make the inspection as straightforward as possible, I will require you to forward some documentation to me in advance of the inspection. As soon as possible, could you please forward the following information (if available):

1. the date that the building was constructed and/or the date that the plumbing was installed in writing;
2. source of your drinking water in writing (for example municipal or well water);
3. log sheets for flushing – Months of July and June (please see the at a glance guides for proper record keeping methods);
4. any written procedures which provide direction to operators for flushing and/or sampling (including any written instructions from the lab);
5. lab results (the results of the analysis of your water samples from the lab);
6. chain of custody form (details when you took your samples – is a record of who handled the sample between when it was taken and when it made it to the lab); and
7. sample records (detailing where, when, and who took the sample, and also ensure that you record on the record the approximate amount of time that the water was standing in the pipes unused prior to

taking your first sample.);

When forwarding this documentation, please send it to the fax number 416-212-7576, to the attention of Ann Darby. Also, **please ensure that I receive the above documentation by August 20, 2008** so that I have a chance to review it before we chat on Thursday, August 21<sup>st</sup>.

Furthermore, I've included the link to the Ministry of the Environment website, which details the requirements of Regulation 243/07 and can be found at <http://www.ontario.ca/ONT/portal51/drinkingwater/General?docId=177450&lang=en>. I find the at-a-glance guides to be particularly helpful as it will give you a rundown of flushing and sampling requirements that are subject to Regulation 243. I have also attached a variety of guidance material for your reference.

If you have any questions at all relating to the above, please don't hesitate to contact me at any time.

Thanks again for your cooperation and assistance, and I look forward to speaking with you soon.

**Ann Darby**

Facilities Drinking Water Inspector

Safe Drinking Water Branch

Ministry of the Environment

Tel: (416) 314-0638

Fax: (416) 212-7576

[ann.darby@ontario.ca](mailto:ann.darby@ontario.ca)

Provincial Officer of Ontario Badge # 1355



Please consider the environment before printing this email note

10/10/2008

000005

--

Learning Jungle School  
Phone:(416) 227-0461  
Mobile:(416) 875-8492  
Skype:pahaikuo

--

Learning Jungle School  
Phone:(416) 227-0461  
Mobile:(416) 875-8492  
Skype:pahaikuo



Ministry of  
the Environment

**Laboratory Services Notification (LSN)**  
**Schools, Private Schools and Day Nurseries**  
**(O. Reg. 243/07)**

**Instructions**

Please complete this form and fax/email directly to:

Ministry of the Environment  
Drinking Water Programs Branch

Fax: 416-314-8716

Email: reg170\_formsubmission.moe@ontario.ca

If you require assistance in completing the form, please call 1-866-793-2588 (toll free).

The most current version of this form is posted on the Ministry of the Environment web site at [www.ene.gov.on.ca](http://www.ene.gov.on.ca)

**Form Submission Information (please check one)**

☒ This is my first submission of the Laboratory Services Notification Form (LSN) to the Ministry.  
Please complete sections 1, 2, 3 and 4.

☐ I wish to notify the Ministry that I am changing licensed laboratories for my drinking-water testing.  
Please complete sections 1 and 4.

**Section 1: Schools, Private Schools and Day Nurseries Information**

Name of School/Day Nursery

Learning Jungle School - Cooksville Campus

Type

☐ School

☐ Private School

☒ Day Nursery

Ministry of Education SFIS No.

-

Children and Youth Services Identification No.

0003557

Location of School/Day Nursery  
Street No. and Name

78 Agnes Street

Unit/Suite

Rural Route

Lot/Part/Block/Section

Concession/Plan

City/Town/Municipality

Mississauga

Province

ONTARIO

Postal Code

L5B 1J7

Business Telephone No. (including area code)

905 273-7023

Fax No. (including area code)

416 229-0381

Contact Information

Last Name

Chang

First Name

Barbara

Position

Director

Telephone No. (including area code)

905 273-7023

ext.

Fax No. (including area code)

416 229-0381

Email Address

bchang@learningjungle.com

Comments

If Barbara is unavailable, call Pahai Kuo: (416) 227-0461 x543

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)****Section 2: Source of Drinking Water Supply (if known)**

Name of Municipal Drinking Water System (MRDWS) which supplies school/day nursery drinking water Peel Region water supply.	MRDWS No. (for ministry staff only)
---	-------------------------------------

**Section 3: School/Day Nursery Operator Information**

Legal Name of School/Day Nursery Operation (i.e. School Board)

2096886 Ontario Inc.

Operator Contact Name

Pahai Kuo

Street No. and Name 45 Sheppard Avenue East	Unit/Suite 900	Rural Route	Lot/Part/Block/Section	Concession/Plan
City/Town/Municipality Toronto	Province ONTARIO			Postal Code M2N 5W9
Telephone No. (including area code) 416 227-0461	Fax No. (including area code) 416 229-0381			
Email Address pkuo@learningjungle.com				

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)****Section 4: Identification of Licensed Laboratory and Lead Testing**

O. Regulation 243/07 (Subsection 5(2)) requires the identification of any contracted licensed laboratory(s) hired to perform lead testing.

Drinking water system owners must complete and submit this form to the Ministry prior to submitting drinking water samples to your contracted licensed laboratory for testing. Once you have submitted this form, it does not have to be re-submitted unless you take your samples to a different licensed laboratory for testing. The listing of licensed laboratories can be found on the following website: <http://www.ene.gov.on.ca/envision/water/sdwa/licensedlabs.htm>

Failure to notify the parties in accordance with the Regulation and/or submission of false information constitutes an offence.

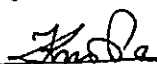
Your licensed laboratory can assist with completing this section of the form.

**Name/Contact Information of Licensed Laboratory Performing Lead Testing**

Laboratory Name York-Durham Regional Environmental Laboratory			Licence Number 2238	
Street No. and Name 901 McKay Road	Unit/Suite	City/Town/Municipality Pickering	Province ONTARIO	Postal Code L1W 3A3

Please specify additional testing identified in MOE (Certificate of Approval, Order or Direction)

I declare that the information provided on this form is accurate.

Prepared by (print name) Pahai Kuo	Signature 	Date (yyyy/mm/dd) 2008/10/06	Telephone No. (including area code) 416 227-0461
---------------------------------------	--	---------------------------------	---

Collection of information on this form is done in accordance with the *Safe Drinking Water Act* (SDWA, 2002) and its regulations. Information gathered herein, including personal information, is governed by the *Freedom of Information and Protection of Privacy Act* (FIPPA) and may be disclosed to other government agencies (including municipal health unit employees) pursuant to 'Section 42' of the FIPPA for the consistent purpose of administering any Act or program that pertains to drinking water safety. For questions and concerns, please contact the Ministry of the Environment at 1-866-793-2588.

Ministry of the Environment

Safe Drinking Water Branch

19th Floor  
2 St. Clair Ave W  
Toronto ON M4V 1L5

Ministère de l'Environnement

Direction du contrôle de la qualité de l'eau  
potable

19<sup>e</sup> étage  
2, avenue St. Clair Ouest  
Toronto ON M4V 1A6



*September 5, 2008*

*Pahai Kuo, Owner  
Learning Jungle School  
78 Agnes Street  
Mississauga, ON  
L5B 1J7*

*Dear Mr. Kuo,*

**Re: O. Reg. 243/07 Inspection Report – *Learning Jungle School***

Enclosed is the above mentioned report of the inspection that began on August 21, 2008, by Ann Darby, Provincial Officer from the Ministry of the Environment.

The inspection report documents your facility's compliance with Ontario Regulation 243/07. Items listed under the heading "*Actions Required*" should be reviewed to ensure actions are taken within the timeframes listed.

Please note that "*Actions Required*" are linked to incidents of non-compliance with regulatory requirements contained within a Regulation.

If you have any questions or concerns, please feel free to contact me.

Yours truly,

Ann Darby, Provincial Officer  
Safe Drinking Water Branch  
Phone: (416) 314-0638  
Fax: (416) 212-7576

encl.

cc: Peel Public Health  
44 Peel Centre Drive, Suite 102  
Brampton, ON L6T 4B5

Ministry of Children and Youth Services, Central West Region  
6733 Mississauga Road, Suite 200  
Mississauga, Ontario L5N 6J5

Ministry of the Environment

Safe Drinking Water Branch

19th Floor  
2 St. Clair Ave W  
Toronto ON M4V 1L5

Ministère de l'Environnement

Direction du contrôle de la qualité de l'eau  
potable

19<sup>e</sup> étage  
2, avenue St. Clair Ouest  
Toronto ON M4V 1A6



*September 5, 2008*

*Jeanine Kaps, Supervisor  
Learning Jungle School  
78 Agnes Street  
Mississauga, ON  
L5B 1J7*

*Dear Ms. Kaps,*

**Re: O. Reg. 243/07 Inspection Report – *Learning Jungle School***

Enclosed is the above mentioned report of the inspection that began on August 21, 2008, by Ann Darby, Provincial Officer from the Ministry of the Environment.

The inspection report documents your facility's compliance with Ontario Regulation 243/07. Items listed under the heading "*Actions Required*" should be reviewed to ensure actions are taken within the timeframes listed.

Please note that "*Actions Required*" are linked to incidents of non-compliance with regulatory requirements contained within a Regulation.

If you have any questions or concerns, please feel free to contact me.

Yours truly,

Ann Darby, Provincial Officer  
Safe Drinking Water Branch  
Phone: (416) 314-0638  
Fax: (416) 212-7576

encl.

cc: Peel Public Health  
44 Peel Centre Drive, Suite 102  
Brampton, ON L6T 4B5

Ministry of Children and Youth Services, Central West Region  
6733 Mississauga Road, Suite 200  
Mississauga, Ontario L5N 6J5



**Ministry of the Environment**

**R243 LEARNING JUNGLE SCHOOL (0003557)**

**Drinking Water Inspection Report**

<b>DW Facility Number:</b>	500067679
<b>Inspection Number:</b>	1-6VY83
<b>Date of Inspection:</b>	Aug 21, 2008
<b>Inspected By:</b>	Ann Darby

**OWNER INFORMATION:**

Company Name: LEARNING JUNGLE SCHOOL  
Street Number: 78 Unit Identifier:  
Street Name: AGNES St  
City: MISSISSAUGA  
Province: ON Postal Code: L5B 1J7

**CONTACT INFORMATION**

Type: Main Contact Name: Jeanine Kaps  
Phone: (905) 273-7023 Fax: (416) 229-0381  
Email: jkaps@learningjungle.com  
Title: Supervisor

Type: Owner Name: Pahai Kuo  
Phone: (905) 273-7023 Fax: (416) 229-0381  
Email: pkuo@learningjungle.com  
Title: Owner

**INSPECTION DETAILS:**

DW Name: R243 LEARNING JUNGLE SCHOOL (0003557)  
DW Address: 78 AGNES ST  
County/District: Mississauga  
District/Area Office: Halton-Peel District  
DW Facility Number: 500067679  
Inspection Type: Announced  
Inspection Number: 1-6WY83  
Date of Inspection: Aug 21, 2008  
Date of Previous Inspection:

**DRINKING WATER COMPONENTS DESCRIPTION**

Site (Name): Learning Jungle School  
Type: Other Sub Type:  
Comments:

Learning Jungle School is a day nursery and is regulated under Ontario Regulation 243/07 (Schools, Private Schools and Day Nurseries) made under the Safe Drinking Water Act, 2002 (SDWA). The facility was constructed prior to January 1, 1990 and is supplied by municipal drinking water.

## INSPECTION SUMMARY

### INTRODUCTION

- \* The primary focus of this report is to assess compliance with the flushing, sampling and record keeping requirements of Ontario Regulation 243/07. This Regulation was created to provide a safeguard against the potential consumption of elevated levels of lead in drinking water at schools, private schools and day nurseries in Ontario.

### DISTRIBUTION SYSTEM

- \* All or part of the plumbing that serves the building that houses the facility was installed before January 1, 1990.

At the time of the inspection, Jeanine Kaps, Supervisor, informed the ministry that the plumbing in Learning Jungle School pre-dates January 1, 1990.

- \* Flushing of the plumbing was conducted for all or part of the inspection period.

A review of the flushing records, which were e-mailed to the ministry on August 19, 2008, indicated that daily flushing was conducted.

- \* The plumbing was flushed at the start of each day at the required time.

At the time of the inspection, Ms. Kaps informed the ministry that students begin to arrive at the facility for the day at 7:00 am. Upon review of the flushing records which were e-mailed to the ministry on August 19, 2008, it was noted that flushing was consistently completed by 7:00 am daily, and therefore flushing was conducted in accordance with section 4(2) of O. Reg. 243/07.

- \* Daily flushing of the plumbing was conducted in accordance with the procedure outlined in section 4(3) of O. Reg. 243/07.

At the time of the inspection, Ms. Kaps informed the ministry that daily flushing activities at Learning Jungle School consist of a five (5) minute flush of all cold water taps located within the facility. A review of the flushing protocol, which was e-mailed to the ministry on August 19, 2008, indicated that cold water faucets in Learning Jungle School are located in the kitchen, pre-school washroom, toddler washroom, school-age washroom, and in the staff washroom. The ministry confirmed that all faucets which may commonly provide potable drinking water to children under the age of eighteen (18) are accounted for in the daily flushing protocol, and therefore flushing was conducted in accordance with section 4(3) of O. Reg. 243/07.

- \* Records were made of the date, time and name of the person who performed and/or verified the daily flushing.

A review of the flushing records which were e-mailed to the ministry on August 19, 2008, indicated that Learning Jungle School is flushing daily as required. The flushing records contained the date, time, location and the name of the person conducting the flushing. The facility also included a legend on the flushing record to identify the locations of all of the cold water taps that are incorporated into the flushing protocol. The operator was also diligent with ensuring that days in which flushing did not occur, such as holidays, were documented on the flushing record. Thus the flushing records were maintained in accordance with section 4(4) of O. Reg. 243/07.

### WATER QUALITY MONITORING

**WATER QUALITY MONITORING**

- \* Annual lead samples were taken at this facility.

The sampling records, which were e-mailed to the ministry on August 21, 2008, indicated that drinking water samples were taken from Learning Jungle School on September 18, 2007. The samples were submitted for analysis to York-Durham Regional Environmental Laboratory in Pickering, Ontario, which is a laboratory that is licensed by the Ministry of the Environment to analyze drinking water samples for lead. Both the flushed and the standing sample were found to be below the Drinking Water Quality Standard for lead (10 µg/L).

Drinking water samples were collected from Learning Jungle School for the 2008 sampling period on May 20, 2008, and were also submitted for analysis to York-Durham Regional Environmental Laboratory in Pickering, Ontario. Both the flushed and the standing sample were found to be below the Drinking Water Quality Standard for lead (10 µg/L).

- \* Annual lead sampling at this facility was conducted in accordance with section 5(2) of O.Reg. 243/07.

At the time of the inspection, Ms. Kaps informed the ministry that both the 2007 and 2008 annual samples were collected from the kitchen tap. Ms. Kaps collected the 2007 standing and flushed samples on September 18, 2007, at 6:45 am and 7:20 am respectively, after the water had been standing in the plumbing for a period of approximately twelve (12) hours. Ms. Kaps collected the 2008 standing and flushed samples on May 20, 2008, at 6:55 am and 7:30 am respectively, after the water had been standing in the plumbing for a period of approximately thirty-six (36) hours.

At the time of the inspection, Ms. Kaps confirmed that the standing sample consisted of the first water that came out of the tap. The flushed sample was collected after the water had been flushed from the tap for five (5) minutes, and then left standing in the plumbing until a period of thirty (30) minutes had elapsed. Thus, the 2007 and 2008 annual samples were collected in accordance with section 5(2) of O. Reg. 243/07.

- \* Sampling records were made of the date, time, standing period estimate, location, and the name of the person who took each sample.

A review of the sampling records, which were e-mailed to the ministry on August 21, 2008, indicated that the records were maintained in accordance with Section 5(2)(12) of O. Reg. 243/07. The 2007 and 2008 sampling records contained the dates and times that the samples were collected, the location from where the samples were collected, the name of the individual who collected the samples, and an estimate of the amount of time that the water was standing in the plumbing prior to taking the first sample.

- \* Samples collected from this facility were not handled in accordance with laboratory instructions.

At the time of the inspection, Ms. Kaps informed the ministry that she was not aware of any instructions provided to Learning Jungle School by York-Durham Regional Environmental Laboratory. Ms. Kaps confirmed with the ministry that samples were taken in accordance with section 5(2) of O. Reg. 243/07, and were submitted to the laboratory in person.

- \* The operator did not ensure that a Laboratory Services Notification that identified the laboratory which conducted the testing for lead was submitted to the Ministry.

A Laboratory Services Notification (LSN) was submitted to the ministry on September 19, 2007; however, the LSN was not submitted prior to taking the lead samples as required by section 5(5) of O. Reg. 243/07. The facility has retained the services of York-Durham Regional Environmental Laboratory, which is a laboratory that is licensed by the Ministry of the Environment to analyze drinking water samples for lead.

**WATER QUALITY MONITORING**

- \* Required documents were available without charge during normal business hours at the facility.

At the time of the inspection, Ms. Kaps informed the ministry that records of flushing and sampling and a copy of O. Reg. 243/07 are made available to the public without charge during normal business hours at Learning Jungle School as per section 8 of O. Reg. 243/07.

- \* The operator indicated that records of flushing and testing will be kept for at least six (6) years.

Ms. Kaps informed the ministry that all required documents will be retained at Learning Jungle School for at least six (6) years as per section 9 of O. Reg. 243/07.

**NON-COMPLIANCE WITH REGULATORY REQUIREMENTS AND ACTIONS REQUIRED**

This section provides a summary of all non-compliance with regulatory requirements identified during the inspection period, as well as actions required to address these issues. Further details pertaining to these items can be found in the body of the inspection report.

**1. Samples collected from this facility were not handled in accordance with laboratory instructions.**

At the time of the inspection, Ms. Kaps informed the ministry that she was not aware of any instructions provided to Learning Jungle School by York-Durham Regional Environmental Laboratory. Ms. Kaps confirmed with the ministry that samples were taken in accordance with section 5(2) of O. Reg. 243/07, and were submitted to the laboratory in person.

**Action(s) Required:**

Learning Jungle School shall obtain instructions from the laboratory for all future annual sampling as per section 5(4) of O. Reg. 243/07, and shall collect and handle all future samples in accordance with the instructions provided from the laboratory.

**2. The operator did not ensure that a Laboratory Services Notification that identified the laboratory which conducted the testing for lead was submitted to the Ministry.**

A Laboratory Services Notification (LSN) was submitted to the ministry on September 19, 2007; however, the LSN was not submitted prior to taking the lead samples as required by section 5(5) of O. Reg. 243/07. The facility has retained the services of York-Durham Regional Environmental Laboratory, which is a laboratory that is licensed by the Ministry of the Environment to analyze drinking water samples for lead.

**Action(s) Required:**

No further actions are required. Learning Jungle School is reminded to submit an updated LSN to the ministry in the event that the facility retains the services of a new licensed laboratory, and shall submit the updated LSN prior to collecting lead samples, as per section 5(5) of O. Reg. 243/07.

**SUMMARY OF BEST PRACTICE ISSUES AND RECOMMENDATIONS**

This section provides a summary of all best practice issues identified during the inspection period. Details pertaining to these items can be found in the body of the inspection report. Best Management Practices are recommendations and not mandatory requirements, but may lead to safe drinking water for the consumer.

In the interest of continuous improvement in the interim, it is recommended that owners and operators develop an awareness of the following practices and consider measures to implement them so that all drinking water facilities continuously improve their processes.

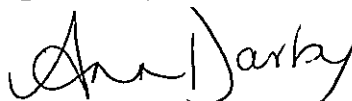
Not Applicable

## SIGNATURES

Inspected By:

Ann Darby

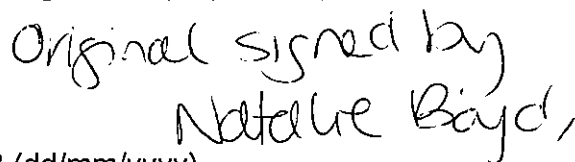
Signature: (Provincial Officer):



Reviewed &amp; Approved By:

Natalie Boyd

Signature: (Supervisor):



Review &amp; Approval Date: 08/09/2008 (dd/mm/yyyy)

Sept 5/08

Note: This inspection does not in any way suggest that there is or has been compliance with applicable legislation and regulations as they apply or may apply to this facility. It is, and remains, the responsibility of the owner and/or operating authority to ensure compliance with all applicable legislative and regulatory requirements.

**Darby, Ann (ENE)**

---

**From:** Jeanine Kaps [jkaps@learningjungle.com]  
**Sent:** August 21, 2008 3:37 PM  
**To:** Darby, Ann (ENE)  
**Cc:** Pahai Kuo; Barbara Chang  
**Subject:** Re: Ontario Regulation 243/07 - Inspection  
**Attachments:** Sample\_Record\_template(1).xls; Report 2007.jpg

Hi Ann,

Here is the information you requested to complete the file for the centre. If anything else is missing please contact me at 905-273-7023. Thank you

Jeanine Kaps  
Supervisor  
Learning Jungle School  
Cooksville Campus

On Fri, Aug 15, 2008 at 11:15 AM, Darby, Ann (ENE) <Ann.Darby@ontario.ca> wrote:

Hello Janine,

Thanks for taking the time to speak with me today.

The Ministry of the Environment has commenced a telephone inspection program to assess compliance with Ontario Regulation 243/07, and to ensure that all schools, private schools, and day nurseries are taking the necessary action to safeguard against the potential consumption of elevated levels of lead in drinking water.

As discussed on the phone this afternoon, I have scheduled a telephone inspection with you to discuss O. Reg. 243/07 on **Thursday, August 21, 2008 at 1:30 pm.**

In order to make the inspection as straightforward as possible, I will require you to forward some documentation to me in advance of the inspection. As soon as possible, could you please forward the following information (if available):

1. the date that the building was constructed and/or the date that the plumbing was installed in writing;
2. source of your drinking water in writing (for example municipal or well water);
3. log sheets for flushing – Months of July and June (please see the at a glance guides for proper record keeping methods);
4. any written procedures which provide direction to operators for flushing and/or sampling (including any

- written instructions from the lab);
5. lab results (the results of the analysis of your water samples from the lab);
  6. chain of custody form (details when you took your samples – is a record of who handled the sample between when it was taken and when it made it to the lab); and
  7. sample records (detailing where, when, and who took the sample, and also ensure that you record on the record the approximate amount of time that the water was standing in the pipes unused prior to taking your first sample.);

When forwarding this documentation, please send it to the fax number 416-212-7576, to the attention of Ann Darby. Also, **please ensure that I receive the above documentation by August 20, 2008** so that I have a chance to review it before we chat on Thursday, August 21<sup>st</sup>.

Furthermore, I've included the link to the Ministry of the Environment website, which details the requirements of Regulation 243/07 and can be found at <http://www.ontario.ca/ONT/portal51/drinkingwater/General?docId=177450&lang=en>. I find the at-a-glance guides to be particularly helpful as it will give you a rundown of flushing and sampling requirements that are subject to Regulation 243. I have also attached a variety of guidance material for your reference.

If you have any questions at all relating to the above, please don't hesitate to contact me at any time.

Thanks again for your cooperation and assistance, and I look forward to speaking with you soon.

**Ann Darby**

Facilities Drinking Water Inspector

Safe Drinking Water Branch

Ministry of the Environment

Tel: (416) 314-0638

Fax: (416) 212-7576

[ann.darby@ontario.ca](mailto:ann.darby@ontario.ca)

Provincial Officer of Ontario Badge # 1355



Please consider the environment before printing this email note.





**INORGANICS ANALYSIS REPORT**

Page 1 of 1

Work Order #: 2076320

Submission #: 114530

**CLIENT INFORMATION**

**Learning Jungle School - Cooksville Campus**  
Sampled By: Jeanine

Date Received: 2007-09-25  
Date Printed: 2007-10-03  
No. of Samples: 2

**Report to:**

Pahal Kuo Head Office  
Learning Jungle School - Learning Jungle School  
Cooksville Campus 45 Sheppard Avenue East,  
78 Agnes Street Suite 900  
Mississauga, Ontario Toronto, Ontario  
L5B 1J7 M2N 5W9

**Comments:**

Empty cell = Analysis not requested  
< = Less than  
^ = Result exceeds limit  
MDL = Method detection limit  
E = Sample exhausted

Sample I D  
Waterworks No  
Sample Location  
Sub Location  
Sample Type  
Date Sampled

349811  
500067679  
Learning Jungle School - 78  
Agnes St Mississauga  
Kitchen - Standing  
Tap  
2007-09-18  
1

	Analyte	MDL/Units	Limit	
Metals Tests	Lead as Pb	0.0007 mg/L	0.010	0.0072

**Comments:**

Empty cell = Analysis not requested  
< = Less than  
^ = Result exceeds limit  
MDL = Method detection limit  
E = Sample exhausted

Sample I D  
Waterworks No  
Sample Location  
Sub Location  
Sample Type  
Date Sampled

349812  
500067679  
Learning Jungle School - 78  
Agnes St Mississauga  
Kitchen - Flushed  
Tap  
2007-09-18  
2

	Analyte	MDL/Units	Limit	
Metals Tests	Lead as Pb	0.0007 mg/L	0.010	0.0012

Approved By:

Brij Gupta, Group Leader (Ext 4326)

J. Mirsch, Superintendent (Ext 4304)

**INORGANICS ANALYSIS SUMMARY**

TEST GROUP	QUANTITY	SAMPLE MATRIX	DATE PREPARED	DATE ANALYZED	INSTRUMENT	METHOD
Metals	2	Water	2007-10-02	2007-10-02	ICP	REL-18

NOTE: Measurement uncertainty data is available on request to the laboratory.

O.REG. 243/07 TELEPHONE AUDIT WORKSHEET

Facility Name: Learning Jungle  
DWS#: 500067679  
Auditor: Ann Darby  
Date: 21-Aug-08

Municipal	water supply or own drinking water system?	municipal	Did they receive the information package?
Question Id	LWIS Question Wording	Suggested Verbal Questions	Notes
80100	Was all or part of the plumbing that serves the building that houses the facility installed before January 1, 1990?	When was the facility constructed? Date the oldest plumbing was installed? Y= plumbing predates Jan. 1, 1990 (B) N= plumbing installed after Jan. 1, 1990 (A)	old building - pre1990 - flush daily - confirm year? No estimated date.
80200	Was any regular flushing carried out at the facility?	Do you have a flushing program in place?	yes
80300 A	If the plumbing at a school, private school or day nursery was installed after Dec 31st, 1989, has the operator ensured that plumbing is flushed at the start of each week at the required time?	How often is the system flushed?	

A		What day of the week is the plumbing flushed?	
A		<p>What time of the day is flushing being conducted?</p> <p>Before 6 AM or earliest practicable time if 24 hour</p>	
80400 A	<p>If the plumbing at a school, private school or day nursery was installed after Dec 31st, 1989, has the procedure for flushing been done in accordance with the requirements of section 3(3) of O.Reg. 243/07?</p>	<p>Can you describe to me the typical flushing procedure?</p> <p>(If the operator response does not cover all requirements in 3(3), ask further pointed questions to extract that information.)</p> <p>5 minutes at the end of the branch, 10 seconds at every tap and fountain, aerator not removed, filter bypassed if possible.</p>	
80500 A	<p>If the plumbing at a school, private school or day nursery was installed after Dec 31st, 1989, has a record been made of the date, time, and the name of the person who performed or verified the flushing?</p>	<p>Are flushing records maintained?</p> <p>(Verbal questions for 80500 not required if records have been forwarded as requested.)</p>	

A		What do the records consist of?	
80600 B	If the plumbing at a school, private school or day nursery was installed before Jan 1, 1990, has the operator ensured that plumbing is flushed at the start of each day at the required time?	How often is the system flushed?	daily
B		What time is the flushing conducted? Before 6 AM or earliest practicable time if 24 hour	completed by 7:00 am. - 7:00 students arrive.
80700 B	If the plumbing at a school, private school or day nursery was installed before Jan 1, 1990, has the procedure for flushing been done in accordance with the requirements of section 4(3) of O.Reg. 243/07?	Is there a written procedure in place? 5 minutes at the end of the branch, 10 seconds at every tap and fountain, aerator not removed, filter bypassed if possible.	yes - turn on all of the cold water taps, usually more than five minutes. All faucets are run for five minutes. Says she is most comfortable flushing all of the faucets.

B		<p>Can you describe to me the typical flushing procedure?</p> <p>(If the operator response does not cover all requirements in 4(3), ask further pointed questions to extract that information)</p>	<p>flush kitchen, preschool washroom, toddler washroom, school age washroom and staff washroom. _ASK - all faucets identified to be accessible included in protocol? - all faucets in the school.</p>
80800 B	<p>If the plumbing at a school, private school or day nursery was installed before Jan 1, 1990, has a record been made of the date, time, and the name of the person who performed or verified the flushing?</p>	<p>Are flushing records being maintained?</p> <p>(Verbal questions for 80800 are unnecessary if records have been forwarded as requested.)</p>	<p>yes - perfect.</p>
B		<p>What do the records consist of?</p>	
80900	<p>For a day nursery, if all or part of the plumbing that serves the building that houses the day nursery was installed before January 1, 1990, and for every school and private school, was any annual lead sampling and testing completed?</p>	<p>Are you conducting any lead sampling?</p>	<p>yes - 2007??? - within the limit but a bit higher - they did sample though, and she is going to send me an updated sampling record.</p>

81000	For a day nursery, if all or part of the plumbing that serves the building that houses the day nursery was installed before January 1, 1990, and for every school and private school was the annual lead sampling and testing done at the proper time, and from the proper location?	Can you describe when and where the lead samples are being collected? Date, time, location, two 1 L bottles (standing and flushing)	
			Sampled on May 20, 2008 from the kitchen tap. Sampled by P. Kuo.
		Can you describe the procedures followed when collecting a lead sample?  (If the operator response does not cover all requirements in 5(2), ask further pointed questions to extract that information) Schools - June 15 - Aug 15, Day nurseries May 1 - Oct 31, Samples taken from same tap, standing sample taken at least 6 hours or longest period possible and before flushing, flushed sample taken after flushing and after 30-35 minute period. Aerator must not be removed.	Monday morning - had been sitting all weekend - went in - followed procedure that we sent. Collected the first water that came out of the faucet - let it run for five minutes, and waited thirty minutes. 6:30. did not flush the water before taking the sample.
		Is there a written procedure in place?	

81050	For a day nursery, if all or part of the plumbing that serves the building that houses the day nursery was installed before January 1, 1990, and for every school and private school have sampling records been made of the date, time, standing period estimate, location, and the name of the person who took each sample?	Are sampling records being maintained?  (Verbal questions for 81050 are unnecessary if records are available for visual review.)	
		What do the records consist of?	no - there is the results - but not the record - no est. standing time, no times.
81100	For a day nursery, if all or part of the plumbing that serves the building that houses the day nursery was installed before January 1, 1990, and for every school and private school, were lead samples taken and handled in accordance with laboratory instructions including collection, containers, labeling, completion of forms, and methods of transportation for samples?	Have you been provided with instructions from your laboratory for sample taking and handling?	
		If so, are you collecting the sample in accordance with the instructions provided by the laboratory?	took it in by person. She is not aware of any instruction.

81200	For a day nursery, if all or part of the plumbing that serves the building that houses the day nursery was installed before January 1, 1990, and for every school and private school, was a Laboratory Services Notification (LSN) submitted as required?	Have you submitted the Laboratory Services Notification?	yes - sept 19/07
		Which laboratory have you retained?	york durham regional environmental lab
81400	Has the operator of the facility ensured that the required information is available to the public during normal business hours, including records of flushing, sampling, exceedances, and a copy of O.Reg. 243/07?	Are all flushing and sampling records made available to the public during normal business hours?	in her office - on her filing cabinet - all other staff know where to find it.
81500	Has the operator of the facility ensured that the required documents are maintained, or will be maintained for at least six (6) years, including records of flushing, sampling and exceedances?	Are you retaining all the flushing, sampling, and AWWQI records?	

		Are you aware that it is required to retain records for six years?	yes
	Thank you for your time. If you have any questions regarding Ontario Regulation 243/07, please do not hesitate to contact me. Also I would like to let you know that I may need to call you back if I have any additional questions. Thank you. get official titles - Jeanine Kaps, supervisor / Pahai Kuo, Owner		

Aug 21/08.  
Date

10:30

~~Conducted inspection to Mary  
Adams of Montessor School  
of Kinderhuis - Private School  
on Day Nursery. Refer to  
log sheet for more details.~~

1:30

Conducted inspection to Learning  
Jungle. Refer to log sheet  
for more details.

3:15

~~Missed call to John Veleboom  
of Hamilton District Christian  
High to complete the portion  
on flushing in the inspection.  
He was N/A. Left name number  
and asked that they call  
me back.~~

~~Kinderhuis Montessori Preschool  
Website~~

PIPR.

~~Casa (18 - 30 mos 30 - 60 mos)~~

~~Mon - Wed, Fri~~

~~7 am - 6 pm~~

~~closed the last week of August.~~

~~No LSA's~~

3:26

~~Phoned Kinderhuis Montessori Preschool  
I'm for responsible person to call  
me back.~~

✓ 9:17

**Page 34**  
**is not relevant**  
**est non pertinente**

**Darby, Ann (ENE)**

---

**From:** Pahai Kuo [pkuo@learningjungle.com]  
**Sent:** August 19, 2008 1:03 PM  
**To:** Darby, Ann (ENE)  
**Cc:** Jeanine Kaps; Barbara Chang  
**Subject:** Re: Ontario Regulation 243/07 - Inspection  
**Follow Up Flag:** Follow up  
**Flag Status:** Red  
**Attachments:** LJS Cooksville - Flushing 1.jpg; LJS Cooksville - Flushing 2.jpg; CPP - Page 1of3.jpg; CPP - Page 2of3.jpg; CPP - Page 3of3.jpg; LJS\_Cooksville\_-\_Inorg\_Analysis\_Report - 2008.pdf

Hello Anne:

Sorry for the delay in getting back to you. Here are some responses to your questions below:

1. the date that the building was constructed and/or the date that the plumbing was installed in writing;
  1. This is an old building, so we flush daily for lead.
2. source of your drinking water in writing (for example municipal or well water);
  1. Our water supply is municipal
3. log sheets for flushing – Months of July and June (please see the at a glance guides for proper record keeping methods);
  1. Attached are the log sheets.
4. any written procedures which provide direction to operators for flushing and/or sampling (including any written instructions from the lab);
  1. Attached are the procedures for flushing of lead. - 3 pages.
5. lab results (the results of the analysis of your water samples from the lab);
  1. Attached are the results of testing this year.
6. chain of custody form (details when you took your samples – is a record of who handled the sample between when it was taken and when it made it to the lab); and
  1. As the owner/operator I picked up the samples and the record of the sampling and submitted to the Testing Lab.
7. sample records (detailing where, when, and who took the sample, and also ensure that you record on the record the approximate amount of time that the water was standing in the pipes unused prior to taking your first sample.); -
  1. As above. We do not keep track of this information.

Regards,  
Pahai

On Fri, Aug 15, 2008 at 2:15 PM, Jeanine Kaps <jkaps@learningjungle.com> wrote:

----- Forwarded message -----

**From:** Darby, Ann (ENE) <Ann.Darby@ontario.ca>  
**Date:** Fri, Aug 15, 2008 at 11:15 AM  
**Subject:** Ontario Regulation 243/07 - Inspection  
**To:** jkaps@learningjungle.com

Hello Janine,

Thanks for taking the time to speak with me today.

The Ministry of the Environment has commenced a telephone inspection program to assess compliance with Ontario Regulation 243/07, and to ensure that all schools, private schools, and day nurseries are taking the necessary action to safeguard against the potential consumption of elevated levels of lead in drinking water.

As discussed on the phone this afternoon, I have scheduled a telephone inspection with you to discuss O. Reg. 243/07 on Thursday, August 21, 2008 at 1:30 pm.

In order to make the inspection as straightforward as possible, I will require you to forward some documentation to me in advance of the inspection. As soon as possible, could you please forward the following information (if available):

1. the date that the building was constructed and/or the date that the plumbing was installed in writing;
2. source of your drinking water in writing (for example municipal or well water);
3. log sheets for flushing – Months of July and June (please see the at a glance guides for proper record keeping methods);
4. any written procedures which provide direction to operators for flushing and/or sampling (including any written instructions from the lab);
5. lab results (the results of the analysis of your water samples from the lab);
6. chain of custody form (details when you took your samples – is a record of who handled the sample between when it was taken and when it made it to the lab); and
7. sample records (detailing where, when, and who took the sample, and also ensure that you record on the record the approximate amount of time that the water was standing in the pipes unused prior to taking your first sample.);

When forwarding this documentation, please send it to the fax number 416-212-7576, to the attention of Ann Darby. Also, **please ensure that I receive the above documentation by August 20, 2008** so that I have a chance to review it before we chat on Thursday, August 21<sup>st</sup>.

Furthermore, I've included the link to the Ministry of the Environment website, which details the requirements of Regulation 243/07 and can be found at <http://www.ontario.ca/ONT/portal51/drinkingwater/General?docId=177450&lang=en>. I find the at-a-glance guides to be particularly helpful as it will give you a rundown of flushing and sampling requirements that are subject to Regulation 243. I have also attached a variety of guidance material for your reference.

If you have any questions at all relating to the above, please don't hesitate to contact me at any time.

Thanks again for your cooperation and assistance, and I look forward to speaking with you soon.

**Ann Darby**

Facilities Drinking Water Inspector

Safe Drinking Water Branch

Ministry of the Environment

Tel: (416) 314-0638

Fax: (416) 212-7576

[ann.darby@ontario.ca](mailto:ann.darby@ontario.ca)

Provincial Officer of Ontario Badge # 1355



Please consider the environment before printing this email note

--  
Learning Jungle School  
Phone:(416) 227-0461  
Mobile:(416) 875-8492  
Skype:pahaikuo

20/08/2008

000037

Water Flushing Monitoring Form

Centre ID: CKVL

Learning Jungle School

Identify all Faucet Location(s) Being Flushed and Duration<sup>1</sup>:

Kitchen, Preschool washroom, toddler washroom,  
School-age washroom, and staff  
washroom

This form is being completed as a requirement under the Safe Drinking Water Act, 2002: O Reg. 173/03 (Flushing for Lead). Please indicate here all the faucets and/or fountains at the Centre that must be flushed every first working day of a week (or more frequently), before the School opens and also indicate the number of minutes the faucets must remain open. Post this form at one central location in the Centre.

07/01/2008  
closed for  
Canada day

Date of flushing (MM/DD/YY)	Time of flushing	Number of minutes flushed	Have all the faucets identified been flushed (Y/N)	Staff Name	Initial
06/30/08	6 <sup>50</sup>	6 <sup>55</sup>	Y	Melissa Nagai M.C.	
07/02/08	6 <sup>55</sup>	7 <sup>00</sup>	Y	Jeanine Kaps	JK
07/03/08	6 <sup>50</sup>	6 <sup>55</sup>	Y	Jeanine Kaps	JK
07/04/08	6 <sup>50</sup>	7 <sup>00</sup>	Y	Jeanine Kaps	JK
07/07/08	6 <sup>55</sup>	7 <sup>00</sup>	Y	Jeanine Kaps	JK
07/08/08	6 <sup>55</sup>	7 <sup>00</sup>	Y	Jeanine Kaps	JK
07/09/08	6 <sup>50</sup>	6 <sup>55</sup>	Y	Jeanine Kaps	JK
07/10/08	6 <sup>55</sup>	7 <sup>00</sup>	Y	Jeanine Kaps	JK
07/11/08	6 <sup>55</sup>	7 <sup>00</sup>	Y	Jeanine Kaps	JK
07/14/08	6 <sup>50</sup>	6 <sup>55</sup>	Y	Jeanine Kaps	JK
07/15/08	6 <sup>55</sup>	7 <sup>00</sup>	Y	Jeanine Kaps	JK
07/16/08	6 <sup>50</sup>	6 <sup>55</sup>	Y	Jeanine Kaps	JK
07/17/08	6 <sup>50</sup>	6 <sup>55</sup>	Y	Jeanine Kaps	JK
07/18/08	6 <sup>50</sup>	6 <sup>55</sup>	Y	Jeanine Kaps	JK
07/21/08	6 <sup>50</sup>	6 <sup>55</sup>	Y	Jeanine Kaps	JK
07/22/08	6 <sup>50</sup>	6 <sup>55</sup>	Y	Jeanine Kaps	JK
07/23/08	6 <sup>50</sup>	6 <sup>55</sup>	Y	Jeanine Kaps	JK
07/24/08	6 <sup>50</sup>	6 <sup>55</sup>	Y	Jeanine Kaps	JK
07/25/08	6 <sup>50</sup>	6 <sup>55</sup>	Y	Jeanine Kaps	JK
07/28/08	6 <sup>50</sup>	6 <sup>55</sup>	Y	Jeanine Kaps	JK
07/29/08	6 <sup>55</sup>	7 <sup>00</sup>	Y	Jeanine Kaps	JK
07/30/08	6 <sup>55</sup>	7 <sup>00</sup>	Y	Jeanine Kaps	JK
07/31/08	6 <sup>45</sup>	6 <sup>50</sup>	Y	Jeanine Kaps	JK
08/01/08	6 <sup>50</sup>	6 <sup>55</sup>	Y	Jeanine Kaps	JK

## Water Flushing Monitoring Form

Centre ID: CKVL

Learning Jungle School

Identify all Faucet Location(s) Being Flushed and Duration<sup>1</sup>:

Kitchen, Preschool washroom, toddler washroom, school-age washroom and staff washroom

<sup>1</sup> This form is being completed as a requirement under the Safe Drinking Water Act, 2002: O Reg. 173/03 (Flushing for Lead). Please indicate here all the faucets and/or fountains at the Centre that must be flushed every first working day of a week (or more frequently), before the School opens and also indicate the number of minutes the faucets must remain open. Post this form at one central location in the Centre.

Date of flushing (MM/DD/YY)	Time of flushing	Number of minutes flushed	Have all the faucets identified been flushed (Y/N)	Staff Name	Initial
05/27/2008	6 <sup>50</sup> -6 <sup>55</sup>	5min	Y	Jeanine Kaps	JK
05/28/2008	6 <sup>50</sup> -6 <sup>55</sup>	5min	Y	Jeanine Kaps	JK
05/29/2008	6 <sup>55</sup> -7 <sup>00</sup>	5min	Y	Jeanine Kaps	JK
05/30/2008	6 <sup>55</sup> -7 <sup>00</sup>	5min	Y	Jeanine Kaps	JK
06/01/2008	6 <sup>55</sup> -7 <sup>00</sup>	5min	Y	Jeanine Kaps	JK
06/02/2008	6 <sup>55</sup> -7 <sup>00</sup>	5min	Y	Jeanine Kaps	JK
06/04/2008	6 <sup>55</sup> -7 <sup>00</sup>	5min	Y	Jeanine Kaps	JK
06/05/2008	6 <sup>50</sup> -6 <sup>55</sup>	5min	Y	Jeanine Kaps	JK
06/06/2008	6 <sup>50</sup> -6 <sup>55</sup>	5min	Y	Jeanine Kaps	JK
06/09/2008	6 <sup>50</sup> -6 <sup>55</sup>	5min	Y	Jeanine Kaps	JK
06/10/2008	6 <sup>55</sup> -7 <sup>00</sup>	5min	Y	Jeanine Kaps	JK
06/11/2008	6 <sup>50</sup> -6 <sup>55</sup>	5min	Y	Jeanine Kaps	JK
06/12/2008	6 <sup>55</sup> -7 <sup>00</sup>	5min	Y	Jeanine Kaps	JK
06/13/2008	6 <sup>55</sup> -7 <sup>00</sup>	5min	Y	Jeanine Kaps	JK
06/16/08	6 <sup>55</sup> -7 <sup>00</sup>	5min	Y	Jeanine Kaps	JK
06/17/08	6 <sup>55</sup> -7 <sup>00</sup>	5min	Y	Jeanine Kaps	JK
06/18/08	6 <sup>55</sup> -7 <sup>00</sup>	5min	Y	Jeanine Kaps	JK
06/19/08	6 <sup>55</sup> -7 <sup>00</sup>	5min	Y	Jeanine Kaps	JK
06/20/08	6 <sup>55</sup> -7 <sup>00</sup>	5min	Y	Jeanine Kaps	JK
06/23/08	6 <sup>45</sup> -6 <sup>50</sup>	5min	Y	Jeanine Kaps	JK
06/24/08	6 <sup>45</sup> -6 <sup>50</sup>	5min	Y	Jeanine Kaps	JK
06/25/08	6 <sup>50</sup> -6 <sup>55</sup>	5min	Y	Jeanine Kaps	JK
06/26/08	6 <sup>50</sup> -6 <sup>55</sup>	5min	Y	Jeanine Kaps	JK
06/27/08	6 <sup>50</sup> -6 <sup>55</sup>	5min	Y	Jeanine Kaps	JK

## Safe Drinking Water

Most plumbing in North American residences and business establishments consist of copper tubing with lead soldered joints. Consequently, water taken from these tubes, for drinking purposes can carry traces of lead in them.

The hazardous effects of exposure to lead, even in low quantities, especially to young children has been proven. (cf. **Effects of Lead on Human Health** can be found at: [http://www.hc-sc.gc.ca/lyh-vsv/environ/lead-plomb\\_e.html](http://www.hc-sc.gc.ca/lyh-vsv/environ/lead-plomb_e.html))

In order to avoid these hazardous lead-related side-effects of consuming potable water, all Learning Jungle Schools practice the **Safe Drinking Water** procedure. The procedure involves the flushing of cold water from all taps/faucets where children or staff use it for the purposes of drinking, on the first working day of a week (or more frequently for older buildings), till such a time as the temperature of the running water stabilizes, indicating that the stale water that has stood in the plumbing has been flushed.

### Identifying the faucets – Supervisor responsibility

The supervisor must ensure that all the faucets that have been identified for lead flushing have been done (in conjunction with the recommendations of the local Health Department representative) and a Water Flushing Monitoring Form has been posted in one central location indicating all the faucets that need to be flushed.

At a minimum the following locations must be identified for flushing:

1. Kitchen where food is prepared/served
2. Water fountains throughout the premises that are used to drink water
3. Staff room having access to drinking water

### Training for Flushing – Supervisor responsibility

Once the faucets have been identified, and the posting at the central location has been put up, the Supervisor must ensure that all staff who are designated to open the centre, are trained on the flushing procedure.

## Flushing for Lead – Opening Staff Procedure

- Faucets identified for flushing include the last tap on each branch or each run of pipe (e.g. kitchen, children's washrooms, drinking water fountains)
- **Before the Centre is opened**, staff must flush the **cold water** for at least five minutes for all of the faucets identified above. To save time, all **identified faucets** may be flushed simultaneously for five minutes.
- A faucet identified as a drinking water fountain or used for human consumption and has not been flushed (because it is not the last tap in the branch), should be flushed for an additional 10 seconds.
  - At the end of the flushing procedure for all the identified faucets, the staff must record it on the Water Flushing Monitoring Form posted at a central location.

## Flushing for Lead – Frequency

- If the Centre is in a building that is built **before January 1, 1990**, follow the procedure defined above **every day** the Centre is open.
- If the Centre is in a building that is built on or **after January 1, 1990**, follow the procedure defined above on the **first working day of every week**.

## Record Keeping – Supervisor Responsibility

The supervisor is responsible for ensuring that the Water Flushing Monitoring Form is stored in the Office for at least five years.

## Testing for Lead – Frequency

- At every Learning Jungle School located in buildings constructed before 1990, an **annual testing of water sample** must be completed between **May 1 and October 31**.
- The annual sample of water must be submitted to a licensed laboratory to be tested for lead
- The licensed lab will inform the Centre if the results of the test are not within acceptable limits within 24 hours. The Supervisor and Director will work together on an action plan to address this.

## Annual Testing for Lead – Opening Staff Procedure

- Ensure that two one-litre clean and dry plastic bottles are available for sample collection.
- One faucet, preferably the one used most frequently for human consumption (e.g. Kitchen Faucet) should be identified for annual lead testing.
- Ensure that the faucet does not have any filter or water treatment device. If there is such a device, ensure that it is removed
- There are two samples that need to be taken and both these samples should be taken from the same faucet.
- The **first sample** must be collected after the longest period when the plumbing is not used (e.g. first day of work week) and **before** the plumbing is flushed. Label the bottle **Sample 1** and also add date and time this sample was taken and name of the Centre.
- The **second sample** must be taken immediately after the first sample. **Before** taking the second sample, the cold water tap must be turned on for **at least five minutes**, then turned off and left unused for at least 30 but no more than 35 minutes. Label the bottle **Sample 2** and also add date and time this sample was taken and name of the Centre.



## INORGANICS ANALYSIS REPORT

Page 1 of 1

Work Order #: 2088199

Submission #: 126921

## CLIENT INFORMATION

Learning Jungle School - Cooksville Campus

Regulated Type: 243 Day Nursery

Sampled By: P. Kuo

Report to:

Pahai Kuo —  
Learning Jungle School -  
Cooksville Campus  
78 Agnes Street  
Mississauga, Ontario  
LSB 117

Date Received: 2008-06-09

Date Printed: 2008-06-16

No. of Samples: 2

## Comments:

Empty cell = Analysis not requested  
< = Less than  
> = Result exceeds limit  
MDL = Method detection limit  
E = Sample exhausted  
(R) = Resample

Sample I.D.: 392857

Waterworks No.: 500067679

Sample Location: Kitchen Tap

Sub Location: Standing

Sample Type: Tap

Date Sampled: 2008-05-20

Client/Field I.D.: 1

Analyte

MDL/Units

Limit

Metals Tests Lead as Pb

0.0001 mg/L

0.010

0.0018

## Comments:

Empty cell = Analysis not requested  
< = Less than  
> = Result exceeds limit  
MDL = Method detection limit  
E = Sample exhausted  
(R) = Resample

Sample I.D.: 392858

Waterworks No.: 500067679

Sample Location: Kitchen Tap

Sub Location: Flushed

Sample Type: Tap

Date Sampled: 2008-05-20

Client/Field I.D.: 2

Analyte

MDL/Units

Limit

Metals Tests Lead as Pb

0.0001 mg/L

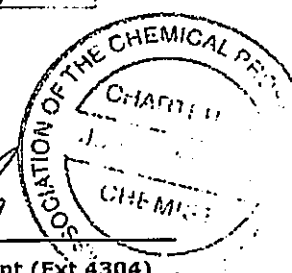
0.010

0.0016

Approved By:

Brij Gupta, Group Leader (Ext 4326)

J. Mirsch, Superintendent (Ext 4304)



## INORGANICS ANALYSIS SUMMARY

TEST GROUP	QUANTITY	SAMPLE MATRIX	DATE PREPARED	DATE ANALYZED	INSTRUMENT	METHOD
Metals	2	Water	2008-06-13	2008-06-16	ICP-MS	RELI-25

NOTE: Measurement uncertainty data is available on request to the laboratory.

Aug 15/08  
Date

2:19. ~~Proneel Creditview Child Care Centre~~  
~~Proneel took down my name and~~  
~~number and is going to have~~  
~~the director call me back~~  
~~on Monday.~~

~~Middlebury Jr. & Co located on~~  
~~Middlebury Public School~~  
~~Built June 1/1998~~  
~~10 portables.~~  
~~8:35 am entry~~

2:30 Bahai - From Learning Jungle  
→ municipal DW - 1960's. Historical  
Building.  
- Said that he is regulated by  
so many people already and  
that mep's already checks this.  
He said he would fix off what  
ever he had, and the inspection  
is still going to happen as  
planned on Aug 21/08

~~Bokaboo Child Care Centre~~  
~~- 181 Kids~~  
~~905-712-6213~~  
~~Lee Anne and Paul Arkell~~  
~~Still Sep 26/07~~

**Page 45**  
**is not relevant**  
**est non pertinente**

**Darby, Ann (ENE)**

---

**From:** Darby, Ann (ENE)  
**Sent:** Friday, August 15, 2008 11:15 AM  
**To:** 'jkaps@learningjungle.com'  
**Subject:** Ontario Regulation 243/07 - Inspection  
**Attachments:** Flushing Your Plumbing poster v4b.pdf; low res Sampling For Lead poster v4c.pdf; MOE-Report-ENG-FINAL-WEB.pdf; Sample Record template.xls; Flushing Record template.xls; Safe Drinking Water Act, 2002 - O\_Reg\_243-07.htm

Hello Janine,

Thanks for taking the time to speak with me today.

The Ministry of the Environment has commenced a telephone inspection program to assess compliance with Ontario Regulation 243/07, and to ensure that all schools, private schools, and day nurseries are taking the necessary action to safeguard against the potential consumption of elevated levels of lead in drinking water.

As discussed on the phone this afternoon, I have scheduled a telephone inspection with you to discuss O. Reg. 243/07 on **Thursday, August 21, 2008 at 1:30 pm.**

In order to make the inspection as straightforward as possible, I will require you to forward some documentation to me in advance of the inspection. As soon as possible, could you please forward the following information (if available):

1. the date that the building was constructed and/or the date that the plumbing was installed in writing;
2. source of your drinking water in writing (for example municipal or well water);
3. log sheets for flushing – Months of July and June (please see the at a glance guides for proper record keeping methods);
4. any written procedures which provide direction to operators for flushing and/or sampling (including any written instructions from the lab);
5. lab results (the results of the analysis of your water samples from the lab);
6. chain of custody form (details when you took your samples – is a record of who handled the sample between when it was taken and when it made it to the lab); and
7. sample records (detailing where, when, and who took the sample, and also ensure that you record on the record the approximate amount of time that the water was standing in the pipes unused prior to taking your first sample.);

When forwarding this documentation, please send it to the fax number 416-212-7576, to the attention of Ann Darby. Also, **please ensure that I receive the above documentation by August 20, 2008** so that I have a chance to review it before we chat on Thursday, August 21<sup>st</sup>.

Furthermore, I've included the link to the Ministry of the Environment website, which details the requirements of Regulation 243/07 and can be found at <http://www.ontario.ca/ONT/portal51/drinkingwater/General?docId=177450&lang=en>. I find the at-a-glance guides to be particularly helpful as it will give you a rundown of flushing and sampling requirements that are subject to Regulation 243. I have also attached a variety of guidance material for your reference.

If you have any questions at all relating to the above, please don't hesitate to contact me at any time.

Thanks again for your cooperation and assistance, and I look forward to speaking with you soon.

**Ann Darby**  
 Facilities Drinking Water Inspector  
 Safe Drinking Water Branch  
 Ministry of the Environment

8/15/2008

000046

Tel: (416) 314-0638  
Fax: (416) 212-7576  
[ann.darby@ontario.ca](mailto:ann.darby@ontario.ca)

Provincial Officer of Ontario Badge # 1355



Please consider the environment before printing this email note

Aug 15/08

Date

10:49 ~~Happyland Nursery School~~  
~~516 created by G Co~~  
~~results from 2007 received~~  
~~8:00 - 4:00~~  
~~LSN ✓ Oct 16~~

10:53 ~~Phoned Happyland Nursery School~~  
~~405-677-6054 Number not a service~~  
~~on holidays - be opens on~~  
~~Monday Sept 22nd/08~~  
~~left message asking for them~~  
~~to return my call in the~~  
~~interim~~

11:00 ~~Learning Jungle School~~  
~~- 18 mos - 12 years~~  
~~- centre divided into 3 rooms~~  
~~7:00am - 6:00pm~~  
~~LSN ✓ Sept 19/07~~

11:02 ~~Phoned Learning Jungle School~~  
~~→ B/W 1:30 - 2:30~~  
~~→ jkaps@learningjungle.com~~  
~~- Janine. Inspection set up for~~  
~~Thursday Aug 21/08 @ 1:30pm~~  
~~905-273-7023~~

~~- am drafting email w guidance~~  
~~info + requested documents~~

11:20 ~~Debbie Riker from Liv v. Hope~~  
~~Christian Academy phoned~~  
~~she had taken her water samples~~  
~~at Navarro facility. I instructed~~



**Ministry of the Environment**

**R243 LEARNING JUNGLE SCHOOL (0003557)**

**Drinking Water Inspection Report**

<b>DW Facility Number:</b>	500067679
<b>Inspection Number:</b>	1-6WY83
<b>Date of Inspection:</b>	Aug 21, 2008
<b>Inspected By:</b>	Ann Darby

**OWNER INFORMATION:**

<b>Company Name:</b>	LEARNING JUNGLE SCHOOL		
<b>Street Number:</b>	78	<b>Unit Identifier:</b>	
<b>Street Name:</b>	AGNES St		
<b>City:</b>	MISSISSAUGA		
<b>Province:</b>	ON	<b>Postal Code:</b>	L5B 1J7

**CONTACT INFORMATION**

<b>Type:</b>	Main Contact	<b>Name:</b>	Jeanine Kaps
<b>Phone:</b>	(905) 273-7023	<b>Fax:</b>	(416) 229-0381
<b>Email:</b>	jkaps@learningjungle.com		
<b>Title:</b>	Supervisor		

<b>Type:</b>	Owner	<b>Name:</b>	Pahai Kuo
<b>Phone:</b>	(905) 273-7023	<b>Fax:</b>	(416) 229-0381
<b>Email:</b>	pkuo@learningjungle.com		
<b>Title:</b>	Owner		

**INSPECTION DETAILS:**

<b>DW Name:</b>	R243 LEARNING JUNGLE SCHOOL (0003557)
<b>DW Address:</b>	78 AGNES ST
<b>County/District:</b>	Mississauga
<b>District/Area Office:</b>	Halton-Peel District
<b>DW Facility Number:</b>	500067679
<b>Inspection Type:</b>	Announced
<b>Inspection Number:</b>	1-6WY83
<b>Date of Inspection:</b>	Aug 21, 2008
<b>Date of Previous Inspection:</b>	

**DRINKING WATER COMPONENTS DESCRIPTION**

<b>Site (Name):</b>	Learning Jungle School	
<b>Type:</b>	Other	<b>Sub Type:</b>

**Comments:**

Learning Jungle School is a day nursery and is regulated under Ontario Regulation 243/07 (Schools, Private Schools and Day Nurseries) made under the Safe Drinking Water Act, 2002 (SDWA). The facility was constructed prior to January 1, 1990 and is supplied by municipal drinking water.

## INSPECTION SUMMARY

### INTRODUCTION

- \* The primary focus of this report is to assess compliance with the flushing, sampling and record keeping requirements of Ontario Regulation 243/07. This Regulation was created to provide a safeguard against the potential consumption of elevated levels of lead in drinking water at schools, private schools and day nurseries in Ontario.

### DISTRIBUTION SYSTEM

- \* All or part of the plumbing that serves the building that houses the facility was installed before January 1, 1990.

At the time of the inspection, Jeanine Kaps, Supervisor, informed the ministry that the plumbing in Learning Jungle School pre-dates January 1, 1990.

- \* Flushing of the plumbing was conducted for all or part of the inspection period.

A review of the flushing records, which were e-mailed to the ministry on August 19, 2008, indicated that daily flushing was conducted.

- \* The plumbing was flushed at the start of each day at the required time.

At the time of the inspection, Ms. Kaps informed the ministry that students begin to arrive at the facility for the day at 7:00 am. Upon review of the flushing records which were e-mailed to the ministry on August 19, 2008, it was noted that flushing was consistently completed by 7:00 am daily, and therefore flushing was conducted in accordance with section 4(2) of O. Reg. 243/07.

- \* Daily flushing of the plumbing was conducted in accordance with the procedure outlined in section 4(3) of O. Reg. 243/07.

At the time of the inspection, Ms. Kaps informed the ministry that daily flushing activities at Learning Jungle School consist of a five (5) minute flush of all cold water taps located within the facility. A review of the flushing protocol, which was e-mailed to the ministry on August 19, 2008, indicated that cold water faucets in Learning Jungle School are located in the kitchen, pre-school washroom, toddler washroom, school-age washroom, and in the staff washroom. The ministry confirmed that all faucets which may commonly provide potable drinking water to children under the age of eighteen (18) are accounted for in the daily flushing protocol, and therefore flushing was conducted in accordance with section 4(3) of O. Reg. 243/07.

- \* Records were made of the date, time and name of the person who performed and/or verified the daily flushing.

A review of the flushing records which were e-mailed to the ministry on August 19, 2008, indicated that Learning Jungle School is flushing daily as required. The flushing records contained the date, time, location and the name of the person conducting the flushing. The facility also included a legend on the flushing record to identify the locations of all of the cold water taps that are incorporated into the flushing protocol. The operator was also diligent with ensuring that days in which flushing did not occur, such as holidays, were documented on the flushing record. Thus the flushing records were maintained in accordance with section 4(4) of O. Reg. 243/07.

### WATER QUALITY MONITORING

**WATER QUALITY MONITORING**

- \* **Annual lead samples were taken at this facility.**

The sampling records, which were e-mailed to the ministry on August 21, 2008, indicated that drinking water samples were taken from Learning Jungle School on September 18, 2007. The samples were submitted for analysis to York-Durham Regional Environmental Laboratory in Pickering, Ontario, which is a laboratory that is licensed by the Ministry of the Environment to analyze drinking water samples for lead. Both the flushed and the standing sample were found to be below the Drinking Water Quality Standard for lead (10 µg/L).

Drinking water samples were collected from Learning Jungle School for the 2008 sampling period on May 20, 2008, and were also submitted for analysis to York-Durham Regional Environmental Laboratory in Pickering, Ontario. Both the flushed and the standing sample were found to be below the Drinking Water Quality Standard for lead (10 µg/L).

- \* **Annual lead sampling at this facility was conducted in accordance with section 5(2) of O.Reg. 243/07.**

At the time of the inspection, Ms. Kaps informed the ministry that both the 2007 and 2008 annual samples were collected from the kitchen tap. Ms. Kaps collected the 2007 standing and flushed samples on September 18, 2007, at 6:45 am and 7:20 am respectively, after the water had been standing in the plumbing for a period of approximately twelve (12) hours. Ms. Kaps collected the 2008 standing and flushed samples on May 20, 2008, at 6:55 am and 7:30 am respectively, after the water had been standing in the plumbing for a period of approximately thirty-six (36) hours.

At the time of the inspection, Ms. Kaps confirmed that the standing sample consisted of the first water that came out of the tap. The flushed sample was collected after the water had been flushed from the tap for five (5) minutes, and then left standing in the plumbing until a period of thirty (30) minutes had elapsed. Thus, the 2007 and 2008 annual samples were collected in accordance with section 5(2) of O. Reg. 243/07.

- \* **Sampling records were made of the date, time, standing period estimate, location, and the name of the person who took each sample.**

A review of the sampling records, which were e-mailed to the ministry on August 21, 2008, indicated that the records were maintained in accordance with Section 5(2)(12) of O. Reg. 243/07. The 2007 and 2008 sampling records contained the dates and times that the samples were collected, the location from where the samples were collected, the name of the individual who collected the samples, and an estimate of the amount of time that the water was standing in the plumbing prior to taking the first sample.

- \* **Samples collected from this facility were not handled in accordance with laboratory instructions.**

At the time of the inspection, Ms. Kaps informed the ministry that she was not aware of any instructions provided to Learning Jungle School by York-Durham Regional Environmental Laboratory. Ms. Kaps confirmed with the ministry that samples were taken in accordance with section 5(2) of O. Reg. 243/07, and were submitted to the laboratory in person.

- \* **The operator did not ensure that a Laboratory Services Notification that identified the laboratory which conducted the testing for lead was submitted to the Ministry.**

A Laboratory Services Notification (LSN) was submitted to the ministry on September 19, 2007; however, the LSN was not submitted prior to taking the lead samples as required by section 5(5) of O. Reg. 243/07. The facility has retained the services of York-Durham Regional Environmental Laboratory, which is a laboratory that is licensed by the Ministry of the Environment to analyze drinking water samples for lead.

**WATER QUALITY MONITORING**

- \* **Required documents were available without charge during normal business hours at the facility.**

At the time of the inspection, Ms. Kaps informed the ministry that records of flushing and sampling and a copy of O. Reg. 243/07 are made available to the public without charge during normal business hours at Learning Jungle School as per section 8 of O. Reg. 243/07.

- \* **The operator indicated that records of flushing and testing will be kept for at least six (6) years.**

Ms. Kaps informed the ministry that all required documents will be retained at Learning Jungle School for at least six (6) years as per section 9 of O. Reg. 243/07.

**NON-COMPLIANCE WITH REGULATORY REQUIREMENTS AND ACTIONS REQUIRED**

This section provides a summary of all non-compliance with regulatory requirements identified during the inspection period, as well as actions required to address these issues. Further details pertaining to these items can be found in the body of the inspection report.

**1. Samples collected from this facility were not handled in accordance with laboratory instructions.**

At the time of the inspection, Ms. Kaps informed the ministry that she was not aware of any instructions provided to Learning Jungle School by York-Durham Regional Environmental Laboratory. Ms. Kaps confirmed with the ministry that samples were taken in accordance with section 5(2) of O. Reg. 243/07, and were submitted to the laboratory in person.

**Action(s) Required:**

Learning Jungle School shall obtain instructions from the laboratory for all future annual sampling as per section 5(4) of O. Reg. 243/07, and shall collect and handle all future samples in accordance with the instructions provided from the laboratory.

**2. The operator did not ensure that a Laboratory Services Notification that identified the laboratory which conducted the testing for lead was submitted to the Ministry.**

A Laboratory Services Notification (LSN) was submitted to the ministry on September 19, 2007; however, the LSN was not submitted prior to taking the lead samples as required by section 5(5) of O. Reg. 243/07. The facility has retained the services of York-Durham Regional Environmental Laboratory, which is a laboratory that is licensed by the Ministry of the Environment to analyze drinking water samples for lead.

**Action(s) Required:**

No further actions are required. Learning Jungle School is reminded to submit an updated LSN to the ministry in the event that the facility retains the services of a new licensed laboratory, and shall submit the updated LSN prior to collecting lead samples, as per section 5(5) of O. Reg. 243/07.

**SUMMARY OF BEST PRACTICE ISSUES AND RECOMMENDATIONS**

This section provides a summary of all best practice issues identified during the inspection period. Details pertaining to these items can be found in the body of the inspection report. Best Management Practices are recommendations and not mandatory requirements, but may lead to safe drinking water for the consumer.

In the interest of continuous improvement in the interim, it is recommended that owners and operators develop an awareness of the following practices and consider measures to implement them so that all drinking water facilities continuously improve their processes.

Not Applicable

**SIGNATURES**

---

Inspected By:

Ann Darby

Signature: (Provincial Officer):

---

Reviewed & Approved By:

Natalie Boyd

Signature: (Supervisor):

Review &amp; Approval Date: 08/09/2008 (dd/mm/yyyy)

Note: This inspection does not in any way suggest that there is or has been compliance with applicable legislation and regulations as they apply or may apply to this facility. It is, and remains, the responsibility of the owner and/or operating authority to ensure compliance with all applicable legislative and regulatory requirements.



## **Ministry of the Environment, Conservation and Parks**

**R243 LEARNING JUNGLE SCHOOL - COOKSVILLE CAMPUS (0003557)**

### **Inspection Report**

<b>Site Number:</b>	500067679
<b>Inspection Number:</b>	1-6WY83
<b>Date of Inspection:</b>	Aug 21, 2008
<b>Inspected By:</b>	Ann Darby

## OWNER INFORMATION:

**Company Name:** LEARNING JUNGLE SCHOOL  
**Street Number:** 45 **Unit Identifier:** 900  
**Street Name:** SHEPPARD AVE E  
**City:** TORONTO  
**Province:** ON **Postal Code:** M2N 5W9

## CONTACT INFORMATION

<b>Type:</b>	Main Contact	<b>Name:</b>	Jeanine Kaps
<b>Phone:</b>	(905) 273-7023	<b>Fax:</b>	(416) 229-0381
<b>Email:</b>	jkaps@learningjungle.com		
<b>Title:</b>	Supervisor		

<b>Type:</b>	Owner	<b>Name:</b>	Pahai Kuo
<b>Phone:</b>	(905) 273-7023	<b>Fax:</b>	(416) 229-0381
<b>Email:</b>	pkuo@learningjungle.com		
<b>Title:</b>	Owner		

## INSPECTION DETAILS:

**Site Name:** R243 LEARNING JUNGLE SCHOOL - COOKSVILLE CAMPUS (0003557)  
**Site Address:** 78 AGNES Street MISSISSAUGA ON L5B 1J7  
**County/District:** MISSISSAUGA  
**MECP District/Area Office:** Halton-Peel District  
**Health Unit:** PEEL REGIONAL HEALTH UNIT  
**Conservation Authority:**  
**MNR Office:**  
**Site Number:** 500067679  
**Inspection Type:** Announced  
**Inspection Number:** 1-6WY83  
**Date of Inspection:** Aug 21, 2008  
**Date of Previous Inspection:**

## COMPONENTS DESCRIPTION

**Site (Name):** Learning Jungle School

**Type:** Other**Sub Type:****Comments:**

Learning Jungle School is a day nursery and is regulated under Ontario Regulation 243/07 (Schools, Private Schools and Day Nurseries) made under the Safe Drinking Water Act, 2002 (SDWA). The facility was constructed prior to January 1, 1990 and is supplied by municipal drinking water.

---

## INSPECTION SUMMARY:

### Introduction

- The primary focus of this report is to assess compliance with the flushing, sampling and record keeping requirements of Ontario Regulation 243/07. This Regulation was created to provide a safeguard against the potential consumption of elevated levels of lead in drinking water at schools, private schools and day nurseries in Ontario.

### Distribution System

- All or part of the plumbing that serves the building that houses the facility was installed before January 1, 1990.  
At the time of the inspection, Jeanine Kaps, Supervisor, informed the ministry that the plumbing in Learning Jungle School pre-dates January 1, 1990.
- Flushing of the plumbing was conducted for all or part of the inspection period.  
A review of the flushing records, which were e-mailed to the ministry on August 19, 2008, indicated that daily flushing was conducted.
- The plumbing was flushed at the start of each day at the required time.  
At the time of the inspection, Ms. Kaps informed the ministry that students begin to arrive at the facility for the day at 7:00 am. Upon review of the flushing records which were e-mailed to the ministry on August 19, 2008, it was noted that flushing was consistently completed by 7:00 am daily, and therefore flushing was conducted in accordance with section 4(2) of O. Reg. 243/07.
- Daily flushing of the plumbing was conducted in accordance with the procedure outlined in section 4(3) of O. Reg. 243/07.  
At the time of the inspection, Ms. Kaps informed the ministry that daily flushing activities at Learning Jungle School consist of a five (5) minute flush of all cold water taps located within the facility. A review of the flushing protocol, which was e-mailed to the ministry on August 19, 2008, indicated that cold water faucets in Learning Jungle School are located in the kitchen, pre-school washroom, toddler washroom, school-age washroom, and in the staff washroom. The ministry confirmed that all faucets which may commonly provide potable drinking water to children under the age of eighteen (18) are accounted for in the daily flushing protocol, and therefore flushing was conducted in accordance with section 4(3) of O. Reg. 243/07.
- Records were made of the date, time and name of the person who performed and/or verified the daily flushing.  
A review of the flushing records which were e-mailed to the ministry on August 19, 2008, indicated that Learning Jungle School is flushing daily as required. The flushing records contained the date, time, location and the name of the person conducting the flushing. The facility also included a legend on the flushing record to identify the locations of all of the cold

**Distribution System**

water taps that are incorporated into the flushing protocol. The operator was also diligent with ensuring that days in which flushing did not occur, such as holidays, were documented on the flushing record. Thus the flushing records were maintained in accordance with section 4(4) of O. Reg. 243/07.

**Water Quality Monitoring**

- Annual lead samples were taken at this facility.

The sampling records, which were e-mailed to the ministry on August 21, 2008, indicated that drinking water samples were taken from Learning Jungle School on September 18, 2007. The samples were submitted for analysis to York-Durham Regional Environmental Laboratory in Pickering, Ontario, which is a laboratory that is licensed by the Ministry of the Environment to analyze drinking water samples for lead. Both the flushed and the standing sample were found to be below the Drinking Water Quality Standard for lead (10 µg/L).

Drinking water samples were collected from Learning Jungle School for the 2008 sampling period on May 20, 2008, and were also submitted for analysis to York-Durham Regional Environmental Laboratory in Pickering, Ontario. Both the flushed and the standing sample were found to be below the Drinking Water Quality Standard for lead (10 µg/L).

- Annual lead sampling at this facility was conducted in accordance with section 5(2) of O.Reg. 243/07.

At the time of the inspection, Ms. Kaps informed the ministry that both the 2007 and 2008 annual samples were collected from the kitchen tap. Ms. Kaps collected the 2007 standing and flushed samples on September 18, 2007, at 6:45 am and 7:20 am respectively, after the water had been standing in the plumbing for a period of approximately twelve (12) hours. Ms. Kaps collected the 2008 standing and flushed samples on May 20, 2008, at 6:55 am and 7:30 am respectively, after the water had been standing in the plumbing for a period of approximately thirty-six (36) hours.

At the time of the inspection, Ms. Kaps confirmed that the standing sample consisted of the first water that came out of the tap. The flushed sample was collected after the water had been flushed from the tap for five (5) minutes, and then left standing in the plumbing until a period of thirty (30) minutes had elapsed. Thus, the 2007 and 2008 annual samples were collected in accordance with section 5(2) of O. Reg. 243/07.

- Sampling records were made of the date, time, standing period estimate, location, and the name of the person who took each sample.

A review of the sampling records, which were e-mailed to the ministry on August 21, 2008, indicated that the records were maintained in accordance with Section 5(2)(12) of O. Reg. 243/07. The 2007 and 2008 sampling records contained the dates and times that the samples were collected, the location from where the samples were collected, the name of the individual who collected the samples, and an estimate of the amount of time that the water was standing in the plumbing prior to taking the first sample.

**Water Quality Monitoring**

- Samples collected from this facility were not handled in accordance with laboratory instructions.  
At the time of the inspection, Ms. Kaps informed the ministry that she was not aware of any instructions provided to Learning Jungle School by York-Durham Regional Environmental Laboratory. Ms. Kaps confirmed with the ministry that samples were taken in accordance with section 5(2) of O. Reg. 243/07, and were submitted to the laboratory in person.
- The operator did not ensure that a Laboratory Services Notification that identified the laboratory which conducted the testing for lead was submitted to the Ministry.  
A Laboratory Services Notification (LSN) was submitted to the ministry on September 19, 2007; however, the LSN was not submitted prior to taking the lead samples as required by section 5(5) of O. Reg. 243/07. The facility has retained the services of York-Durham Regional Environmental Laboratory, which is a laboratory that is licensed by the Ministry of the Environment to analyze drinking water samples for lead.
- Required documents were available without charge during normal business hours at the facility.  
At the time of the inspection, Ms. Kaps informed the ministry that records of flushing and sampling and a copy of O. Reg. 243/07 are made available to the public without charge during normal business hours at Learning Jungle School as per section 8 of O. Reg. 243/07.
- The operator indicated that records of flushing and testing will be kept for at least six (6) years.  
Ms. Kaps informed the ministry that all required documents will be retained at Learning Jungle School for at least six (6) years as per section 9 of O. Reg. 243/07.

## NON-COMPLIANCE WITH REGULATORY REQUIREMENTS AND ACTIONS REQUIRED

This section provides a summary of all non-compliance with regulatory requirements identified during the inspection period, as well as actions required to address these issues. Further details pertaining to these items can be found in the body of the inspection report.

1. Samples collected from this facility were not handled in accordance with laboratory instructions. At the time of the inspection, Ms. Kaps informed the ministry that she was not aware of any instructions provided to Learning Jungle School by York-Durham Regional Environmental Laboratory. Ms. Kaps confirmed with the ministry that samples were taken in accordance with section 5(2) of O. Reg. 243/07, and were submitted to the laboratory in person.

### Action(s) Required:

Learning Jungle School shall obtain instructions from the laboratory for all future annual sampling as per section 5(4) of O. Reg. 243/07, and shall collect and handle all future samples in accordance with the instructions provided from the laboratory.

2. The operator did not ensure that a Laboratory Services Notification that identified the laboratory which conducted the testing for lead was submitted to the Ministry. A Laboratory Services Notification (LSN) was submitted to the ministry on September 19, 2007; however, the LSN was not submitted prior to taking the lead samples as required by section 5(5) of O. Reg. 243/07. The facility has retained the services of York-Durham Regional Environmental Laboratory, which is a laboratory that is licensed by the Ministry of the Environment to analyze drinking water samples for lead.

### Action(s) Required:

No further actions are required. Learning Jungle School is reminded to submit an updated LSN to the ministry in the event that the facility retains the services of a new licensed laboratory, and shall submit the updated LSN prior to collecting lead samples, as per section 5(5) of O. Reg. 243/07.

## **SUMMARY OF RECOMMENDATIONS AND BEST PRACTICE ISSUES**

This section provides a summary of all recommendations and best practice issues identified during the inspection period. Details pertaining to these items can be found in the body of the inspection report. In the interest of continuous improvement in the interim, it is recommended that owners and operators develop an awareness of the following issues and consider measures to address them.

**Not Applicable**

## SIGNATURES

Inspected By:

Ann Darby

Signature: (Provincial Officer)

---

Reviewed & Approved By:

Natalie Boyd

Signature: (Supervisor)

Review & Approval Date: 08/09/2008

Note: This inspection does not in any way suggest that there is or has been compliance with applicable legislation and regulations as they apply or may apply to this facility. It is, and remains, the responsibility of the owner and/or operating authority to ensure compliance with all applicable legislative and regulatory requirements.



This form has not been completed.

Ministry of the Environment,  
Conservation and Parks

# Notice of Lead Exceedance Test Results Schools, Private Schools and Child Care Centres (O. Reg. 243/07)

Fields marked with an asterisk (\*) are mandatory.

## Instructions

- Please **print** if completing by hand.
- Submit completed forms by fax or e-mail.
- Lab completes sections B, C and F.
- Facility operator completes section A, section D1 and section E and submits with sections B, C and F within 24 hours to the applicable agencies listed in section E. Facility operator also completes and submits section D2 upon Issue Resolution.

## SAC Office Use Only

AWQI Number

## Part A - Operator of Facility Verification and Consent

Fixture Identification Number/Description\* Kitchen Sink

Signature of Facility Operator \*

Date (yyyy/mm/dd)

## Part B - Laboratory Information

Laboratory Name \*

York-Durham Regional Environmental Laboratory

Licence Number \*  
2238

Unit/Suite Number	Street Number *	Street Name *
	901	McKay Road
Rural Route	Lot/Part/Block/Section	Concession
City/Town/Municipality *	Province *	Postal Code *
Pickering	Ontario	L1W 3A3
Business Phone Number *	Laboratory Written Notification Prepared By *	
905-686-0041		

Date of Exceedance O. Reg 243/07 Test Result Authorized (yyyy/mm/dd) \*  
2022/06/09

Date of Exceedance Notifications Submitted (yyyy/mm/dd) \*  
2022/06/09

Signed By

Mei Wang

Signature

Mei Wang

## Part C - Facility Information

Name of School/Private School/Child Care Centre \*

Learning Jungle Cooksville

Legal Name of School/Private School/Child Care Centre Operator (i.e. School Board) \*

Learning Jungle Cooksville

Type \*

☐ School ☐ Private School ☒ Child Care Centre

DWIS Number \*

500067679

Ministry of Education SFIS Number/School Number

Child Care Centre Licence Number

Unit/Suite Number	Street Number *	Street Name *
	78	Agnes Street
Rural Route	Lot/Part/Block/Section	Concession
City/Town/Municipality *	Province	Postal Code
Mississauga	Ontario	L5B 1J7

Other Corrective Actions (If no actions required also indicate here)

Sample Results are attached/enclosed \*

☒ Yes ☐ No

Name of person completing this section \*

Signature

Date Written Notification Submitted (yyyy/mm/dd) \*

## Part D2 - Notice of Issue Resolution

Fixture Identification Number/Description Kitchen Sink

This section is to be completed by the Operator of the School/Private School/Child Care Centre once all corrective actions required by your Medical Officer of Health have been completed. **You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results.**

In the case of co-located facilities, those facilities that have reached an agreement to have one set of samples taken on their behalf, will need to have a representative for each facility sign in the co-location section at the bottom of this page to indicate that they have complied with all corrective actions that the public health unit has required.

Name of School/Private School/Child Care Centre

Learning Jungle Cooksville

DWIS Number \*

500067679

### Contact Information

Last Name

First Name

Telephone Number ext.

Name of Local Public Health Unit

Date Initial Exceedance Submitted to the Ministry of the Environment, Conservation and Parks - Spills Action Centre (yyyy/mm/dd)

Date Resolved (yyyy/mm/dd) \*

Date Resolution Submitted (yyyy/mm/dd) \*

Additional Comments

**I have complied with all corrective actions, as indicated in Part D1, and as required by my Local Health Unit**

Last Name \*

First Name \*

Signature

Date (yyyy/mm/dd)

Sample Results are attached/enclosed \*

☐ Yes ☐ No

Co-location Signatures if applicable

1. Name of School/Private School/Child Care Centre

DWIS Number

Signed By

Last Name

First Name

Signature

Date (yyyy/mm/dd)

2. Name of School/Private School/Child Care Centre

DWIS Number

Signed By

**Contact Information**

Last Name Kaur	First Name Navpreet		
Position	Telephone Number 905-273-7023	ext.	Fax Number
Email Address cooksville@learningjungle.com			

**Part D1 - Exceedance Notifications/Corrective Actions**

Fixture Identification Number/Description Kitchen Sink

Please complete section D1 and submit with sections B, C, E and F within 24 hours to the agencies listed in Section E. Upon Issue Resolution please submit section D2 within seven days to the same authorities to whom you submitted the initial exceedance test results.

Name of School/Private School/Child Care Centre *	DWIS Number *
Learning Jungle Cooksville	500067679

Are you co-located\*\* and by agreement you are the facility taking a single set of two one liter samples to meet the sampling requirements for all co-located facilities under this agreement? \*

☐ Yes ☒ No

If you answered Yes above, list the Names and DWIS No. for the schools/private schools and child care centres you are sampling for and ensure that a copy of the test results is provided to those same facilities within 24 hours of receiving the test results from the laboratory.

Name of School/Private School/Child Care Centre *	DWIS Number *
1.	
2.	
3.	

For more than 4 co-located facilities, attach additional Section D-1's as required.

\*\* Co-located Facilities means, two or more O. Reg 243/07 facilities (school, private school, child care centre) that are served by the same plumbing system. The facilities may be either located in one building (Structure) or located in different buildings within one property.

Earliest year plumbing installed (yyyy)

*Before 1970*

Was facility open to children under the age of 18 years at the time of sampling? \*

☒ Yes ☐ No

Is this a resample test result for the same location for which a lead exceedance was previously reported? \*

☐ Yes ☒ No

Indicate where you have sent this completed form. Contact information follows in Section E \*

☒ Ministry of the Environment, Conservation and Parks Spills Action Centre ☒ Local Medical Officer of Health ☒ Ministry of Education

**Corrective Actions Required by Health Unit**

Corrective Actions	Required *	Comments
Continue Flushing (ensuring daily flushing of fixture for standing exceedances; and daily flushing of all fixtures for flushed exceedances)	<input checked="" type="checkbox"/> Yes <input type="checkbox"/> No	
Tap rendered inaccessible to Children (Specific to flushed exceedances)	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Install Filter and collect samples	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Replace Fixture and collect samples	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Increase Flushing	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Resample	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	
Notified Parents	<input type="checkbox"/> Yes <input checked="" type="checkbox"/> No	

Last Name		First Name	
Signature			Date (yyyy/mm/dd)
3. Name of School/Private School/Child Care Centre			DWIS Number
Signed By Last Name		First Name	
Signature			Date (yyyy/mm/dd)

### Part E - Exceedance Notifications

Fixture Identification Number/Description Kitchen Sink			
Name of School/Private School/Child Care Centre *			
Learning Jungle Cooksville			
Local Medical Officer of Health			
Telephone Number *	ext.	Fax Number	Email Address
Public Health Inspector Name			
Telephone Number *	ext.	Fax Number	Email Address

If you are e-mailing this section, please enter "R243 Exceedance and name of your School/Private School/Child Care Centre in Subject line.

#### Ministry of the Environment, Conservation and Parks - Spills Action Centre

Telephone: 1-800-268-6060 (toll free) or 416-325-3000

Fax: 1-800-268-6062 (toll free) or 416-325-3011

Email: [AWQI.Reporting@ontario.ca](mailto:AWQI.Reporting@ontario.ca)

#### Public schools submit exceedance results to Ministry of Education.

Fax: 416-325-4024

Public Schools contact: [EDU\\_DrinkingWater@ontario.ca](mailto:EDU_DrinkingWater@ontario.ca)

#### Child Care Centres submit exceedance results to Ministry of Education.

Child Care Centres contact: [childcare\\_ontario@ontario.ca](mailto:childcare_ontario@ontario.ca)

**Part F - Drinking Water Exceedance Results**

Name of School/Private School/Child Care Centre Learning Jungle Cooksville			DWIS Number 500067679
Local Medical Officer of Health/Public Health Inspector Name *			
Peel Public Health			

Telephone Number 905-799-7700	ext.	Fax Number	Email Address environmental@peelregion.ca
----------------------------------	------	------------	--

For Lead Samples Only

Lab Sample ID	Fixture Identification Number/Description	Sample Collection Date (yyyy/mm/dd)	Sample Type	Parameter Name	Test Result (µg/L)	Ontario Drinking Water Quality Standard
8859101	Kitchen Sink	2022/06/01	Standing	Lead	18.1	10µg/L
8859102	Kitchen Sink	2022/06/01	Flushed	Lead	2.6	10µg/L
Other Parameter Exceedances Under O. Regulation 243/07						

Lab Sample ID	Fixture Identification Number/Description	Sample Collection Date (yyyy/mm/dd)	Sample Type	Parameter Name	Test Result	Ontario Drinking Water Quality Standard
	Kitchen Sink		Standing			
	Kitchen Sink		Flushed			
Comments						



This form has not been completed.

Ministry of the Environment,  
Conservation and Parks

## Notice of Lead Exceedance Test Results Schools, Private Schools and Child Care Centres (O. Reg. 243/07)

Fields marked with an asterisk (\*) are mandatory.

### Instructions

- Please **print** if completing by hand.
- Submit completed forms by fax or e-mail.
- Lab completes sections B, C and F.
- Facility operator completes section A, section D1 and section E and submits with sections B, C and F within 24 hours to the applicable agencies listed in section E. Facility operator also completes and submits section D2 upon Issue Resolution.

### SAC Office Use Only

AWQI Number

### Part A – Operator of Facility Verification and Consent

Fixture Identification Number/Description\* Kitchen Sink

Signature of Facility Operator \*

Date (yyyy/mm/dd)

### Part B - Laboratory Information

Laboratory Name \*

York-Durham Regional Environmental Laboratory

Licence Number \*  
2238

Unit/Suite Number

Street Number \*  
901

Street Name \*  
McKay Road

Rural Route

Lot/Part/Block/Section

Concession

City/Town/Municipality \*

Pickering

Province \*

Ontario

Postal Code \*

L1W 3A3

Business Phone Number \*

905-686-0041

Laboratory Written Notification Prepared By \*

Date of Exceedance O. Reg 243/07 Test Result Authorized (yyyy/mm/dd) \*

2022/06/09

Date of Exceedance Notifications Submitted (yyyy/mm/dd) \*

2022/06/09

Signed By

Mei Wang

Signature

Mei Wang

### Part C - Facility Information

Name of School/Private School/Child Care Centre \*

Learning Jungle Cooksville

Legal Name of School/Private School/Child Care Centre Operator (i.e. School Board) \*

Learning Jungle Cooksville

Type \*

☐ School

☐ Private School

☒ Child Care Centre

DWIS Number \*

500067679

Ministry of Education SFIS Number/School Number

Child Care Centre Licence Number

Unit/Suite Number

Street Number \*  
78

Street Name \*  
Agnes Street

Rural Route

Lot/Part/Block/Section

Concession

City/Town/Municipality \*

Mississauga

Province

Ontario

Postal Code

L5B 1J7

**Contact Information**

Last Name	First Name		
Kaur	Navpreet		
Position	Telephone Number	ext.	Fax Number
	905-273-7023		
Email Address			
cooksville@learningjungle.com			

**Part D1 - Exceedance Notifications/Corrective Actions**

Fixture Identification Number/Description Kitchen Sink

Please complete section D1 and submit with sections B, C, E and F within 24 hours to the agencies listed in Section E. Upon Issue Resolution please submit section D2 within seven days to the same authorities to whom you submitted the initial exceedance test results.

Name of School/Private School/Child Care Centre *	DWIS Number *
Learning Jungle Cooksville	500067679

Are you co-located\*\* and by agreement you are the facility taking a single set of two one liter samples to meet the sampling requirements for all co-located facilities under this agreement? \*

☐ Yes ☐ No

If you answered Yes above, list the Names and DWIS No. for the schools/private schools and child care centres you are sampling for and ensure that a copy of the test results is provided to those same facilities within 24 hours of receiving the test results from the laboratory.

Name of School/Private School/Child Care Centre *	DWIS Number *
1.	
2.	
3.	

For more than 4 co-located facilities, attach additional Section D-1's as required.

\*\* Co-located Facilities means, two or more O. Reg 243/07 facilities (school, private school, child care centre) that are served by the same plumbing system. The facilities may be either located in one building (Structure) or located in different buildings within one property.

Earliest year plumbing installed (yyyy)

Was facility open to children under the age of 18 years at the time of sampling? \*

☐ Yes ☐ No

Is this a resample test result for the same location for which a lead exceedance was previously reported? \*

☐ Yes ☐ No

Indicate where you have sent this completed form. Contact information follows in Section E \*

☐ Ministry of the Environment, Conservation and Parks Spills Action Centre ☐ Local Medical Officer of Health ☐ Ministry of Education

**Corrective Actions Required by Health Unit**

Corrective Actions	Required *	Comments
Continue Flushing (ensuring daily flushing of fixture for standing exceedances; and daily flushing of all fixtures for flushed exceedances)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Tap rendered inaccessible to Children (Specific to flushed exceedances)	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Install Filter and collect samples	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Replace Fixture and collect samples	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Increase Flushing	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Resample	<input type="checkbox"/> Yes <input type="checkbox"/> No	
Notified Parents	<input type="checkbox"/> Yes <input type="checkbox"/> No	

Other Corrective Actions (If no actions required also indicate here)	
--	--

Sample Results are attached/enclosed \*

☐ Yes ☐ No

Name of person completing this section \*

Signature	Date Written Notification Submitted (yyyy/mm/dd) *
-----------	--

## Part D2 - Notice of Issue Resolution

Fixture Identification Number/Description Kitchen Sink

This section is to be completed by the Operator of the School/Private School/Child Care Centre once all corrective actions required by your Medical Officer of Health have been completed. **You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results.**

In the case of co-located facilities, those facilities that have reached an agreement to have one set of samples taken on their behalf, will need to have a representative for each facility sign in the co-location section at the bottom of this page to indicate that they have complied with all corrective actions that the public health unit has required.

Name of School/Private School/Child Care Centre Learning Jungle Cooksville	DWIS Number * 500067679
---	----------------------------

### Contact Information

Last Name	First Name	Telephone Number ext.
-----------	------------	--------------------------

Name of Local Public Health Unit

Date Initial Exceedance Submitted to the Ministry of the Environment, Conservation and Parks - Spills Action Centre (yyyy/mm/dd)

Date Resolved (yyyy/mm/dd) *	Date Resolution Submitted (yyyy/mm/dd) *
------------------------------	--

Additional Comments

**I have complied with all corrective actions, as indicated in Part D1, and as required by my Local Health Unit**

Last Name *	First Name *
-------------	--------------

Signature	Date (yyyy/mm/dd)
-----------	-------------------

Sample Results are attached/enclosed \*

☐ Yes ☐ No

Co-location Signatures if applicable

1. Name of School/Private School/Child Care Centre	DWIS Number
--	-------------

### Signed By

Last Name	First Name
-----------	------------

Signature	Date (yyyy/mm/dd)
-----------	-------------------

2. Name of School/Private School/Child Care Centre	DWIS Number
--	-------------

### Signed By

Last Name		First Name	
Signature			Date (yyyy/mm/dd)
3. Name of School/Private School/Child Care Centre			DWIS Number
Signed By Last Name		First Name	
Signature			Date (yyyy/mm/dd)

### Part E - Exceedance Notifications

Fixture Identification Number/Description Kitchen Sink

Name of School/Private School/Child Care Centre \*

Learning Jungle Cooksville

Local Medical Officer of Health

Telephone Number *	ext.	Fax Number	Email Address
--------------------	------	------------	---------------

Public Health Inspector Name

Telephone Number *	ext.	Fax Number	Email Address
--------------------	------	------------	---------------

If you are e-mailing this section, please enter "R243 Exceedance and name of your School/Private School/Child Care Centre in Subject line.

#### Ministry of the Environment, Conservation and Parks - Spills Action Centre

Telephone: 1-800-268-6060 (toll free) or 416-325-3000

Fax: 1-800-268-6062 (toll free) or 416-325-3011

Email: [AWQI.Reporting@ontario.ca](mailto:AWQI.Reporting@ontario.ca)

**Public schools** submit exceedance results to **Ministry of Education**.

Fax: 416-325-4024

Public Schools contact: [EDU\\_DrinkingWater@ontario.ca](mailto:EDU_DrinkingWater@ontario.ca)

**Child Care Centres** submit exceedance results to **Ministry of Education**.

**Child Care Centres contact:** [childcare\\_ontario@ontario.ca](mailto:childcare_ontario@ontario.ca)

**Part F - Drinking Water Exceedance Results**

Name of School/Private School/Child Care Centre  
Learning Jungle Cooksville

DWIS Number  
500067679

Local Medical Officer of Health/Public Health Inspector Name \*  
Peel Public Health

Telephone Number  
905-799-7700

ext.

Fax Number

Email Address

environmental@peelregion.ca

For Lead Samples Only

Lab Sample ID	Fixture Identification Number/Description	Sample Collection Date (yyyy/mm/dd)	Sample Type	Parameter Name	Test Result (µg/L)	Ontario Drinking Water Quality Standard
8859101	Kitchen Sink	2022/06/01	Standing	Lead	18.1	10µg/L
8859102	Kitchen Sink	2022/06/01	Flushed	Lead	2.6	10µg/L

Other Parameter Exceedances Under O. Regulation 243/07

Lab Sample ID	Fixture Identification Number/Description	Sample Collection Date (yyyy/mm/dd)	Sample Type	Parameter Name	Test Result	Ontario Drinking Water Quality Standard
	Kitchen Sink		Standing			
	Kitchen Sink		Flushed			

Comments

**Page 76**  
**is not relevant**  
**est non pertinente**

## INCIDENT REPORT

### DW System

**System Name:** R243 LEARNING  
JUNGLE SCHOOL -  
COOKSVILLE CAMPUS  
(0003557)  
**System  
Address:** 78 AGNES ST  
MISSISSAUGA ON L5B  
1J7  
**District Office:** Halton-Peel District  
**DWS #:** 500067679  
**DWS Category:** Designated Facility

### DWS Owner

**Owner Name:** 2377502 ONTARIO INC. - LEARNING  
JUNGLE SCHOOL  
**Owner Mailing  
Address:** 45 SHEPPARD Ave E TORONTO ON  
Canada M2N 5W9  
**Owner Physical  
Address:** 45 SHEPPARD AVE E TORONTO ON  
Canada M2N 5W9  
**Owner Phone:**  
**Owner Fax:**  
**Owner Email:**  
**Client Type:** COMMERCIAL

### MECP Information

**Incident Report #:** 1-N874-2  
**AWQI #:** 158632  
**Date & Time Reported to MECP:** Jun 09, 2022 00:00:33  
**Office Receiving Incident Report:** YORK-DURHAM DISTRICT  
**Incident Info Received By:** LIUCH  
**Incident Type:** O.Reg. 243 Lead Exceedance  
**Referring Inspection Report #:**  
**Incident Summary:** R243 standing 18.1 ug/L  
**MECP Response:** No Field Response  
**Was an ERP called out?** N  
**Master Incident Report #:**  
**Master AWQI #:**  
**Date & Time MECP Arrival:**  
**IDS Reference #:**



## Incident Description

Incident Date	Incident Description	Created By
Jun 09, 2022 00:00:33	R243 lead exceedance Kitchen Sink	SADMIN
Jul 11, 2022 00:01:41	R243 standing 18.1 ug/L flushed 2.6 ug/L	ROELOFSE
Aug 30, 2024 09:59:36	Lead Exceedance Lab written notice received and attached. Fixture ID: Kitchen Sink Sample taken: 2022/06/01 Standing: 18.1 ug/L (exceedance) Flushed: 2.6 ug/L	LIUCH
Aug 30, 2024 10:04:17	D1 received and attached.  Corrective actions taken: Continue daily flushing of fixture.	LIUCH

## Offences

Suspected Violation(s)/Offence(s)

## Caller/PO Information

Contact Name:  
Telephone #:  
Email Address:  
Mailing Address:

Company:  
Fax Number:

## Provincial Officer

Name: Blake Turner  
Work Unit: Drinking Water Inspections Unit  
Date: February 18, 2025  
Signature:

Badge #:  
District/Area Office: Halton-Peel District

Supervisor

**Name:** Blake Turner  
**Work Unit:** Drinking Water Inspections Unit     **District/Area Office:** Halton-Peel District  
**Date:** February 18, 2025  
**Signature:**

---

#118817.  
AWQI

## Learning Jungle School

<sup>1</sup> This form is being completed as a requirement under the Safe Drinking Water Act, 2002; O Reg. 173/03 (Flushing for Lead). Please indicate here all the faucets and/or fountains at the Centre that must be flushed every first working day of a week, (or more frequently) before the School opens and also indicate the number of minutes/seconds the faucets must remain open. Post this form at all locations where flushing is done.

[illegible]

**Water Flushing Monitoring Form**

 Centre ID: CKVL

Learning Jungle School

Identify all Faucet Location(s) Being Flushed and Duration<sup>1</sup>: Toddler washroom, Preschool washroom, Senior Preschool washroom, Staff washroom, Kitchen

<sup>1</sup> This form is being completed as a requirement under the Safe Drinking Water Act, 2002; O Reg. 173/03 (Flushing for Lead). Please indicate here all the faucets and/or fountains at the Centre that must be flushed every first working day of a week, (or more frequently) before the School opens and also indicate the number of minutes/seconds the faucets must remain open. Post this form at all locations where flushing is done.

Date of flushing (MM/DD/YY)	Start time of flushing	End time of flushing	Number of minutes/seconds flushed	Flushing Location	Staff Name
06/09/14	6:40	6:47	5min/10sec flush	Kitchen	JKaps
06/10/14	6:40	6:47	5min/10sec flush	Kitchen	JKaps
06/11/14	6:45	6:52	5min/10sec flush	Kitchen	JKaps
06/12/14	6:35	6:42	5min/10sec flush	Kitchen	Jeanine Kaps
06/13/14	6:35	6:42	5min/10sec flush	Kitchen	Jeanine Kaps
06/16/14	6:40	6:47	5min/10sec flush	Kitchen	Jeanine Kaps
06/17/14	6:30	6:37	5min/10sec flush	Kitchen	Jeanine Kaps
06/18/14	6:35	6:42	5min/10sec flush	Kitchen	Jeanine Kaps
06/19/14	6:40	6:47	5min/10sec flush	Kitchen	Jeanine Kaps
06/20/14	6:45	6:52	5min/10sec flush	Kitchen	Jeanine Kaps
06/23/14	6:45	6:52	5min/10sec flush	Kitchen	Jeanine Kaps
06/24/14	6:50	6:57	5min/10sec flush	Kitchen	Jeanine Kaps
06/25/14	6:45	6:52	5min/10sec flush	Kitchen	Jeanine Kaps
06/26/14	6:25	6:32	5min/10sec flush	Kitchen	Jeanine Kaps
06/27/14	6:30	6:37	5min/10sec flush	Kitchen	Jeanine Kaps
06/30/14	6:45	6:52	5min/10sec flush	Kitchen	Jane Vincent
07/01/14	Closed for Canada Day			long weekend	
07/02/14	6:30	6:37	5min/10sec flush	Kitchen	Jeanine Kaps
07/03/14	6:00	6:07	5min/10sec flush	Kitchen	Jeanine Kaps
07/04/14	6:30	6:37	5min/10sec flush	Kitchen	Jeanine Kaps
07/07/14	6:30	6:37	5min/10sec flush	Kitchen	Jeanine Kaps
07/08/14	6:40	6:47	5min/10sec flush	Kitchen	Jeanine Kaps
07/09/14	6:40	6:47	5min/10sec flush	Kitchen	Jeanine Kaps

## Water Flushing Monitoring Form

Centre ID: CKVL

Learning Jungle School

Identify all Faucet Location(s) Being Flushed and Duration<sup>1</sup>: Toddler washroom, Preschool washroom, Senior Preschool washroom, staff washroom, Kitchen

<sup>1</sup> This form is being completed as a requirement under the Safe Drinking Water Act, 2002; O Reg. 173/03 (Flushing for Lead). Please indicate here all the faucets and/or fountains at the Centre that must be flushed every first working day of a week, (or more frequently) before the School opens and also indicate the number of minutes/seconds the faucets must remain open. Post this form at all locations where flushing is done.

Date of flushing (MM/DD/YY)	Start time of flushing	End time of flushing	Number of minutes/seconds flushed	Flushing Location	Staff Name
05/07/14	6:42	6:47	5 min / 6 sec Flush	Kitchen	Jane Vincent
05/08/14	6:50	6:58	5 min / 10 sec Flush	Kitchen	Jane Vincent
05/09/14	6:45	6:52	5 min / 6 sec Flush	Kitchen	Jane Vincent
05/12/14	6:56	6:58	5 min / 8 sec Flush	Kitchen	Jane Vincent
05/13/14	6:45	6:53	5 min / 9 sec Flush	Kitchen	Jane Vincent
05/14/14	6:50	6:56	5 min / 10 sec Flush	Kitchen	Jane Vincent
05/15/14	6:48	6:58	7 min / 10 sec Flush	Kitchen	Jane Vincent
05/16/14	6:50	6:55	5 min / 5 sec Flush	Kitchen	Jane Vincent
Closed for Victoria day					
05/20/14	6:45	6:52	5 min / 5 sec Flush	Kitchen	Jane Vincent
05/21/14	6:50	6:56	5 min / 6 sec Flush	Kitchen	Jane Vincent
05/22/14	6:52	6:58	5 min / 5 sec Flush	Kitchen	Jane Vincent
05/23/14	6:50	6:58	5 min / 5 sec Flush	Kitchen	Jane Vincent
05/26/14	6:45	6:52	5 min / 6 sec Flush	Kitchen	Jeanine Kaps
05/27/14	6:45	6:52	5 min / 10 sec Flush	Kitchen	Jeanine Kaps
05/28/14	6:40	6:47	5 min / 10 sec Flush	Kitchen	Jeanine Kaps
05/29/14	6:35	6:42	5 min / 10 sec Flush	Kitchen	Jeanine Kaps
05/30/14	6:40	6:47	5 min / 10 sec Flush	Kitchen	Jeanine Kaps
06/02/14	6:35	6:42	5 min / 10 sec Flush	Kitchen	Jeanine Kaps
06/03/14	6:30	6:37	5 min / 10 sec Flush	Kitchen	Jeanine Kaps
06/04/14	6:45	6:52	5 min / 10 sec Flush	Kitchen	Jeanine Kaps
06/05/14	6:30	6:37	5 min / 10 sec Flush	Kitchen	Jeanine Kaps
06/06/14	6:45	6:52	5 min / 10 sec Flush	Kitchen	Jeanine Kaps

## Water Flushing Monitoring Form

Centre ID: CKVL

Learning Jungle School

Identify all Faucet Location(s) Being Flushed and Duration: Kitchen, Toddler washroom, Preschool, Senior Preschool washroom, staff washroom

\* This form is being completed as a requirement under the Safe Drinking Water Act, 2002; O Reg. 173/03 (Flushing for Lead). Please indicate here all the faucets and/or fountains at the Centre that must be flushed every first working day of a week, (or more frequently) before the School opens and also indicate the number of minutes/seconds the faucets must remain open. Post this form at all locations where flushing is done.

Date of flushing (MM/DD/YY)	Start time of flushing	End time of flushing	Number of minutes/seconds flushed	Flushing Location	Staff Name
04/04/14	6 <sup>35</sup>	6 <sup>42</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/07/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/08/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/09/14	6 <sup>50</sup>	7 <sup>00</sup>	10min/10sec flush	Kitchen	Jane Vincent
04/10/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/11/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/14/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/15/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/16/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/17/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/18/14	Closed for Good Friday				
04/21/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/22/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/23/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/24/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/25/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/28/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/29/14	6 <sup>35</sup>	6 <sup>42</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/30/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
05/01/14	6 <sup>30</sup>	6 <sup>37</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
05/02/14	6 <sup>45</sup>	6 <sup>55</sup>	10min/5sec flush	Kitchen	Jane Vincent
05/05/14	6 <sup>56</sup>	6 <sup>58</sup>	5min/10sec flush	Kitchen	Jane Vincent
05/06/14	6 <sup>47</sup>	6 <sup>55</sup>	9min/5sec flush	Kitchen	Jane Vincent

2014

## Water Flushing Monitoring Form

Centre ID: CRVL

Learning Jungle School

Identify all Faucet Location(s) Being Flushed and Duration<sup>1</sup>: Kitchen, Toddler washroom, Preschool washroom, Senior Preschool washroom, staff washroom

<sup>1</sup> This form is being completed as a requirement under the Safe Drinking Water Act, 2002; O Reg. 173/03 (Flushing for Lead). Please indicate here all the faucets and/or fountains at the Centre that must be flushed every first working day of a week, (or more frequently) before the School opens and also indicate the number of minutes/seconds the faucets must remain open. Post this form at all locations where flushing is done.

Date of flushing (MM/DD/YY)	Start time of flushing	End time of flushing	Number of minutes/seconds flushed	Flushing Location	Staff Name
03/04/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/05/14	6 <sup>30</sup>	6 <sup>37</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/06/14	6 <sup>35</sup>	6 <sup>42</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/07/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/10/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/11/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/12/14	6 <sup>30</sup>	6 <sup>37</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/13/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/14/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/17/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/18/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/19/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/20/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/21/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/24/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/25/14	6 <sup>35</sup>	6 <sup>42</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/26/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/27/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/28/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
03/31/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/01/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/02/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kaps
04/03/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kaps

**Water Flushing Monitoring Form**

 Centre ID: CKVL

Learning Jungle School

Identify all Faucet Location(s) Being Flushed and Duration<sup>1</sup>: Toddler washroom, Preschool washroom, staff washroom, senior preschool washroom, Kitchen

<sup>1</sup> This form is being completed as a requirement under the Safe Drinking Water Act, 2002; O Reg. 173/03 (Flushing for Lead). Please indicate here all the faucets and/or fountains at the Centre that must be flushed every first working day of a week, (or more frequently) before the School opens and also indicate the number of minutes/seconds the faucets must remain open. Post this form at all locations where flushing is done.

Date of flushing (MM/DD/YY)	Start time of flushing	End time of flushing	Number of minutes/seconds flushed	Flushing Location	Staff Name
01/30/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kays
01/31/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/03/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/04/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/05/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/06/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/07/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/10/14	6 <sup>40</sup>	6 <sup>47</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/11/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/12/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/13/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/14/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/17/14	Closed for family day				
02/18/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/19/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/20/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/21/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/24/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/25/14	6 <sup>51</sup>	6 <sup>58</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/26/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/27/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kays
02/28/14	6 <sup>50</sup>	6 <sup>57</sup>	5min/10sec flush	Kitchen	Jeanine Kays
03/03/14	6 <sup>45</sup>	6 <sup>52</sup>	5min/10sec flush	Kitchen	Jeanine Kays

**Water Flushing Monitoring Form**

 Centre ID: CKVL
**Learning Jungle School**

Identify all Faucet Location(s) Being Flushed and Duration<sup>1</sup>: Kitchen, Preschool washroom, Toddler washroom, Senior Preschool washroom, Staff washroom.

<sup>1</sup> This form is being completed as a requirement under the Safe Drinking Water Act, 2002; O Reg. 173/03 (Flushing for Lead). Please indicate here all the faucets and/or fountains at the Centre that must be flushed every first working day of a week, (or more frequently) before the School opens and also indicate the number of minutes/seconds the faucets must remain open. Post this form at all locations where flushing is done.

Date of flushing (MM/DD/YY)	Start time of flushing	End time of flushing	Number of minutes/seconds flushed	Flushing Location	Staff Name
12/30/13	6:50	6:58	8 min/10 sec	Kitchen	Jane Vincent
12/31/13	6:50	6:57	7 min/10 sec	Kitchen	Jane Vincent
01/01/14	Closed	for New Years Day			
01/02/14	6:45	6:52	5 min/10 sec flush	Kitchen	Jeanine Kays
01/03/14	6:45	6:52	5 min/10 sec flush	Kitchen	Jeanine Kays
01/06/14	6:50	6:57	5 min/10 sec flush	Kitchen	Jeanine Kays
01/07/14	6:50	6:57	5 min/10 sec	Kitchen	Jeanine Kays
01/08/14	6:45	6:52	5 min/10 sec	Kitchen	Jeanine Kays
01/09/14	6:50	6:57	5 min/10 sec	Kitchen	Jeanine Kays
01/10/14	6:50	6:57	5 min/10 sec	Kitchen	Jeanine Kays
01/13/14	6:50	6:57	5 min/10 sec	Kitchen	Jeanine Kays
01/14/14	6:50	6:57	5 min/10 sec	Kitchen	Jeanine Kays
01/15/14	6:50	6:57	5 min/10 sec	Kitchen	Jeanine Kays
01/16/14	6:45	6:52	5 min/10 sec	Kitchen	Jeanine Kays
01/17/14	6:45	6:52	5 min/10 sec	Kitchen	Jeanine Kays
01/20/14	6:50	6:57	5 min/10 sec	Kitchen	Jeanine Kays
01/21/14	6:50	6:57	5 min/10 sec flush	Kitchen	Jeanine Kays
01/22/14	6:45	6:52	5 min/10 sec flush	Kitchen	Jeanine Kays
01/23/14	6:45	6:52	5 min/10 sec flush	Kitchen	Jeanine Kays
01/24/14	6:45	6:52	5 min/10 sec flush	Kitchen	Jeanine Kays
01/27/14	6:50	6:57	5 min/10 sec flush	Kitchen	Jeanine Kays
01/28/14	6:50	6:57	5 min/10 sec flush	Kitchen	Jeanine Kays
01/29/14	6:45	6:52	5 min/10 sec flush	Kitchen	Jeanine Kays

## Record of Verbal Transaction

Page 1 of 1

To		From	
Name: Sandra A.		Shelley Yeudall, Provincial Officer Central Region Drinking Water Inspector	
Company Name: Peel Health			
Address:			
Tel No.	<input checked="" type="checkbox"/> Incoming <input type="checkbox"/> Outgoing <input type="checkbox"/> In Person	Date: July 11/14	Time: 3:55
Re: Learning Jungle School Property Maintenance on-site next → look @ pipe see if lead. week 8. → photo of pipe. - looks like lead - if flushed samples above 10 well HU will ask for filter or replace line. →			
Name		Signature	
Shelley Yeudall		S. Yeudall	

## Record of Verbal Transaction

Page 1 of

To		From	
Name: Jeanine Kaps.		Shelley Yeudall, Provincial Officer Central Region Drinking Water Inspector	
Company Name:			
Address:			
Tel No.	<input type="checkbox"/> Incoming <input checked="" type="checkbox"/> Outgoing <input type="checkbox"/> In Person	Date:	Time:
905-273-7023		July 11/14	3:50
Re: Learning Jungle School			
<ul style="list-style-type: none"><li>- Kitchen @ back of building</li><li>- comes in and turn all taps on and flush for same duration</li></ul>			
Name: Shelley Yeudall		Signature: <i>Sh. Yeudall</i>	

## **Liang, Mary (MECP)**

---

**From:** Angelucci, Sandra <Sandra.Angelucci@peelregion.ca>  
**Sent:** July 15, 2014 1:19 PM  
**To:** Yeudall, Shelley (ENE)  
**Subject:** FW: Learning Jungle Cooksville - Photos of water line

Hey Shelley,

Here are the photos from the Learning Jungle Cooksville.

Sandra

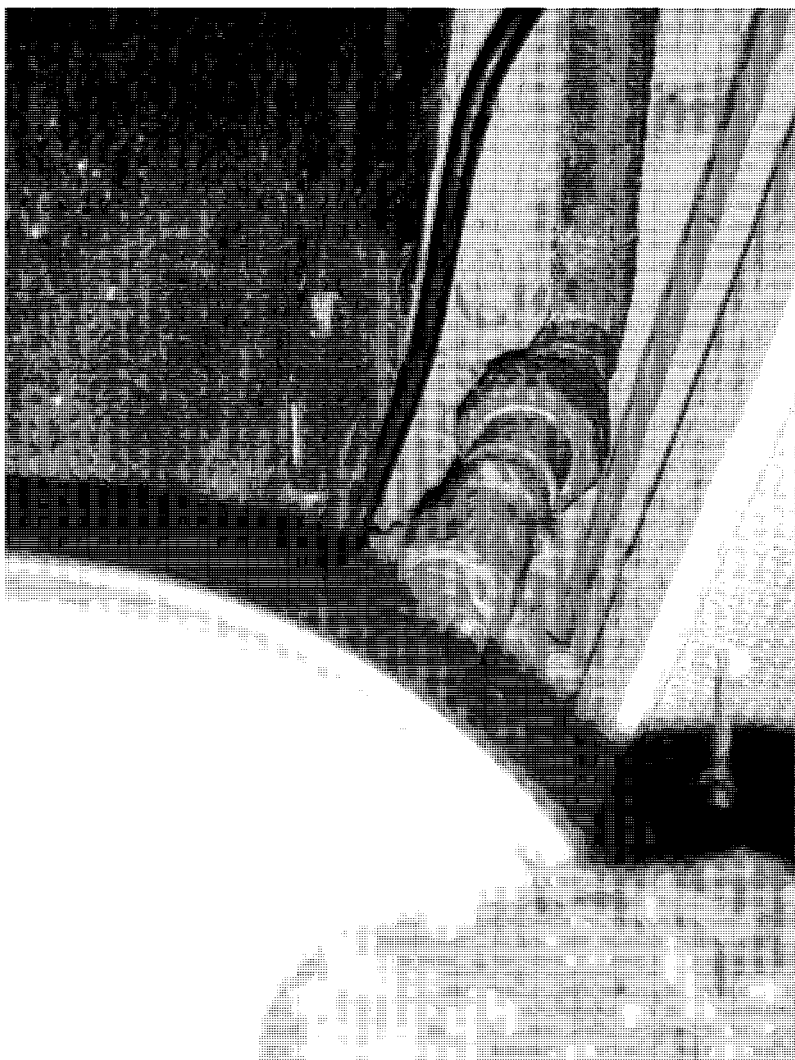
**Sandra Angelucci, BSc, BASc, COHS, CPHI (C)**  
**Public Health Inspector, Environmental Health**  
**Peel Public Health**  
7120 Hurontario St.  
PO Box 669 RPO Streetsville  
Mississauga, ON L5M 2C2  
905-791-7800 ext. 2829  
Fax: 905-565-9602

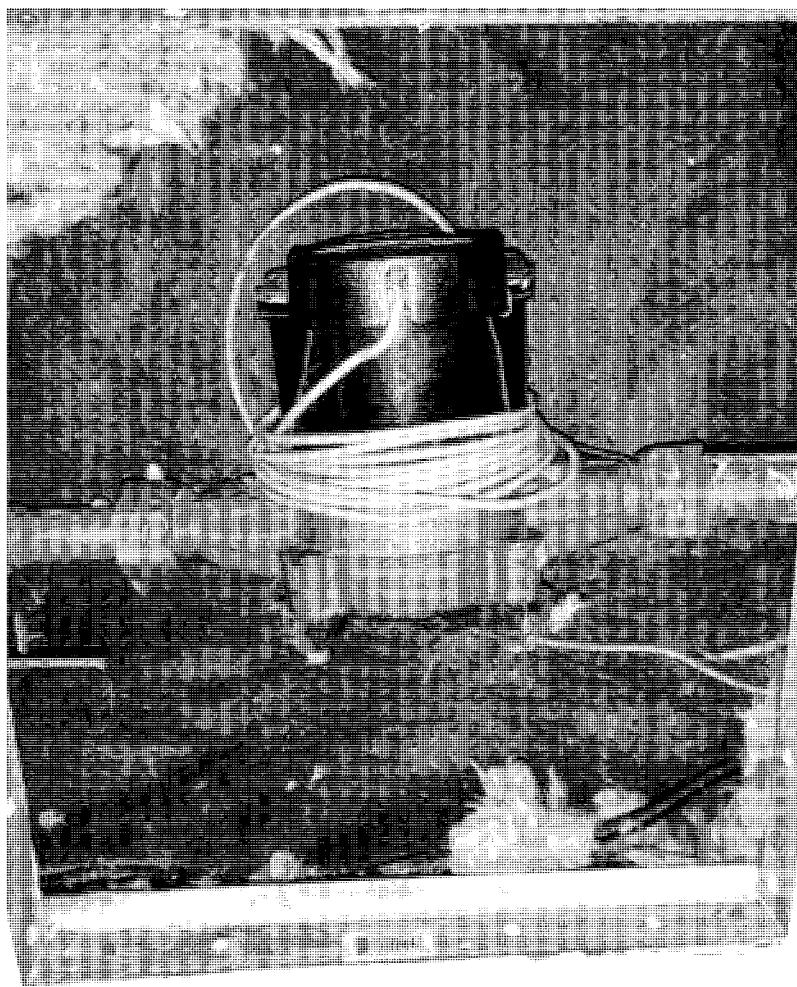
**From:** Nesmith Chingcuanco [mailto:nchingcuanco@devhaus.com]  
**Sent:** July 15, 2014 11:23 AM  
**To:** Angelucci, Sandra  
**Cc:** Jeanine Kaps; Pahai Kuo; Barbara Chang  
**Subject:** Learning Jungle Cooksville - Photos of water line

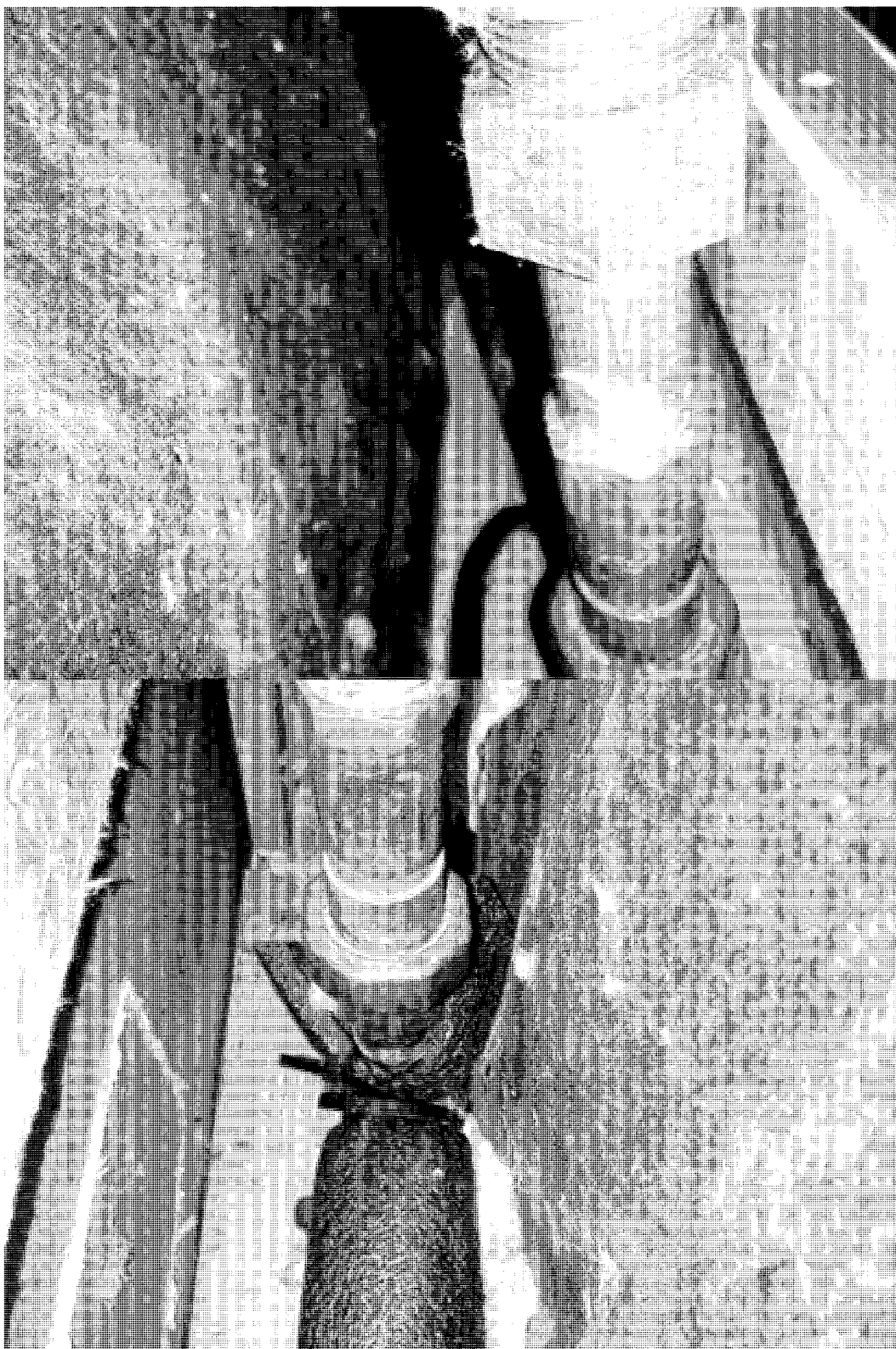
Hi Sandra,

We didn't see any lead pipes. Here are the photos we took.









Regards,  
Nesmith

---

Nesmith Chingcuanco

Devhaus Corporation  
Phone: (416) 227-0461  
Mobile: (416) 878-2631  
Skype: nesmith.chingcuanco  
[www.devhaus.com](http://www.devhaus.com)

SAC Office use only / À l'usage du CICD

AWQI Number / N° de l'avis de déclaration  
d'une eau de mauvaise qualité :

118817

Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)

AWQI Updated By Neesha Nagir

11:46 am, Jul 14, 2014

**C - 2. Notice of Issue Resolution / Avis de règlement d'une question**

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results. / L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.

In the case of co-located facilities, those facilities that have reached an agreement to have one set of samples taken on their behalf, will need to have a representative for each facility sign in the co-location section at the bottom of this page to indicate that they have complied with all corrective actions that the public health unit has required. / En ce qui concerne les établissements qui partagent une installation de plomberie, chaque établissement qui a conclu une entente prévoyant le prélèvement d'une série unique d'échantillons en son nom doit désigner un représentant qui signera la section portant sur la partage de l'installation de plomberie au bas de la présente page afin de confirmer qu'elle a pris toutes les mesures correctives prescrites par le bureau de santé publique.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
LEARNING JUNGLE SCHOOL - COOKSONNE CAMPUS	500067679

Contact Information / Personne-ressource		
Last Name / Nom de famille	First Name / Prénom	Telephone No. / N° de téléphone
CHINGOYANZO	NESMITA	(416) 227-0461 ext. / poste 140
Name of Local Public Health Unit		

Date Initial Exceedance Submitted to the Ministry of the Environment - Spills Action Centre (yyyy/mm/dd) / Date de signalement du dépassement au ministère de l'Environnement - Centre d'intervention en cas de déversement (aaaa/mm/jj)				YYYY AAAA	MM MM	DD / JJ	
				2014	07	10	
Date Resolved (yyyy/mm/dd) / Date de résolution (aaaa/mm/jj)	YYYY AAAA	MM MM	DD / JJ	Date Resolution Submitted (yyyy/mm/dd) / Date de soumission de l'avis de résolution (aaaa/mm/jj)	YYYY AAAA	MM MM	DD / JJ
	2014	07	10		2014	07	14

Additional Comments / Commentaires supplémentaires :

I have complied with all corrective actions required by my Local Public Health Unit. /

J'ai pris toutes les mesures correctives prescrites par le bureau de santé publique local. Signed by / Signé par

Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
CHINGOYANZO	NESMITA		2014/07/14

Co-location Signatures if applicable. / Signatures des représentants des établissements qui partagent une installation de plomberie, le cas échéant!

1. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie		DWIS No. / N° DWIS	
Signed by / Signé par Last Name / Nom de famille		First Name / Prénom	Signature
			Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
2. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie		DWIS No. / N° DWIS	
Signed by / Signé par Last Name / Nom de famille		First Name / Prénom	Signature
			Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
3. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie		DWIS No. / N° DWIS	
Signed by / Signé par Last Name / Nom de famille		First Name / Prénom	Signature
			Date (yyyy/mm/dd) / Date (aaaa/mm/jj)



Ministry of  
the Environment  
Ministère de  
l'Environnement

Notice of Lead Exceedance Test Results  
Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Avis de dépassement de la teneur normale en plomb  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)

B 4 B 4 2 8 5

Instructions:

- Please print if completing by hand.
- Submit completed forms by fax or e-mail.
- Lab completes sections A, B, D and E.
- Facility operator completes Section C-1 and submits with sections A,B,D and E within 24 hours to the applicable agencies listed in section D. Facility operator completes and submits Section C-2 upon Issue Resolution.

Instructions :

- Écrivez en caractères d'imprimerie si vous remplissez à la main.
- Transmettez le document rempli par télécopieur ou par courriel.
- Le laboratoire doit remplir les sections A, B, D et E.
- L'exploitant doit remplir la section C-1 et la soumettre dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. L'exploitant doit remplir la section C-2 et la soumettre une fois la question réglée.

SAC Office use only / À l'usage du CIO

AWQI Number / N° de l'avis de déclaration  
d'une eau de mauvaise qualité :

A. Laboratory Information / Renseignements sur le laboratoire

Laboratory Name / Nom du laboratoire Maxxam Analytics			Licence Number / Numéro du permis s.21		
Street No. and Name / N° et nom de la rue 6740 Campobello Road		Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section	
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité Mississauga	Province Ontario		Postal Code / Code postal L5N 2L8	
Business Telephone No. / N° de téléphone 905-817-5700		Laboratory Written Notification Prepared by / Avis écrit du laboratoire préparé par Heba Gamal			
Date of exceedance O. Reg 169/03 test result authorized / Date de la constatation du dépassement des normes du Règl. de l'Ont. 169/03		YYYY AAAA 2014	MM MM 07	DD / JJ 10	Date of exceedance notifications submitted / Date de communication du dépassement des normes
Signed by (print name) / Signé par (en lettres moulées) Heba Gamal		Signature Heba Gamal			

B. Facility Information / Renseignements sur l'établissement

Name of School/Day Nursery / Nom de l'école ou de la garderie Learning Jungle - Cooksville					
Legal Name of School/Day Nursery Operation (i.e. School Board) / Dénomination sociale de l'établissement (c.-à-d. conseil scolaire)					
Type / Type	<input type="checkbox"/> School / École	<input type="checkbox"/> Private School / École privée	<input checked="" type="checkbox"/> Day Nursery / Garderie		
DWIS No. / N° DWIS 500067679	Ministry of Education SFIS No./School No. /N° du SIS du ministère de l'Éducation / N° de l'école		Day Care Licence No. /N° du permis de garde d'enfants		
Street No. and Name / N° et nom de la rue 78 Agnes Street	Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section		
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité Mississauga	Province Ontario		Postal Code / Code postal L5B 1J7	
Contact Information / Personne-ressource Last Name / Nom de famille Kaps		First Name / Prénom Jeanine			
Position / Poste occupé		Telephone No. / N° de téléphone 905-273-7023		Fax No. / N° de télécopieur	
Email Address / Courriel jkaps@learningjungle.com					

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**C - 1. Exceedance Notifications/Corrective Actions / Avis de dépassement/Mesures correctives**

Please complete section C-1 and submit with sections A, B, D and E within 24 hours to the agencies listed in Section D. Upon Issue Resolution please submit Section C-2 within seven days to the same authorities to whom you submitted the initial exceedance test results / Remplissez la section C-1 et soumettez-la dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. Une fois la question réglée, soumettez la section C-2 dans les sept jours aux mêmes organismes ou responsables que vous avez initialement informés du ou des dépassements de la teneur normale en plomb.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie <b>LEARNING JUNGLE SCHOOL - COOKSVILLE CAMPUS</b>	DWIS No. / N° DWIS <b>500062679</b>
---	--

Are you co-located\* and by agreement you are the facility taking a single set of two one liter samples to meet the sampling requirements for all co-located facilities under this agreement? / Partagez-vous votre installation de plomberie\* et êtes-vous, en vertu d'une entente, l'établissement chargé de prélever une série unique de deux échantillons d'un litre afin de satisfaire aux exigences d'échantillonnage de tous les établissements qui partagent votre installation de plomberie, conformément à cette entente?

☐ Yes / Oui ☒ No / Non

If you answered Yes above, list the Names and DWIS No. for the schools/private schools and day nurseries you are sampling for and ensure that a copy of the test results is provided to those same facilities within 24 hours of receiving the test results from the laboratory. / Dans l'affirmative, fournissez le nom et le N° DWIS des écoles, écoles privées ou garderies au nom desquelles vous prélevez les échantillons et assurez-vous que ces établissements reçoivent une copie des résultats d'analyse dans les 24 heures suivant votre obtention des résultats d'analyse de la part du laboratoire.

Name of School / Private School / Day Nursery / Nom de l'école l'école privée ou de la garderie	DWIS No. / N° DWIS
1.	
2.	
3.	

For more than 4 co-located facilities, attach additional Section C-1's as required. /

Si plus de 4 établissements partagent l'installation de plomberie, annexe le nombre de sections C-1 nécessaires.

\*Co-located Facilities means, Two or more O. Reg 243/07 facilities (school, private school, day nursery) that are served by the same plumbing system. The facilities may be either located in one building (Structure) or located in different buildings within one property. / On dit que des établissements « partagent une installation de plomberie » quand au moins deux établissements visés par le Règl. de l'Ont. 243/07 (école, école privée ou garderie) sont alimentés par une même installation de plomberie. Les établissements peuvent être situés dans un même bâtiment (structure partagée) ou dans des bâtiments différents sur une même propriété.

Earliest year plumbing installed (yyyy) /  
Année d'installation de la plus ancienne section de plomberie (aaaa) **before 1970**

Was facility open to children under the age of 18 years at the time of sampling? /  
L'établissement était-il ouvert aux enfants de moins de 18 ans au moment du prélèvement?

☒ Yes / Oui ☐ No / Non

Is this a re-sample test result for the same location for which a lead exceedance was previously reported? /  
S'agit-il d'un prélèvement d'un robinet dont l'eau a déjà affiché un dépassement des normes de teneur en plomb?

☐ Yes / Oui ☒ No / Non

Indicate where you have sent this completed form. Contact information follows in Section D /

Précisez les autorités auxquelles vous avez transmis le présent formulaire. Leurs coordonnées figurent à la section D

☒ Ministry of the Environment Spills Action Centre  
Centre d'intervention en cas de déversement du ministère de l'Environnement

☒ Local Medical Officer of Health  
Médecin hygiéniste local


☒ Ministry of Education  
Ministère de l'Éducation

Indicate if Local Medical Officer of Health provided guidance on corrective actions. /  
Indiquez si le médecin hygiéniste local a fourni des conseils sur les mesures à prendre.

☐ Yes / Oui ☒ No / Non

If you answered Yes, list guidance provided / Dans l'affirmative, précisez les conseils fournis.

**DAIUY FUJIANG ALREADY IN EFFECT. WILL BE CONTINUED.**

Name of person completing this section (print name) / Nom de la personne qui a rempli la présente section (en lettres moulées) <b>NESMITH CHAI NG CHAI LO</b>	Signature 	Date written notification submitted (yyyy/mm/dd) / Date de réception de l'avis écrit (aaaa/mm/jj) <b>2014/07/14</b>
--	---	--

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**D. Exceedance Notifications / Avis de dépassement**

Name of School/Private School/Day Nursery / Nom de l'école, de l'école privée ou de la garderie

Leaming Jungle - Cooksville

Local Medical Officer of Health / Médecin hygiéniste local

Peel Region Health Unit

Telephone No. / N° de téléphone

9057917800

ext. /  
poste 4409

Fax No. / N° de télécopieur

(905) 789-1604

Email Address / Courriel

905-789-0398

If you are e-mailing this section, please enter "R243 Exceedance and name of your School/Private School/Day Nursery in Subject line. /  
Si vous transmettez cette section par courriel, écrivez dans le champ d'objet « Dépassement – Règl. 243 » suivi du nom de votre école, école privée ou garderie.

**Ministry of the Environment Spills Action Centre /**

**Centre d'intervention en cas de déversement du ministère de l'Environnement**

Telephone: / Téléphone : 1 800 268-6060 (toll free / sans frais) or 416 325-3000

Fax: / Télécopieur : 1 800 268-8062 (toll free / sans frais) or 416 325-3011

Email: / Courriel : moe.sac.moe@ontario.ca

**Public schools** submit exceedance results to **Ministry of Education.** /

**Les écoles publiques** doivent communiquer tout dépassement au **Ministère de l'Éducation.**

Telephone: / Téléphone : 416-325-2015

Fax: / Télécopieur : 416 325 4024

Email: / Courriel : steven.mitchell@ontario.ca

**Day nurseries** submit exceedance results to **Ministry of Education,** as per table below. /

**Les garderies** doivent communiquer tout dépassement au **Ministère de l'Éducation** conformément au tableau ci-dessous.

Region	Contact email
Toronto (Central) Region	childcare_toronto-central@ontario.ca
Toronto (West) Region	childcare_toronto-west@ontario.ca
Barrie Region	childcare_barrie@ontario.ca
London Region	childcare_london@ontario.ca
North Bay, Sudbury and Thunder Bay Regions	childcare_sudbury_tbay@ontario.ca
Ottawa Region	childcare_ottawa@ontario.ca

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**E. Drinking Water Exceedance Results / Résultats de la mesure du dépassement des normes dans l'eau potable**

Name of School/Day Nursery /  
 Nom de l'école ou de la garderie : Learning Jungle - Cooksville

For Lead Samples Only / Pour le plomb seulement

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result (µg/L) / Résultat de l'analyse (µg/L)	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario"
W762372 - Kitchen Tap - Standi	2014/06/09	Standing / Stagnante	Lead / Plomb	160	10µg/L
W762373 - Kitchen Tap- Flushed	2014/06/09	Flushed / Après rinçage	Lead / Plomb	8.7	10µg/L
		Standing / Stagnante	Lead / Plomb		10µg/L
		Flushed / Après rinçage	Lead / Plomb		10µg/L

Other Parameter Exceedances Under O. Regulation 243/07 / Autres dépassements des paramètres en vertu du Règl. de l'Ont. 243/07

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result Résultat de l'analyse	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario"
		Standing / Stagnante			
		Flushed / Après rinçage			

Comments / Commentaires

Fax # 905-789-1604 mentioned on the chain of custody failed. Form faxed over to 905-565-9602 (Peel Health Unit fax # in our records)

## INCIDENT REPORT

### DW System

**System Name:** R243 LEARNING  
JUNGLE SCHOOL -  
COOKSVILLE CAMPUS  
(0003557)  
**System  
Address:** 78 AGNES ST  
MISSISSAUGA ON L5B  
1J7  
**District Office:** Halton-Peel District  
**DWS #:** 500067679  
**DWS Category:** Designated Facility

### DWS Owner

**Owner Name:** 2377502 ONTARIO INC. - LEARNING  
JUNGLE SCHOOL  
**Owner Mailing  
Address:** 45 SHEPPARD Ave E TORONTO ON  
Canada M2N 5W9  
**Owner Physical  
Address:** 45 SHEPPARD AVE E TORONTO ON  
Canada M2N 5W9  
**Owner Phone:**  
**Owner Fax:**  
**Owner Email:**  
**Client Type:** COMMERCIAL

### MECP Information

**Incident Report #:** 1-52N2-68  
**AWQI #:** 118817  
**Date & Time Reported to MECP:** Jul 11, 2014 09:46:07  
**Office Receiving Incident Report:** SAC  
**Incident Info Received By:** SAC  
**Incident Type:** O.Reg. 243 Lead Exceedence  
**Referring Inspection Report #:**  
**Incident Summary:** R243 Lead Exceedance  
**MECP Response:** No Field Response  
**Was an ERP called out?** N  
**Master Incident Report #:**  
**Master AWQI #:**  
**Date & Time MECP Arrival:**  
**IDS Reference #:**

## Incident Description

Incident Date	Incident Description	Created By
Jul 11, 2014 09:46:07	R243 Lead Exceedance	SADMIN
Jul 21, 2014 10:52:47	Received C-1, C-2 and lab paperwork and flushing records(attached). Standing sample was 160 ug/L. Flushed sample was 8.7 ug/L. Standing exceedance only. Facility is continuing daily flushing. No further action at this time. File closed.	THOMPSJO
Jul 21, 2014 00:57:39	SY reviewed file with Sandra of HU: Reviewed site with Sandra Angelucci. Suspect lead plumbing due to old building (old masons lodge and very old area of Mississauga). Asked owner to review service coming into building with plumber who would be on-site soon anyway and send photos. See attached. Unconfirmed but noted brass fittings which would be the source. Daily flushing records reviewed and very good - in compliance. Good flushed results so non issue with HU at this time. May required plumbing changes if a flushed result above ppb received at day care.	YEUDALSH

## Parameter Table

Sample Collection Date	Sample Location	Details	Parameter	Unit	Verbal DWS Result	Verbal Lab Result	Written DWS Result	Written Lab Result	Chlorine Residual	Result mg/L
07/09/2014 00:00:00			Lead	MG/L			0.16	0.16		

## Offences

Suspected Violation(s)/Offence(s)

**Caller/PO Information**

**Contact Name:**  
**Telephone #:**  
**Email Address:**  
**Mailing Address:**

**Company:**  
**Fax Number:**

---

**Provincial Officer**

**Name:** Shelley Yeudall  
**Work Unit:** Drinking Water Inspections Unit  
**Date:** February 18, 2025  
**Signature:**

**Badge #:** 881  
**District/Area Office:** Halton-Peel District

**Supervisor**

**Name:** Demetra Koros  
**Work Unit:** Drinking Water Inspections Unit  
**Date:** February 18, 2025  
**Signature:**

**District/Area Office:** Halton-Peel District



Ontario

Ministry of  
the EnvironmentMinistère de  
l'Environnement

AWQI Created By Simon Ng

2:18 pm, Aug 13, 2013

## Lead Exceedance Test Results

## Instructions:

- Please print if completing by hand.
- Submit completed forms by fax or e-mail.
- Lab completes sections A, B, D and E.
- Facility operator completes Section C-1 and submits with sections A, B, D and E within 24 hours to the applicable agencies listed in section D. Facility operator completes and submits Section C-2 upon Issue Resolution.

## Instructions :

- Écrivez en caractères d'imprimerie si vous remplissez à la main.
- Transmettez le document rempli par télécopieur ou par courriel.
- Le laboratoire doit remplir les sections A, B, D et E.
- L'exploitant doit remplir la section C-1 et la soumettre dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. L'exploitant doit remplir la section C-2 et la soumettre une fois la question réglée.

SAC Office use only / À l'usage du CICD

AWQI Number / N° de l'avis de déclaration  
d'une eau de mauvaise qualité :

113369

## A. Laboratory Information / Renseignements sur le laboratoire

Laboratory Name / Nom du laboratoire York-Durham Regional Environmental Laboratory			Licence Number / Numéro du permis s.21		
Street No. and Name / N° et nom de la rue 901 McKay Road		Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section	
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité Pickering	Province ON		Postal Code / Code postal L1W 3A3	
Business Telephone No. / N° de téléphone 905 686-0041		Laboratory Written Notification Prepared by / Avis écrit du laboratoire préparé par Hasan Ahmed			
Date of exceedance O. Reg 169/03 test result authorized / Date de la constatation du dépassement des normes du Règl. de l'Ont. 169/03 2013 08 12			Date of exceedance notifications submitted / Date de communication du dépassement des normes 2013 08 12		
Signed by (print name) / Signé par (en lettres moulées) Hasan Ahmed			Signature 		

## B. Facility Information / Renseignements sur l'établissement

Name of School/Day Nursery / Nom de l'école ou de la garderie Learning Jungle School Cooksville					
Legal Name of School/Day Nursery Operation (i.e. School Board) / Dénomination sociale de l'établissement (c.-à-d. conseil scolaire) Learning Jungle School Cooksville					
Type / Type <input type="checkbox"/> School / École		<input type="checkbox"/> Private School / École privée		<input checked="" type="checkbox"/> Day Nursery / Garderie	
DWIS No. / N° DWIS 500067679		Ministry of Education SFIS No./School No. /N° du SIIS du ministère de l'Éducation / N° de l'école		Day Care Licence No. /N° du permis de garde d'enfants	
Street No. and Name / N° et nom de la rue 78 Agnes St.		Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section	
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité Mississauga	Province ONT		Postal Code / Code postal L5B 1J7	
Contact Information / Personne-ressource Last Name / Nom de famille Chingcuanco		First Name / Prénom Nesmith			
Position / Poste occupé		Telephone No. / N° de téléphone 905 273-7023		Fax No. / N° de télécopieur 416 229-0381	
Email Address / Courriel nchingcuanco@learningjungle.com					

**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)****C - 1. Exceedance Notifications/Corrective Actions / Avis de dépassement/Mesures correctives**

Please complete section C-1 and submit with sections A, B, D and E within 24 hours to the agencies listed in Section D. Upon Issue Resolution please submit Section C-2 within seven days to the same authorities to whom you submitted the initial exceedance test results / Remplissez la section C-1 et soumettez-la dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. Une fois la question réglée, soumettez la section C-2 dans les sept jours aux mêmes organismes ou responsables que vous avez initialement informés du ou des dépassements de la teneur normale en plomb.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
Learning Jungle School Cooksville	500067679

Are you co-located\* and by agreement you are the facility taking a single set of two one liter samples to meet the sampling requirements for all co-located facilities under this agreement? / Partagez-vous votre installation de plomberie\* et êtes-vous, en vertu d'une entente, l'établissement chargé de prélever une série unique de deux échantillons d'un litre afin de satisfaire aux exigences d'échantillonnage de tous les établissements qui partagent votre installation de plomberie, conformément à cette entente?

☐ Yes / Oui ☐ No / Non

If you answered Yes above, list the Names and DWIS No. for the schools/private schools and day nurseries you are sampling for and ensure that a copy of the test results is provided to those same facilities within 24 hours of receiving the test results from the laboratory. / Dans l'affirmative, fournissez le nom et le N° DWIS des écoles, écoles privées ou garderies au nom desquelles vous prélevez les échantillons et assurez-vous que ces établissements reçoivent une copie des résultats d'analyse dans les 24 heures suivant votre obtention des résultats d'analyse de la part du laboratoire.

Name of School / Private School / Day Nursery / Nom de l'école l'école privée ou de la garderie	DWIS No. / N° DWIS
1.	
2.	
3.	

For more than 4 co-located facilities, attach additional Section C-1's as required. /

Si plus de 4 établissements partagent l'installation de plomberie, annexe le nombre de sections C-1 nécessaires.

\*Co-located Facilities means, Two or more O. Reg 243/07 facilities (school, private school, day nursery) that are served by the same plumbing system.

The facilities may be either located in one building (Structure) or located in different buildings within one property. / On dit que des établissements « partagent une installation de plomberie » quand au moins deux établissements visés par le Règl. de l'Ont. 243/07 (école, école privée ou garderie) sont alimentés par une même installation de plomberie. Les établissements peuvent être situés dans un même bâtiment (structure partagée) ou dans des bâtiments différents sur une même propriété.

Earliest year plumbing installed (yyyy) /

Année d'installation de la plus ancienne section de plomberie (aaaa) \_\_\_\_\_

Was facility open to children under the age of 18 years at the time of sampling? /

L'établissement était-il ouvert aux enfants de moins de 18 ans au moment du prélèvement?

☐ Yes / Oui ☐ No / Non

Is this a re-sample test result for the same location for which a lead exceedance was previously reported? /

S'agit-il d'un prélèvement d'un robinet dont l'eau a déjà affiché un dépassement des normes de teneur en plomb?

☐ Yes / Oui ☐ No / Non

Indicate where you have sent this completed form. Contact information follows in Section D /

Précisez les autorités auxquelles vous avez transmis le présent formulaire. Leurs coordonnées figurent à la section D

☐ Ministry of the Environment Spills Action Centre  
Centre d'intervention en cas de déversement du ministère de l'Environnement

☐ Local Medical Officer of Health  
Médecin hygiéniste local

☐ Ministry of Children and Youth Services  
Ministère des Services à l'enfance et à la jeunesse

☐ Ministry of Education  
Ministère de l'Éducation

Indicate if Local Medical Officer of Health provided guidance on corrective actions. /

Indiquez si le médecin hygiéniste local a fourni des conseils sur les mesures à prendre.

☐ Yes / Oui ☐ No / Non

If you answered Yes, list guidance provided / Dans l'affirmative, précisez les conseils fournis.

---



---



---



---



---

Name of person completing this section (print name) / Nom de la personne qui a rempli la présente section (en lettres moulées)	Signature	Date written notification submitted (yyyy/mm/dd) / Date de réception de l'avis écrit (aaaa/mm/jj)
--	-----------	---

AWQI Number / N° de l'avis de déclaration  
d'une eau de mauvaise qualité :

## Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)

### C - 2. Notice of Issue Resolution / Avis de règlement d'une question

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. **You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results.** / L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. **Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.**

In the case of co-located facilities, those facilities that have reached an agreement to have one set of samples taken on their behalf, will need to have a representative for each facility sign in the co-location section at the bottom of this page to indicate that they have complied with all corrective actions that the public health unit has required. / En ce qui concerne les établissements qui partagent une installation de plomberie, chaque établissement qui a conclu une entente prévoyant le prélèvement d'une série unique d'échantillons en son nom doit désigner un représentant qui signera la section portant sur la partage de l'installation de plomberie au bas de la présente page afin de confirmer qu'elle a pris toutes les mesures correctives prescrites par le bureau de santé publique.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
Learning Jungle School Cooksville	500067679

Contact Information / Personne-ressource	Telephone No. / N° de téléphone
Last Name / Nom de famille	ext. / poste
First Name / Prénom	

Name of Local Public Health Unit

Date Initial Exceedance Submitted to the Ministry of the Environment - Spills Action Centre (yyyy/mm/dd) / Date de signalement du dépassement au ministère de l'Environnement - Centre d'intervention en cas de déversement (aaaa/mm/jj)			
Date Resolved (yyyy/mm/dd) / Date de résolution (aaaa/mm/jj)		Date Resolution Submitted (yyyy/mm/dd) Date de soumission de l'avis de résolution (aaaa/mm/jj)	

Additional Comments / Commentaires supplémentaires :

I have complied with all corrective actions required by my Local Public Health Unit. /

J'ai pris toutes les mesures correctives prescrites par le bureau de santé publique local. Signed by / Signé par

Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
----------------------------	---------------------	-----------	--

Co-location Signatures if applicable. / Signatures des représentants des établissements qui partagent une installation de plomberie, le cas échéant.

1. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
---	--------------------

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
---	---------------------	-----------	--

2. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
---	--------------------

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
---	---------------------	-----------	--

3. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
---	--------------------

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
---	---------------------	-----------	--

**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)****D. Exceedance Notifications / Avis de dépassement**

Name of School/Private School/Day Nursery / Nom de l'école, de l'école privée ou de la garderie

Learning Jungle School Cooksville

Local Medical Officer of Health / Médecin hygiéniste local

Peel Region Public Health

Telephone No. / N° de téléphone

905 799-7700

ext. /  
poste

Fax No. / N° de télécopieur

905 501-0305

Email Address / Courriel

Public schools submit exceedance results to Ministry of Education. /

Les écoles privées doivent communiquer tout dépassement au ministère de l'Éducation.

Day nurseries submit exceedance results to Ministry of Children and Youth Services. /

Les garderies doivent communiquer tout dépassement au ministère des Services à l'enfance et à la jeunesse.

If you are e-mailing this section, please enter "R243 Exceedance and name of your School/Private School/Day Nursery in Subject line. /

Si vous transmettez cette section par courriel, écrivez dans le champ d'objet « Dépassement – Règl. 243 » suivi du nom de votre école, école privée ou garderie.

**Ministry of the Environment Spills Action Centre /****Centre d'intervention en cas de déversement du ministère de l'Environnement**

Telephone: / Téléphone : 1 800 268-6060 (toll free / sans frais) or 416 325-3000

Fax: / Télécopieur : 1 800 268-6062 (toll free / sans frais) or 416 325-3011

Email: / Courriel : moe.sac.moe@ontario.ca

**Ministry of Education /****Ministère de l'Éducation**

Telephone: / Téléphone : 416-325-2015

Fax: / Télécopieur : 416 325 4024

Email: / Courriel : steven.mitchell@ontario.ca

Or / Ou

**Ministry of Children and Youth Services /****Ministère des Services à l'enfance et à la jeunesse**

Region Région	Office Bureau	Telephone Téléphone	Fax Télécopieur	E-mail Courriel
Central West / Centre-Ouest	Mississauga	905 567-7177 ext. 352	905 567-3215	Martina.Rodrigues@ontario.ca
Central East / Centre-Est	Newmarket	905 868-8900 ext. 5250	905-895-6804	Jennifer.Peddle@ontario.ca
Toronto	Toronto	416 325-0575	416 327-0044	Beata.Machnik@ontario.ca
South East / Sud-Est	Kingston	613 536-7275	613 536-7272	Janet.Gibbs@ontario.ca
Eastern / Est	Ottawa	613 787-5279	613 787-3990	Diane.Henrie@ontario.ca
North East / Nord-Est	North Bay	705 474-3540	705 474-5446	Yvonne.Jeffrey@ontario.ca
Northern / Nord	Kenora	705 564-4515	705 564-7194	Serious.OccurKE.css@ontario.ca
	Sault Ste. Marie	705 564-4515	705 564-7193	Serious.OccurSA.css@ontario.ca
	Sudbury	705 564-4515	705 564-7191	Serious.Occur.css@ontario.ca
	Thunder Bay	705 564-4515	705 564-9557	Serious.OccurTH.css@ontario.ca
Hamilton / Niagara	Hamilton	905 521-7344	905 546-8277	Alexia.Watkins@ontario.ca
South West / Sud-Ouest	London	519 438-5111 ext. 3423	519 672-9461	Nancy.McGregor@ontario.ca

For more information, visit the ministry website at:  
[http://www.children.gov.on.ca/mcys/english/ministry/regional\\_offices\\_contact.asp](http://www.children.gov.on.ca/mcys/english/ministry/regional_offices_contact.asp).

Pour de plus amples renseignements, visitez le site Web du Ministère à  
<http://www.children.gov.on.ca/mcys/french/ministry/regoffice.asp>

# E. Drinking Water Exceedance Results / Résultats de la mesure du dépassement des normes dans l'eau potable

Name of School/Day Nursery /  
Nom de l'école ou de la garderie : Learning Jungle School Cooksville

For Lead Samples Only / Pour le plomb seulement

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result (µg/L) / Résultat de l'analyse (µg/L)	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario"
709649 Kitchen	2013/07/30	Standing / Stagnante	Lead / Plomb	27.4	10µg/L
709650 Kitchen	2013/07/30	Flushed / Après rinçage	Lead / Plomb	4.1	10µg/L
		Standing / Stagnante	Lead / Plomb		10µg/L
		Flushed / Après rinçage	Lead / Plomb		10µg/L

Other Parameter Exceedances Under O. Regulation 243/07 / Autres dépassements des paramètres en vertu du Règl. de l'Ont. 243/07

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result Résultat de l'analyse	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario"
		Standing / Stagnante			
		Flushed / Après rinçage			

Comments / Commentaires



Ministry of  
the Environment  
Ministère de  
l'Environnement

## Notice of Lead Exceedance Test Results Schools, Private Schools and Day Nurseries (O. Reg. 243/07) Avis de dépassement de la teneur normale en plomb Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)

### Laboratory Information

In accordance with the Schools, Private Schools and Day Nurseries Regulation made under the *Safe Drinking Water Act, 2002* (O. Reg. 243/07), S. 6(1) and (2), licensed laboratories must provide written notification within 24 hours of confirming a lead exceedance (and/or other exceedance of the Standards prescribed by Schedule 1, 2 or 3 to Ontario Regulation 169/03 (Ontario Drinking Water Quality Standards) made under the Act, other than for fluoride) to the following authorities:

1. Operator of the school, private school or day nursery;
2. Ministry of the Environment Spills Action Centre;
3. Local Medical Officer of Health.

### Operator Notification and Corrective Actions

O. Reg. 243/07 requires that the operator of the school, private school or day nursery who receives a report of a water sample test result that exceeds any of the prescribed standards in Section 6(1) shall, within 24 hours, give a copy of the report to:

1. Ministry of the Environment Spills Action Centre;
2. Local Medical Officer of Health;
3. Ministry of Education in the case of a public school; or  
Ministry of Children and Youth Services in the case of a day nursery.

The operator must also take any corrective action steps as directed by the Medical Officer of Health. Failure to notify these parties in accordance with the Regulation constitutes an offence under the Act.

### Issue Resolution

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results.

### Renseignements pour les laboratoires

Conformément aux paragraphes 6(1) et (2) du *Écoles, écoles privées et garderies* pris en application de la *Loi de 2002 sur la salubrité de l'eau potable* (Règl. de l'Ont. 243/07), les laboratoires autorisés qui confirment un dépassement de la teneur normale en plomb dans l'eau potable (ou tout autre dépassement des normes, autres que pour le fluorure, prescrites par les annexes 1, 2 ou 3 du Règlement de l'Ontario 169/03 – Normes de qualité de l'eau potable de l'Ontario, pris en application de la Loi) doivent avertir par écrit les instances ci-dessous dans les 24 heures après que le résultat a été obtenu :

1. L'exploitant de l'école, de l'école privée ou de la garderie;
2. Le Centre d'intervention en cas de déversement du ministère de l'Environnement;
3. Le médecin hygiéniste local.

### Communication des résultats à l'exploitant et mesures correctives

Le Règl. de l'Ont. 243/07 oblige l'exploitant de l'école, de l'école privée ou de la garderie qui reçoit un rapport d'analyse révélant un dépassement des normes indiquées au paragraphe 6(1) pour l'eau potable à remettre une copie du rapport d'analyse en question aux instances suivantes, dans les 24 heures qui suivent la réception du rapport :

1. Le Centre d'intervention en cas de déversement du ministère de l'Environnement;
2. Le médecin hygiéniste local;
3. Le ministère de l'Éducation si l'échantillon provient d'une école publique; ou le ministère des Services à l'enfance et à la jeunesse si l'échantillon provient d'une garderie.

L'exploitant doit prendre toutes les mesures correctives prescrites par le médecin hygiéniste. Le défaut de communiquer les résultats à ces instances conformément au règlement constitue un délit.

### Règlement d'une question

L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.



Ministry of  
the Environment  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results**  
**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Avis de dépassement de la teneur normale en plomb**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**Enquiries**

Spills Action Centre  
 Ministry of the Environment  
 5775 Yonge Street, Suite 501  
 Toronto, ON M2M 4J1  
 Telephone: 1 800 268-6060 (toll free) or 416 325-3000  
 Fax: 1 800 268-6062 (toll free) or 416 325-3011  
 Website: [www.ontario.ca/drinkingwater](http://www.ontario.ca/drinkingwater)

**Renseignements complémentaires**

Centre d'intervention en cas de déversement  
 Ministère de l'Environnement  
 5775, rue Yonge, bureau 501  
 Toronto (Ontario) M2M 4J1  
 Téléphone : 1 800 268-6060 (sans frais) or 416 325-3000  
 Télécopieur : 1 800 268-6062 (sans frais) or 416 325-3011  
 Site Web : [www.ontario.ca/eaupotable](http://www.ontario.ca/eaupotable)

Information on this form is collected by Ministry of the Environment staff on behalf of the Ministry in accordance with the *Safe Drinking Water Act*, 2002 (SDWA) and its regulations. The collection, use and dissemination of this information by provincial institutions is governed by the *Freedom of Information and Protection of Privacy Act* (FIPPA). The information gathered herein will be used for the purpose of reporting lead exceedances from samples taken from schools, private schools and day nurseries under the SDWA and its regulations, and may be used for secondary purposes including investigations and law enforcement. Information contained on this form may be disclosed to other government agencies including municipalities, public health unit employees, the Ministry of Health and Long Term Care, the Ministry of Education and the Ministry of Community and Social Services pursuant to section 42 of FIPPA for the consistent purpose of administering programs related to drinking water safety.

Le personnel du ministère de l'Environnement recueille les renseignements figurant sur ce formulaire au nom du ministère conformément à la Loi de 2002 sur la salubrité de l'eau potable et à ses règlements. La collecte, l'utilisation et la communication de ces renseignements sont régies par la Loi sur l'accès à l'information et la protection de la vie privée. Les renseignements recueillis serviront à produire des rapports de dépassement de la teneur normale en plomb d'échantillons prélevés dans des écoles, des écoles privées et des garderies en vertu de la Loi de 2002 sur la salubrité de l'eau potable et de ses règlements. Ils pourront également servir à la réalisation d'enquêtes et à l'exécution de la loi. Les renseignements figurant sur ce formulaire peuvent être divulgués à d'autres organismes gouvernementaux, y compris à des services municipaux, à des services de santé publique, au ministère de la Santé et des Soins de longue durée, au ministère de l'Éducation et au ministère des Services sociaux et communautaires, conformément à l'article 42 de la Loi sur l'accès à l'information et la protection de la vie privée pour exécuter toute loi ou tout programme concernant la salubrité de l'eau potable.

AWQI Number / N° de l'avis de déclaration  
d'une eau de mauvaise qualité :

Écoles, écoles privées et garderies (Regl. de l'Environnement)

AWQI Updated By Simon Ng

2:46 pm, Aug 13, 2013

**2. Notice of Issue Resolution / Avis de règlement d'une question**

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results. / L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.

In the case of co-located facilities, those facilities that have reached an agreement to have one set of samples taken on their behalf, will need to have a representative for each facility sign in the co-location section at the bottom of this page to indicate that they have complied with all corrective actions that the public health unit has required. / En ce qui concerne les établissements qui partagent une installation de plomberie, chaque établissement qui a conclu une entente prévoyant le prélèvement d'une série unique d'échantillons en son nom doit désigner un représentant qui signera la section portant sur la partage de l'installation de plomberie au bas de la présente page afin de confirmer qu'elle a pris toutes les mesures correctives prescrites par le bureau de santé publique.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
Learning Jungle School Cooksville	500067679

Contact Information / Personne-ressource		Telephone No. / N° de téléphone
Last Name / Nom de famille	First Name / Prénom	ext. / poste
Kuo	PAHAJ	416. 227 0461 340

Name of Local Public Health Unit

Date Initial Exceedance Submitted to the Ministry of the Environment - Spills Action Centre (yyyy/mm/dd) / Date de signalement du dépassement au ministère de l'Environnement - Centre d'intervention en cas de déversement (aaaa/mm/jj)	2013	08	13
Date Resolved (yyyy/mm/dd) / Date de résolution (aaaa/mm/jj)	2013	08	15
Date Resolution Submitted (yyyy/mm/dd) / Date de soumission de l'avis de résolution (aaaa/mm/jj)	2013	08	12

Additional Comments / Commentaires supplémentaires :

FLUSHED SAMPLE IS WITHIN LIMIT. NO ADDITIONAL ACTION WILL BE DONE  
OTHER THAN DAILY FLUSHING OF WATER.

I have complied with all corrective actions required by my Local Public Health Unit. / I AM ABLE TO REACH PUBLIC HEALTH  
J'ai pris toutes les mesures correctives prescrites par le bureau de santé publique local. Signed by / Signé par

Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
Kuo	PAHAJ		2013/08/13

Co-location Signatures if applicable. / Signatures des représentants des établissements qui partagent une installation de plomberie, le cas échéant.

1. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
Signed by / Signé par Last Name / Nom de famille	First Name / Prénom Signature Date (yyyy/mm/dd) / Date (aaaa/mm/jj)

2. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
Signed by / Signé par Last Name / Nom de famille	First Name / Prénom Signature Date (yyyy/mm/dd) / Date (aaaa/mm/jj)

3. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
Signed by / Signé par Last Name / Nom de famille	First Name / Prénom Signature Date (yyyy/mm/dd) / Date (aaaa/mm/jj)

Ministry of  
the EnvironmentMinistère de  
l'EnvironnementAWQI Updated By **Simon Ng**

2:45 pm, Aug 13, 2013

## Notice of Lead Exceedance Test Results

Schools, Private Schools and Day Nurseries (O. Reg. 243/07)

Avis de dépassement de la teneur normale en plomb  
Écoles privées et garderies (Règl. de l'Ont. 243/07)

## Instructions:

- Please print if completing by hand.
- Submit completed forms by fax or e-mail.
- Lab completes sections A, B, D and E.
- Facility operator completes Section C-1 and submits with sections A, B, D and E within 24 hours to the applicable agencies listed in section D. Facility operator completes and submits Section C-2 upon Issue Resolution.

## Instructions :

- Écrivez en caractères d'imprimerie si vous remplissez à la main
- Transmettez le document rempli par télécopieur ou par courriel.
- Le laboratoire doit remplir les sections A, B, D et E.
- L'exploitant doit remplir la section C-1 et la soumettre dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. L'exploitant doit remplir la section C-2 et la soumettre une fois la question réglée.

SAC Office use only / À l'usage du CIGD

AWQI Number / N° de l'avis de déclaration  
d'une eau de mauvaise qualité :

113369

## A. Laboratory Information / Renseignements sur le laboratoire

Laboratory Name / Nom du laboratoire <b>York-Durham Regional Environmental Laboratory</b>			Licence Number / Numéro du permis s.21		
Street No. and Name / N° et nom de la rue <b>901 McKay Road</b>		Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section	
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité <b>Pickering</b>	Province <b>ON</b>		Postal Code / Code postal <b>L1W 3A3</b>	
Business Telephone No. / N° de téléphone <b>905 686-0041</b>		Laboratory Written Notification Prepared by / Avis écrit du laboratoire préparé par <b>Hasan Ahmed</b>			
Date of exceedance O. Reg 169/03 test result authorized / Date de la constatation du dépassement des normes du Règl. de l'Ont. 169/03		<b>2013</b>	<b>08</b>	<b>12</b>	Date of exceedance notifications submitted / Date de communication du dépassement des normes
Signed by (print name) / Signé par (en lettres moulées) <b>Hasan Ahmed</b>		Signature 			

## B. Facility Information / Renseignements sur l'établissement

Name of School/Day Nursery / Nom de l'école ou de la garderie <b>Learning Jungle School Cooksville</b>					
Legal Name of School/Day Nursery Operation (i.e. School Board) / Dénomination sociale de l'établissement (c.-à-d. conseil scolaire) <b>Learning Jungle School Cooksville</b>					
Type / Type	<input type="checkbox"/> School / École	<input type="checkbox"/> Private School / École privée	<input checked="" type="checkbox"/> Day Nursery / Garderie		
DWIS No. / N° DWIS <b>500067679</b>	Ministry of Education SFIS No./School No. /N° du SIS du ministère de l'Éducation / N° de l'école		Day Care Licence No. /N° du permis de garde d'enfants		
Street No. and Name / N° et nom de la rue <b>78 Agnes St.</b>	Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section		
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité <b>Mississauga</b>	Province <b>ONT</b>		Postal Code / Code postal <b>L5B 1J7</b>	
Contact Information / Personne-ressource Last Name / Nom de famille <b>Chingcuanco</b>		First Name / Prénom <b>Nesmith</b>			
Position / Poste occupé		Telephone No. / N° de téléphone <b>905 273-7023</b>		Fax No. / N° de télécopieur <b>416 229-0381</b>	
Email Address / Courriel <b>nchingcuanco@learningjungle.com</b>					

## Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)

**C - 1. Exceedance Notifications/Corrective Actions / Avis de dépassement/Mesures correctives**

Please complete section C-1 and submit with sections A, B, D and E within 24 hours to the agencies listed in Section D. Upon Issue Resolution please submit Section C-2 within seven days to the same authorities to whom you submitted the initial exceedance test results / Remplissez la section C-1 et soumettez-la dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. Une fois la question réglée, soumettez la section C-2 dans les sept jours aux mêmes organismes ou responsables que vous avez initialement informés du ou des dépassements de la teneur normale en plomb.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie

DWIS No. / N° DWIS

Learning Jungle School Cooksville

500067679

Are you co-located\* and by agreement you are the facility taking a single set of two one liter samples to meet the sampling requirements for all co-located facilities under this agreement? / Partagez-vous votre installation de plomberie\* et êtes-vous, en vertu d'une entente, l'établissement chargé de prélever une série unique de deux échantillons d'un litre afin de satisfaire aux exigences d'échantillonnage de tous les établissements qui partagent votre installation de plomberie, conformément à cette entente?

☐ Yes / Oui ☒ No / Non

If you answered Yes above, list the Names and DWIS No. for the schools/private schools and day nurseries you are sampling for and ensure that a copy of the test results is provided to those same facilities within 24 hours of receiving the test results from the laboratory. / Dans l'affirmative, fournissez le nom et le N° DWIS des écoles, écoles privées ou garderies au nom desquelles vous prélevez les échantillons et assurez-vous que ces établissements reçoivent une copie des résultats d'analyse dans les 24 heures suivant votre obtention des résultats d'analyse de la part du laboratoire.

Name of School / Private School / Day Nursery / Nom de l'école l'école privée ou de la garderie

DWIS No. / N° DWIS

1.

2.

3.

For more than 4 co-located facilities, attach additional Section C-1's as required. /

Si plus de 4 établissements partagent l'installation de plomberie, annexe le nombre de sections C-1 nécessaires.

\*Co-located Facilities means, Two or more O. Reg 243/07 facilities (school, private school, day nursery) that are served by the same plumbing system.

The facilities may be either located in one building (Structure) or located in different buildings within one property. / On dit que des établissements « partagent une installation de plomberie » quand au moins deux établissements visés par le Règl. de l'Ont. 243/07 (école, école privée ou garderie) sont alimentés par une même installation de plomberie. Les établissements peuvent être situés dans un même bâtiment (structure partagée) ou dans des bâtiments différents sur une même propriété.

Earliest year plumbing installed (yyyy) /

Année d'installation de la plus ancienne section de plomberie (aaaa) Before 1990

Was facility open to children under the age of 18 years at the time of sampling? /

☒ Yes / Oui ☐ No / Non

L'établissement était-il ouvert aux enfants de moins de 18 ans au moment du prélèvement?

Is this a re-sample test result for the same location for which a lead exceedance was previously reported? /

☐ Yes / Oui ☒ No / Non

S'agit-il d'un prélèvement d'un robinet dont l'eau a déjà affiché un dépassement des normes de teneur en plomb?

Indicate where you have sent this completed form. Contact information follows in Section D /

Précisez les autorités auxquelles vous avez transmis le présent formulaire. Leurs coordonnées figurent à la section D

☒ Ministry of the Environment Spills Action Centre  
Centre d'intervention en cas de déversement du ministère de l'Environnement

☐ Local Medical Officer of Health  
Médecin hygiéniste local

☐ Ministry of Children and Youth Services  
Ministère des Services à l'enfance et à la jeunesse

☒ Ministry of Education  
Ministère de l'Éducation

Indicate if Local Medical Officer of Health provided guidance on corrective actions. /

Indiquez si le médecin hygiéniste local a fourni des conseils sur les mesures à prendre.

☐ Yes / Oui ☒ No / Non

If you answered Yes, list guidance provided / Dans l'affirmative, précisez les conseils fournis.

BASED ON TEST RESULTS, FLUSHED SAMPLE OF WATERSHOWS LEAD CONTENT WITHIN PRESCRIBED LIMITS.DAILY FLUSHING ALREADY IN EFFECT WILL BE CONTINUEDName of person completing this section (print name) /  
Nom de la personne qui a rempli la présente section  
(en lettres moulées)

PAHA1 KUO

Signature

Date written notification submitted  
(yyyy/mm/dd) / Date de réception  
de l'avis écrit (aaaa/mm/jj)

2013/08/13

**Écoles, écoles privées et garderies (Règl. de l'Ont. 243)****D. Exceedance Notifications / Avis de dépassement**

Name of School/Private School/Day Nursery / Nom de l'école, de l'école privée ou de la garderie

Learning Jungle School Cooksville

Local Medical Officer of Health / Médecin hygiéniste local

Peel Region Public Health

Telephone No. / N° de téléphone

905 799-7700

ext. /  
poste

Fax No. / N° de télécopieur

905 501-0305

Email Address / Courriel

Public schools submit exceedance results to Ministry of Education. /

Les écoles privées doivent communiquer tout dépassement au ministère de l'Éducation.

Day nurseries submit exceedance results to Ministry of Children and Youth Services. /

Les garderies doivent communiquer tout dépassement au ministère des Services à l'enfance et à la jeunesse.

If you are e-mailing this section, please enter "R243 Exceedance and name of your School/Private School/Day Nursery in Subject line. /  
Si vous transmettez cette section par courriel, écrivez dans le champ d'objet « Dépassement – Règl. 243 » suivi du nom de votre école, école privée ou garderie.

**Ministry of the Environment Spills Action Centre /****Centre d'intervention en cas de déversement du ministère de l'Environnement**

Telephone: / Téléphone : 1 800 268-5060 (toll free / sans frais) or 416 325-3000

Fax: / Télécopieur : 1 800 268-5062 (toll free / sans frais) or 416 325-3011

Email: / Courriel : moe.sac@moe.gov.on.ca

**Ministry of Education /****Ministère de l'Éducation**

Telephone: / Téléphone : 416-325-2015

Fax: / Télécopieur : 416 325 4024

Email: / Courriel : steven.mitchell@ontario.ca

Or / Ou

**Ministry of Children and Youth Services /****Ministère des Services à l'enfance et à la jeunesse**

Region Région	Office Bureau	Telephone Téléphone	Fax Télécopieur	E-mail Courriel
Central West / Centre-Ouest	Mississauga	905 567-7177 ext. 352	905 567-3215	Martina.Rodrigues@ontario.ca
Central East / Centre-Est	Newmarket	905 868-8900 ext. 5250	905-895-6804	Jennifer.Peddle@ontario.ca
Toronto	Toronto	416 325-0575	416 327-0044	Beata.Machnik@ontario.ca
South East / Sud-Est	Kingston	613 536-7275	613 536-7272	Janet.Gibbs@ontario.ca
Eastern / Est	Ottawa	613 787-5279	613 787-3990	Diane.Henrie@ontario.ca
North East / Nord-Est	North Bay	705 474-3540	705 474-5446	Yvonne.Jeffrey@ontario.ca
Northern / Nord	Kenora	705 584-4515	705 584-7194	Serious.OccurKE.css@ontario.ca
	Sault Ste. Marie	705 584-4515	705 584-7193	Serious.OccurSA.css@ontario.ca
	Sudbury	705 584-4515	705 584-7191	Serious.Occur.css@ontario.ca
	Thunder Bay	705 584-4515	705 584-9557	Serious.OccurTH.css@ontario.ca
Hamilton / Niagara	Hamilton	905 521-7344	905 546-8277	Alexia.Watkins@ontario.ca
South West / Sud-Ouest	London	519 438-5111 ext 3423	519 672-9461	Nancy.McGregor@ontario.ca

For more information, visit the ministry website at:  
[http://www.children.gov.on.ca/mcys/english/ministry/regional\\_offices\\_contact.asp](http://www.children.gov.on.ca/mcys/english/ministry/regional_offices_contact.asp)

Pour de plus amples renseignements, visitez le site Web du Ministère à  
<http://www.children.gov.on.ca/mcys/french/ministry/regoffice.asp>

Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)

**E. Drinking Water Exceedance Results / Résultats de la mesure du dépassement des normes dans l'eau potable**

Name of School/Day Nursery /  
Nom de l'école ou de la garderie : Learning Jungle School Cooksville

For Lead Samples Only / Pour le plomb seulement

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result (µg/L) / Résultat de l'analyse (µg/L)	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario"
709649 Kitchen	2013/07/30	Standing / Stagnante	Lead / Plomb	27.4	10µg/L
709650 Kitchen	2013/07/30	Flushed / Après rinçage	Lead / Plomb	4.1	10µg/L
		Standing / Stagnante	Lead / Plomb		10µg/L
		Flushed / Après rinçage	Lead / Plomb		10µg/L

Other Parameter Exceedances Under O. Regulation 243/07 / Autres dépassements des paramètres en vertu du Règl. de l'Ont. 243/07

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result Résultat de l'analyse	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario"
		Standing / Stagnante			
		Flushed / Après rinçage			

Comments / Commentaires



Ministry of  
the Environment  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results**  
**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Avis de dépassement de la teneur normale en plomb**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

### Laboratory Information

In accordance with the Schools, Private Schools and Day Nurseries Regulation made under the *Safe Drinking Water Act, 2002* (O.Reg. 243/07), S. 6(1) and (2), licensed laboratories must provide written notification within 24 hours of confirming a lead exceedance (and/or other exceedance of the Standards prescribed by Schedule 1, 2 or 3 to Ontario Regulation 169/03 (Ontario Drinking Water Quality Standards) made under the Act, other than for fluoride) to the following authorities:

1. Operator of the school, private school or day nursery;
2. Ministry of the Environment Spills Action Centre;
3. Local Medical Officer of Health.

### Operator Notification and Corrective Actions

O. Reg. 243/07 requires that the operator of the school, private school or day nursery who receives a report of a water sample test result that exceeds any of the prescribed standards in Section 6(1) shall, within 24 hours, give a copy of the report to:

1. Ministry of the Environment Spills Action Centre;
2. Local Medical Officer of Health;
3. Ministry of Education in the case of a public school; or  
Ministry of Children and Youth Services in the case of a day nursery.

The operator must also take any corrective action steps as directed by the Medical Officer of Health. Failure to notify these parties in accordance with the Regulation constitutes an offence under the Act.

### Issue Resolution

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results.

### Renseignements pour les laboratoires

Conformément aux paragraphes 6(1) et (2) du *Écoles, écoles privées et garderies* pris en application de la *Loi de 2002 sur la salubrité de l'eau potable* (Règl. de l'Ont. 243/07), les laboratoires autorisés qui confirment un dépassement de la teneur normale en plomb dans l'eau potable (ou tout autre dépassement des normes, autres que pour le fluorure, prescrites par les annexes 1, 2 ou 3 du Règlement de l'Ontario 169/03 – Normes de qualité de l'eau potable de l'Ontario, pris en application de la Loi) doivent avvertir par écrit les instances ci-dessous dans les 24 heures après que le résultat a été obtenu :

1. L'exploitant de l'école, de l'école privée ou de la garderie;
2. Le Centre d'intervention en cas de déversement du ministère de l'Environnement;
3. Le médecin hygiéniste local.

### Communication des résultats à l'exploitant et mesures correctives

Le Règl. de l'Ont. 243/07 oblige l'exploitant de l'école, de l'école privée ou de la garderie qui reçoit un rapport d'analyse révélant un dépassement des normes indiquées au paragraphe 6(1) pour l'eau potable à remettre une copie du rapport d'analyse en question aux instances suivantes, dans les 24 heures qui suivent la réception du rapport :

1. Le Centre d'intervention en cas de déversement du ministère de l'Environnement;
2. Le médecin hygiéniste local;
3. Le ministère de l'Éducation si l'échantillon provient d'une école publique; ou le ministère des Services à l'enfance et à la jeunesse si l'échantillon provient d'une garderie.

L'exploitant doit prendre toutes les mesures correctives prescrites par le médecin hygiéniste. Le défaut de communiquer les résultats à ces instances conformément au règlement constitue un délit.

### Règlement d'une question

L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.



Ministry of  
the Environment  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results  
Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Avis de dépassement de la teneur normale en plomb  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

#### Enquiries

Spills Action Centre  
Ministry of the Environment  
5775 Yonge Street, Suite 501  
Toronto, ON M2M 4J1

Telephone: 1 800 268-6060 (toll free) or 416 325-3000

Fax: 1 800 268-6062 (toll free) or 416 325-3011

Website: [www.ontario.ca/drinkingwater](http://www.ontario.ca/drinkingwater)

#### Renseignements complémentaires

Centre d'intervention en cas de déversement  
Ministère de l'Environnement  
5775, rue Yonge, bureau 501  
Toronto (Ontario) M2M 4J1

Téléphone : 1 800 268-6060 (sans frais) or 416 325-3000

Télécopieur : 1 800 268-6062 (sans frais) or 416 325-3011

Site Web : [www.ontario.ca/eaupotable](http://www.ontario.ca/eaupotable)

Information on this form is collected by Ministry of the Environment staff on behalf of the Ministry in accordance with the *Safe Drinking Water Act, 2002* (SDWA) and its regulations. The collection, use and dissemination of this information by provincial institutions is governed by the *Freedom of Information and Protection of Privacy Act* (FIPPA). The information gathered herein will be used for the purpose of reporting lead exceedances from samples taken from schools, private schools and day nurseries under the SDWA and its regulations, and may be used for secondary purposes including investigations and law enforcement. Information contained on this form may be disclosed to other government agencies including municipalities, public health unit employees, the Ministry of Health and Long Term Care, the Ministry of Education and the Ministry of Community and Social Services pursuant to section 42 of FIPPA for the consistent purpose of administering programs related to drinking water safety.

Le personnel du ministère de l'Environnement recueille les renseignements figurant sur ce formulaire au nom du ministère conformément à la Loi de 2002 sur la salubrité de l'eau potable et à ses règlements. La collecte, l'utilisation et la communication de ces renseignements sont régies par la Loi sur l'accès à l'information et la protection de la vie privée. Les renseignements recueillis serviront à produire des rapports de dépassement de la teneur normale en plomb d'échantillons prélevés dans des écoles, des écoles privées et des garderies en vertu de la Loi de 2002 sur la salubrité de l'eau potable et de ses règlements. Ils pourront également servir à la réalisation d'enquêtes et à l'exécution de la loi. Les renseignements figurant sur ce formulaire peuvent être divulgués à d'autres organismes gouvernementaux, y compris à des services municipaux, à des services de santé publique, au ministère de la Santé et des Soins de longue durée, au ministère de l'Éducation et au ministère des Services sociaux et communautaires, conformément à l'article 42 de la Loi sur l'accès à l'information et la protection de la vie privée pour exécuter toute loi ou tout programme concernant la salubrité de l'eau potable.

## INCIDENT REPORT

### DW System

**System Name:** R243 LEARNING  
JUNGLE SCHOOL -  
COOKSVILLE CAMPUS  
(0003557)  
**System  
Address:** 78 AGNES ST  
MISSISSAUGA ON L5B  
1J7  
**District Office:** Halton-Peel District  
**DWS #:** 500067679  
**DWS Category:** Designated Facility

### DWS Owner

**Owner Name:** LEARNING JUNGLE SCHOOL  
**Owner Mailing  
Address:** 45 SHEPPARD Ave E TORONTO ON  
Canada M2N 5W9  
**Owner Physical  
Address:** 45 SHEPPARD AVE E TORONTO ON  
Canada M2N 5W9  
**Owner Phone:**  
**Owner Fax:**  
**Owner Email:**  
**Client Type:** COMMERCIAL

### MECP Information

**Incident Report #:** 1-4B45-4  
**AWQI #:** 113369  
**Date & Time Reported to MECP:** Aug 13, 2013 14:26:23  
**Office Receiving Incident Report:** YORK-DURHAM DISTRICT  
**Incident Info Received By:** JACKSOBR  
**Incident Type:** O.Reg. 243 Lead Exceedence  
**Referring Inspection Report #:**  
**Incident Summary:** R243 lead exceedance  
**MECP Response:** No Field Response  
**Was an ERP called out?** N  
**Master Incident Report #:**  
**Master AWQI #:**  
**Date & Time MECP Arrival:**  
**IDS Reference #:**

## Incident Description

Incident Date	Incident Description	Created By
Aug 13, 2013 14:26:23	R243 lead exceedance	SADMIN
Aug 14, 2013 09:57:36	Received paperwork from the lab on August 13th, 2013. A standing sample was taken at Learning Jungle School (Cooksville) on July 30th, 2013 containing 27.4 ug/L lead. The flushed sample was not adverse containing 4.1 ug/L lead.	JACKSOBR
Aug 14, 2013 10:05:04	Received paperwork from the school on August 13th, 2013. The school is to flush the system daily as advised by the Peel Region Health Unit. No further action is required.	JACKSOBR

## Parameter Table

Sample Collection Date	Sample Location	Details	Parameter	Unit	Verbal DWS Result	Verbal Lab Result	Written DWS Result	Written Lab Result	Chlorine Residual	Result mg/L
07/30/2013 00:00:00			Lead	MG/L			0.0274	0.0274		

## Offences

Suspected Violation(s)/Offence(s)

**Caller/PO Information**

**Contact Name:**  
**Telephone #:**  
**Email Address:**  
**Mailing Address:**

**Company:**  
**Fax Number:**

---

**Provincial Officer**

**Name:** Shelley Yeudall  
**Work Unit:** Drinking Water Inspections Unit  
**Date:** February 18, 2025  
**Signature:**

**Badge #:** 881  
**District/Area Office:** Halton-Peel District

**Supervisor**

**Name:** Demetra Koros  
**Work Unit:** Drinking Water Inspections Unit  
**Date:** February 18, 2025  
**Signature:**

**District/Area Office:** Halton-Peel District



AWQI Created By **Ontario**  
Ministry of the Environment  
Ministère de l'Environnement

2:03 pm, Aug 21, 2012

**Notice of Lead Exceedance Test Results**  
**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Avis de dépassement de la teneur normale en plomb**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**Lead Exceedance Test Results**

**Instructions:**

- Please print if completing by hand.
- Submit completed forms by fax or e-mail.
- Lab completes sections A, B, D and E.
- Facility operator completes Section C-1 and submits with sections A,B,D and E within 24 hours to the applicable agencies listed in section D. Facility operator completes and submits Section C-2 upon Issue Resolution.

**Instructions :**

- Écrivez en caractères d'imprimerie si vous remplissez à la main.
- Transmettez le document rempli par télécopieur ou par courriel.
- Le laboratoire doit remplir les sections A, B, D et E.
- L'exploitant doit remplir la section C-1 et la soumettre dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. L'exploitant doit remplir la section C-2 et la soumettre une fois la question réglée.

SAC Office use only / À l'usage du CICD

AWQI Number / N° de l'avis de déclaration d'une eau de mauvaise qualité :

108053

**A. Laboratory Information / Renseignements sur le laboratoire**

Laboratory Name / Nom du laboratoire <b>York-Durham Regional Environmental Laboratory</b>			Licence Number / Numéro du permis <b>s.21</b>		
Street No. and Name / N° et nom de la rue <b>901 McKay Road</b>		Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section	
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité <b>Pickering</b>	Province <b>ON</b>	Postal Code / Code postal <b>L1W 3A3</b>		
Business Telephone No. / N° de téléphone <b>905 686-0041</b>		Laboratory Written Notification Prepared by / Avis écrit du laboratoire préparé par <b>Hasan Ahmed</b>			
Date of exceedance O. Reg 169/03 test result authorized / Date de la constatation du dépassement des normes du Règl. de l'Ont. 169/03		<b>2012</b>	<b>08</b>	<b>21</b>	Date of exceedance notifications submitted / Date de communication du dépassement des normes
Signed by (print name) / Signé par (en lettres moulées) <b>Hasan Ahmed</b>		Signature 			

**B. Facility Information / Renseignements sur l'établissement**

Name of School/Day Nursery / Nom de l'école ou de la garderie <b>Learning Jungle School, Cooksville Campus</b>					
Legal Name of School/Day Nursery Operation (i.e. School Board) / Dénomination sociale de l'établissement (c.-à-d. conseil scolaire) <b>Learning Jungle School, Cooksville Campus</b>					
Type / Type	<input type="checkbox"/> School / École	<input type="checkbox"/> Private School / École privée	<input checked="" type="checkbox"/> Day Nursery / Garderie		
DWIS No. / N° DWIS <b>500067679</b>	Ministry of Education SFIS No./School No. /N° du SIS du ministère de l'Éducation / N° de l'école		Day Care Licence No. /N° du permis de garde d'enfants		
Street No. and Name / N° et nom de la rue <b>78 Agnes Street.</b>		Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section	
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité <b>Mississauga</b>	Province <b>ONT.</b>	Postal Code / Code postal <b>L5B 1J7</b>		
Contact Information / Personne-ressource Last Name / Nom de famille <b>Chingcuanco</b>		First Name / Prénom <b>Nesmith</b>			
Position / Poste occupé		Telephone No. / N° de téléphone <b>905 273-7023</b>		Fax No. / N° de télécopieur <b>416 229-0381</b>	
Email Address / Courriel <b>nchingcuanco@learningjungle.com</b>					

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**D. Exceedance Notifications / Avis de dépassement**

Name of School/Private School/Day Nursery / Nom de l'école, de l'école privée ou de la garderie

**Learning Jungle School, Cooksville Campus**

Local Medical Officer of Health / Médecin hygiéniste local

**Peel Region Public Health**

Telephone No. / N° de téléphone  
**905 799-7700**  
 ext. /  
 poste

Fax No. / N° de télécopieur  
**905 501-0305**

Email Address / Courriel

Public schools submit exceedance results to Ministry of Education. /

Les écoles privées doivent communiquer tout dépassement au ministère de l'Éducation.

Day nurseries submit exceedance results to Ministry of Children and Youth Services. /

Les garderies doivent communiquer tout dépassement au ministère des Services à l'enfance et à la jeunesse.

If you are e-mailing this section, please enter "R243 Exceedance and name of your School/Private School/Day Nursery in Subject line. /

Si vous transmettez cette section par courriel, écrivez dans le champ d'objet « Dépassement – Règl. 243 » suivi du nom de votre école, école privée ou garderie.

**Ministry of the Environment Spills Action Centre /**

**Centre d'intervention en cas de déversement du ministère de l'Environnement**

Telephone: / Téléphone : 1 800 268-6060 (toll free / sans frais) or 416 325-3000

Fax: / Télécopieur : 1 800 268-6062 (toll free / sans frais) or 416 325-3011

Email: / Courriel : moe.sac.moe@ontario.ca

**Ministry of Education /**

**Ministère de l'Éducation**

Telephone: / Téléphone : 416-325-2015

Fax: / Télécopieur : 416 325 4024

Email: / Courriel : steven.mitchell@ontario.ca

Or / Ou

**Ministry of Children and Youth Services /**

**Ministère des Services à l'enfance et à la jeunesse**

Region Région	Office Bureau	Telephone Téléphone	Fax Télécopieur	E-mail Courriel
Central West / Centre-Ouest	Mississauga	905 567-7177 ext. 352	905 567-3215	Martina.Rodrigues@ontario.ca
Central East / Centre-Est	Newmarket	905 868-8900 ext. 5250	905-895-6804	Jennifer.Peddle@ontario.ca
Toronto	Toronto	416 325-0575	416 327-0044	Beata.Machnik@ontario.ca
South East / Sud-Est	Kingston	613 536-7275	613 536-7272	Janet.Gibbs@ontario.ca
Eastern / Est	Ottawa	613 787-5279	613 787-3990	Diane.Henrie@ontario.ca
North East / Nord-Est	North Bay	705 474-3540	705 474-5446	Yvonne.Jeffrey@ontario.ca
Northern / Nord	Kenora	705 564-4515	705 564-7194	Serious.OccurKE.css@ontario.ca
	Sault Ste. Marie	705 564-4515	705 564-7193	Serious.OccurSA.css@ontario.ca
	Sudbury	705 564-4515	705 564-7191	Serious.Occur.css@ontario.ca
	Thunder Bay	705 564-4515	705 564-9557	Serious.OccurTH.css@ontario.ca
Hamilton / Niagara	Hamilton	905 521-7344	905 546-8277	Alexia.Watkins@ontario.ca
South West / Sud-Ouest	London	519 438-5111 ext. 3423	519 672-9461	Nancy.McGregor@ontario.ca

For more information, visit the ministry website at:

[http://www.children.gov.on.ca/mcys/english/ministry/regional\\_offices\\_contact.asp](http://www.children.gov.on.ca/mcys/english/ministry/regional_offices_contact.asp).

Pour de plus amples renseignements, visitez le site Web du Ministère à

<http://www.children.gov.on.ca/mcys/french/ministry/regoffice.asp>

**E. Drinking Water Exceedance Results / Résultats de la mesure du dépassement des normes dans l'eau potable**

Name of School/Day Nursery /  
Nom de l'école ou de la garderie : Learning Jungle School, Cooksville Campus

For Lead Samples Only / Pour le plomb seulement

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result (µg/L) / Résultat de l'analyse (µg/L)	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario"
650412 senior preschool washrm	2012/08/10	Standing / Stagnante	Lead / Plomb	17.6	10µg/L
650413 senior preschool washrm	2012/08/10	Flushed / Après rinçage	Lead / Plomb	2.3	10µg/L
650421 Kitchen	2012/08/10	Standing / Stagnante	Lead / Plomb	21.8	10µg/L
650422 Kitchen	2012/08/10	Flushed / Après rinçage	Lead / Plomb	3.0	10µg/L

Other Parameter Exceedances Under O. Regulation 243/07 / Autres dépassements des paramètres en vertu du Règl. de l'Ont. 243/07

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result Résultat de l'analyse	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario"
		Standing / Stagnante			
		Flushed / Après rinçage			

Comments / Commentaires



**Ontario**

Ministry of  
the Environment  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results  
Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Avis de dépassement de la teneur normale en plomb  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**Laboratory Information**

In accordance with the Schools, Private Schools and Day Nurseries Regulation made under the *Safe Drinking Water Act, 2002* (O. Reg. 243/07), S. 6(1) and (2), licensed laboratories must provide written notification within 24 hours of confirming a lead exceedance (and/or other exceedance of the Standards prescribed by Schedule 1, 2 or 3 to Ontario Regulation 169/03 (Ontario Drinking Water Quality Standards) made under the Act, other than for fluoride) to the following authorities:

1. Operator of the school, private school or day nursery;
2. Ministry of the Environment Spills Action Centre;
3. Local Medical Officer of Health.

**Operator Notification and Corrective Actions**

O. Reg. 243/07 requires that the operator of the school, private school or day nursery who receives a report of a water sample test result that exceeds any of the prescribed standards in Section 6(1) shall, within 24 hours, give a copy of the report to:

1. Ministry of the Environment Spills Action Centre;
2. Local Medical Officer of Health;
3. Ministry of Education in the case of a public school; or  
Ministry of Children and Youth Services in the case of a day nursery.

The operator must also take any corrective action steps as directed by the Medical Officer of Health. Failure to notify these parties in accordance with the Regulation constitutes an offence under the Act.

**Issue Resolution**

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results.

**Renseignements pour les laboratoires**

Conformément aux paragraphes 6(1) et (2) du *Écoles, écoles privées et garderies* pris en application de la *Loi de 2002 sur la salubrité de l'eau potable* (Règl. de l'Ont. 243/07), les laboratoires autorisés qui confirment un dépassement de la teneur normale en plomb dans l'eau potable (ou tout autre dépassement des normes, autres que pour le fluorure, prescrites par les annexes 1, 2 ou 3 du Règlement de l'Ontario 169/03 – Normes de qualité de l'eau potable de l'Ontario, pris en application de la Loi) doivent avvertir par écrit les instances ci-dessous dans les 24 heures après que le résultat a été obtenu :

1. L'exploitant de l'école, de l'école privée ou de la garderie;
2. Le Centre d'intervention en cas de déversement du ministère de l'Environnement;
3. Le médecin hygiéniste local.

**Communication des résultats à l'exploitant et mesures correctives**

Le Règl. de l'Ont. 243/07 oblige l'exploitant de l'école, de l'école privée ou de la garderie qui reçoit un rapport d'analyse révélant un dépassement des normes indiquées au paragraphe 6(1) pour l'eau potable à remettre une copie du rapport d'analyse en question aux instances suivantes, dans les 24 heures qui suivent la réception du rapport :

1. Le Centre d'intervention en cas de déversement du ministère de l'Environnement;
2. Le médecin hygiéniste local;
3. Le ministère de l'Éducation si l'échantillon provient d'une école publique; ou le ministère des Services à l'enfance et à la jeunesse si l'échantillon provient d'une garderie.

L'exploitant doit prendre toutes les mesures correctives prescrites par le médecin hygiéniste. Le défaut de communiquer les résultats à ces instances conformément au règlement constitue un délit.

**Règlement d'une question**

L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.



Ministry of  
the Environment  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results  
Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Avis de dépassement de la teneur normale en plomb  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**Enquiries**

Spills Action Centre  
Ministry of the Environment  
5775 Yonge Street, Suite 501  
Toronto, ON M2M 4J1

Telephone: 1 800 268-6060 (toll free) or 416 325-3000

Fax: 1 800 268-6062 (toll free) or 416 325-3011

Website: [www.ontario.ca/drinkingwater](http://www.ontario.ca/drinkingwater)

**Renseignements complémentaires**

Centre d'intervention en cas de déversement

Ministère de l'Environnement

5775, rue Yonge, bureau 501

Toronto (Ontario) M2M 4J1

Téléphone : 1 800 268-6060 (sans frais) or 416 325-3000

Télécopieur : 1 800 268-6062 (sans frais) or 416 325-3011

Site Web : [www.ontario.ca/eaupotable](http://www.ontario.ca/eaupotable)

Information on this form is collected by Ministry of the Environment staff on behalf of the Ministry in accordance with the *Safe Drinking Water Act, 2002* (SDWA) and its regulations. The collection, use and dissemination of this information by provincial institutions is governed by the *Freedom of Information and Protection of Privacy Act* (FIPPA). The information gathered herein will be used for the purpose of reporting lead exceedances from samples taken from schools, private schools and day nurseries under the SDWA and its regulations, and may be used for secondary purposes including investigations and law enforcement. Information contained on this form may be disclosed to other government agencies including municipalities, public health unit employees, the Ministry of Health and Long Term Care, the Ministry of Education and the Ministry of Community and Social Services pursuant to section 42 of FIPPA for the consistent purpose of administering programs related to drinking water safety.

Le personnel du ministère de l'Environnement recueille les renseignements figurant sur ce formulaire au nom du ministère conformément à la Loi de 2002 sur la salubrité de l'eau potable et à ses règlements. La collecte, l'utilisation et la communication de ces renseignements sont régies par la Loi sur l'accès à l'information et la protection de la vie privée. Les renseignements recueillis serviront à produire des rapports de dépassement de la teneur normale en plomb d'échantillons prélevés dans des écoles, des écoles privées et des garderies en vertu de la Loi de 2002 sur la salubrité de l'eau potable et de ses règlements. Ils pourront également servir à la réalisation d'enquêtes et à l'exécution de la loi. Les renseignements figurant sur ce formulaire peuvent être divulgués à d'autres organismes gouvernementaux, y compris à des services municipaux, à des services de santé publique, au ministère de la Santé et des Soins de longue durée, au ministère de l'Éducation et au ministère des Services sociaux et communautaires, conformément à l'article 42 de la Loi sur l'accès à l'information et la protection de la vie privée pour exécuter toute loi ou tout programme concernant la salubrité de l'eau potable.

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**C - 1. Exceedance Notifications/Corrective Actions / Avis de dépassement/Mesures correctives**

Please complete section C-1 and submit with sections A, B, D and E within 24 hours to the agencies listed in Section D. Upon Issue Resolution please submit Section C-2 within seven days to the same authorities to whom you submitted the initial exceedance test results / Remplissez la section C-1 et soumettez-la dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. Une fois la question réglée, soumettez la section C-2 dans les sept jours aux mêmes organismes ou responsables que vous avez initialement informés du ou des dépassements de la teneur normale en plomb.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie

DWIS No. / N° DWIS

Learning Jungle School, Cooksville Campus

500067679

Are you co-located\* and by agreement you are the facility taking a single set of two one liter samples to meet the sampling requirements for all co-located facilities under this agreement? / Partagez-vous votre installation de plomberie\* et êtes-vous, en vertu d'une entente, l'établissement chargé de prélever une série unique de deux échantillons d'un litre afin de satisfaire aux exigences d'échantillonnage de tous les établissements qui partagent votre installation de plomberie, conformément à cette entente?

☐ Yes / Oui ☐ No / Non

If you answered Yes above, list the Names and DWIS No. for the schools/private schools and day nurseries you are sampling for and ensure that a copy of the test results is provided to those same facilities within 24 hours of receiving the test results from the laboratory. / Dans l'affirmative, fournissez le nom et le N° DWIS des écoles, écoles privées ou garderies au nom desquelles vous prélevez les échantillons et assurez-vous que ces établissements reçoivent une copie des résultats d'analyse dans les 24 heures suivant votre obtention des résultats d'analyse de la part du laboratoire.

Name of School / Private School / Day Nursery / Nom de l'école l'école privée ou de la garderie

DWIS No. / N° DWIS

1.

2.

3.

For more than 4 co-located facilities, attach additional Section C-1's as required. /

Si plus de 4 établissements partagent l'installation de plomberie, annexe le nombre de sections C-1 nécessaires.

\*Co-located Facilities means, Two or more O. Reg 243/07 facilities (school, private school, day nursery) that are served by the same plumbing system.

The facilities may be either located in one building (Structure) or located in different buildings within one property. / On dit que des établissements « partagent une installation de plomberie » quand au moins deux établissements visés par le Règl. de l'Ont. 243/07 (école, école privée ou garderie) sont alimentés par une même installation de plomberie. Les établissements peuvent être situés dans un même bâtiment (structure partagée) ou dans des bâtiments différents sur une même propriété.

Earliest year plumbing installed (yyyy) /

Année d'installation de la plus ancienne section de plomberie (aaaa) \_\_\_\_\_

Was facility open to children under the age of 18 years at the time of sampling? /

L'établissement était-il ouvert aux enfants de moins de 18 ans au moment du prélèvement?

☐ Yes / Oui ☐ No / Non

Is this a re-sample test result for the same location for which a lead exceedance was previously reported? /

S'agit-il d'un prélèvement d'un robinet dont l'eau a déjà affiché un dépassement des normes de teneur en plomb?

☐ Yes / Oui ☐ No / Non

Indicate where you have sent this completed form. Contact information follows in Section D /

Précisez les autorités auxquelles vous avez transmis le présent formulaire. Leurs coordonnées figurent à la section D

☐ Ministry of the Environment Spills Action Centre  
Centre d'intervention en cas de déversement du ministère de l'Environnement

☐ Local Medical Officer of Health  
Médecin hygiéniste local

☐ Ministry of Children and Youth Services  
Ministère des Services à l'enfance et à la jeunesse

☐ Ministry of Education  
Ministère de l'Éducation

Indicate if Local Medical Officer of Health provided guidance on corrective actions. /

Indiquez si le médecin hygiéniste local a fourni des conseils sur les mesures à prendre.

☐ Yes / Oui ☐ No / Non

If you answered Yes, list guidance provided / Dans l'affirmative, précisez les conseils fournis.

Name of person completing this section (print name) /  
Nom de la personne qui a rempli la présente section  
(en lettres moulées)

Signature

Date written notification submitted  
(yyyy/mm/dd) / Date de réception  
de l'avis écrit (aaaa/mm/jj)

SAC Office use only / À l'usage du CICD

AWQI Number / N° de l'avis de déclaration  
d'une eau de mauvaise qualité :**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)****C - 2. Notice of Issue Resolution / Avis de règlement d'une question**

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. **You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results.** / L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. **Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.**

In the case of co-located facilities, those facilities that have reached an agreement to have one set of samples taken on their behalf, will need to have a representative for each facility sign in the co-location section at the bottom of this page to indicate that they have complied with all corrective actions that the public health unit has required. / En ce qui concerne les établissements qui partagent une installation de plomberie, chaque établissement qui a conclu une entente prévoyant le prélèvement d'une série unique d'échantillons en son nom doit désigner un représentant qui signera la section portant sur la partage de l'installation de plomberie au bas de la présente page afin de confirmer qu'elle a pris toutes les mesures correctives prescrites par le bureau de santé publique.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
Learning Jungle School, Cooksville Campus	500067679

Contact Information / Personne-ressource

Last Name / Nom de famille	First Name / Prénom	Telephone No. / N° de téléphone ext. / poste

Name of Local Public Health Unit

Date Initial Exceedance Submitted to the Ministry of the Environment - Spills Action Centre (yyyy/mm/dd) / Date de signalement du dépassement au ministère de l'Environnement - Centre d'intervention en cas de déversement (aaaa/mm/jj)			
Date Resolved (yyyy/mm/dd) / Date de résolution (aaaa/mm/jj)		Date Resolution Submitted (yyyy/mm/dd) Date de soumission de l'avis de résolution (aaaa/mm/jj)	

Additional Comments / Commentaires supplémentaires :

I have complied with all corrective actions required by my Local Public Health Unit. /

J'ai pris toutes les mesures correctives prescrites par le bureau de santé publique local. Signed by / Signé par

Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)

Co-location Signatures if applicable. / Signatures des représentants des établissements qui partagent une installation de plomberie, le cas échéant.

1. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)

2. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)

3. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)

SAC Office use only / À l'usage du CIO

AWQI Number / N° de l'avis de déclaration  
d'une eau de mauvaise qualité

108053

Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)

AWQI Updated By Simon Ng

3:26 pm, Aug 31, 2012

**C - 2. Notice of Issue Resolution / Avis de règlement d'une question**

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results. / L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.

In the case of co-located facilities, those facilities that have reached an agreement to have one set of samples taken on their behalf, will need to have a representative for each facility sign in the co-location section at the bottom of this page to indicate that they have complied with all corrective actions that the public health unit has required. / En ce qui concerne les établissements qui partagent une installation de plomberie, chaque établissement qui a conclu une entente prévoyant le prélèvement d'une série unique d'échantillons en son nom doit désigner un représentant qui signera la section portant sur la partage de l'installation de plomberie au bas de la présente page afin de confirmer qu'elle a pris toutes les mesures correctives prescrites par le bureau de santé publique.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
Learning Jungle School, Cooksville Campus	500067679

## Contact Information / Personne-ressource

Last Name / Nom de famille	First Name / Prénom	Telephone No. / N° de téléphone
CHINCHUNZU	NESMITH	(416) 227-0761 ext. / poste

Name of Local Public Health Unit

PEEL PUBLIC HEALTH

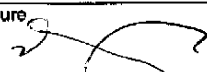
Date Initial Exceedance Submitted to the Ministry of the Environment - Spills Action Centre (yyyy/mm/dd) / Date de signalement du dépassement au ministère de l'Environnement - Centre d'intervention en cas de déversement (aaaa/mm/jj)	2012 07 16
---	------------

Date Resolved (yyyy/mm/dd) / Date de résolution (aaaa/mm/jj)	2012 08 21	Date Resolution Submitted (yyyy/mm/dd) / Date de soumission de l'avis de résolution (aaaa/mm/jj)	2012 08 22
---	------------	---	------------

Additional Comments / Commentaires supplémentaires :

I have complied with all corrective actions required by my Local Public Health Unit. /

J'ai pris toutes les mesures correctives prescrites par le bureau de santé publique local. Signed by / Signé par

Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
CHINCHUNZU	NESMITH		2012 08 22

Co-location Signatures if applicable. / Signatures des représentants des établissements qui partagent une installation de plomberie, le cas échéant.

1. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
---	--------------------

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
---	---------------------	-----------	--

2. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
---	--------------------

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
---	---------------------	-----------	--

3. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
---	--------------------

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
---	---------------------	-----------	--



Ministry of  
the Environment  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results  
Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Avis de dépassement de la teneur normale en plomb  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**Instructions:**

- Please print if completing by hand.
- Submit completed forms by fax or e-mail.
- Lab completes sections A, B, D and E
- Facility operator completes Section C-1 and submits with sections A,B,D and E within 24 hours to the applicable agencies listed in section D. Facility operator completes and submits Section C-2 upon Issue Resolution.

**Instructions :**

- Écrivez en caractères d'imprimerie si vous remplissez à la main.
- Transmettez le document rempli par télécopieur ou par courriel.
- Le laboratoire doit remplir les sections A, B, D et E.
- L'exploitant doit remplir la section C-1 et la soumettre dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. L'exploitant doit remplir la section C-2 et la soumettre une fois la question réglée.

SAC Office use only / À l'usage du CICC

AWQI Number / N° de l'avis de déclaration  
d'une eau de mauvaise qualité

**108053**

**A. Laboratory Information / Renseignements sur le laboratoire**

Laboratory Name / Nom du laboratoire <b>York-Durham Regional Environmental Laboratory</b>			Licence Number / Numéro du permis <b>s.21</b>		
Street No. and Name / N° et nom de la rue <b>901 McKay Road</b>		Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section	
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité <b>Pickering</b>	Province <b>ON</b>	Postal Code / Code postal <b>L1W 3A3</b>		
Business Telephone No. / N° de téléphone <b>905 686-0041</b>		Laboratory Written Notification Prepared by / Avis écrit du laboratoire préparé par <b>Hasan Ahmed</b>			
Date of exceedance O. Reg 169/03 test result authorized / Date de la constatation du dépassement des normes du Regl. de l'Ont. 169/03		<b>2012</b>	<b>08</b>	<b>21</b>	Date of exceedance notifications submitted / Date de communication du dépassement des normes
Signed by (print name) / Signé par (en lettres moulées) <b>Hasan Ahmed</b>		Signature 			

**B. Facility Information / Renseignements sur l'établissement**

Name of School/Day Nursery / Nom de l'école ou de la garderie <b>Learning Jungle School, Cooksville Campus</b>					
Legal Name of School/Day Nursery Operation (i.e. School Board) / Dénomination sociale de l'établissement (c.-à-d. conseil scolaire) <b>Learning Jungle School, Cooksville Campus</b>					
Type / Type	<input type="checkbox"/> School / École	<input type="checkbox"/> Private School / École privée	<input checked="" type="checkbox"/> Day Nursery / Garderie		
DWIS No. / N° DWIS <b>500067679</b>	Ministry of Education SFIS No./School No. /N° du SIS du ministère de l'Éducation / N° de l'école		Day Care Licence No. /N° du permis de garde d'enfants		
Street No. and Name / N° et nom de la rue <b>78 Agnes Street.</b>	Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section		
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité <b>Mississauga</b>	Province <b>ONT.</b>	Postal Code / Code postal <b>L5B 1J7</b>		
Contact Information / Personne-ressource Last Name / Nom de famille <b>Chingcuanco</b>		First Name / Prénom <b>Nesmith</b>			
Position / Poste occupé		Telephone No. / N° de téléphone <b>905 273-7023</b>		Fax No. / N° de télécopieur <b>416 229-0381</b>	
Email Address / Courriel <b>nchingcuanco@learningjungle.com</b>					

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**D. Exceedance Notifications / Avis de dépassement**

Name of School/Private School/Day Nursery / Nom de l'école, de l'école privée ou de la garderie

Learning Jungle School, Cooksville Campus

Local Medical Officer of Health / Médecin hygiéniste local

Peel Region Public Health

Telephone No. / N° de téléphone ext. / poste	Fax No. / N° de télécopieur	Email Address / Courriel
905 799-7700	905 501-0305	

Public schools submit exceedance results to Ministry of Education. /

Les écoles privées doivent communiquer tout dépassement au ministère de l'Éducation.

Day nurseries submit exceedance results to Ministry of Children and Youth Services. /

Les garderies doivent communiquer tout dépassement au ministère des Services à l'enfance et à la jeunesse.

If you are e-mailing this section, please enter "R243 Exceedance and name of your School/Private School/Day Nursery in Subject line. /

Si vous transmettez cette section par courriel, écrivez dans le champ d'objet « Dépassement – Règl. 243 » suivi du nom de votre école, école privée ou garderie.

**Ministry of the Environment Spills Action Centre /**

**Centre d'intervention en cas de déversement du ministère de l'Environnement**

Telephone / Téléphone : 1 800 268-6060 (toll free / sans frais) or 416 325-3000

Fax: / Télécopieur : 1 800 268-6062 (toll free / sans frais) or 416 325-3011

Email: / Courriel : moe.sac.moe@ontario.ca

**Ministry of Education /**

**Ministère de l'Éducation**

Telephone / Téléphone : 416-325-2015

Fax: / Télécopieur : 416 325 4024

Email: / Courriel : steven.mitchell@ontario.ca

Or / Ou

**Ministry of Children and Youth Services /**

**Ministère des Services à l'enfance et à la jeunesse**

Region Région	Office Bureau	Telephone Téléphone	Fax Télécopieur	E-mail Courriel
Central West / Centre-Ouest	Mississauga	905 567-7177 ext. 352	905 567-3215	Martina.Rodrigues@ontario.ca
Central East / Centre-Est	Newmarket	905 868-8900 ext. 5250	905-895-6804	Jennifer.Peddle@ontario.ca
Toronto	Toronto	416 325-0575	416 327-0044	Beata.Machnik@ontario.ca
South East / Sud-Est	Kingston	613 536-7275	613 536-7272	Janet.Gibbs@ontario.ca
Eastern / Est	Ottawa	613 787-5279	613 787-3990	Diane.Henne@ontario.ca
North East / Nord-Est	North Bay	705 474-3540	705 474-5446	Yvonne.Jeffrey@ontario.ca
Northern / Nord	Kenora	705 564-4515	705 564-7194	Serious.OccurKE.css@ontario.ca
	Sault Ste. Marie	705 564-4515	705 564-7193	Serious.OccurSA.css@ontario.ca
	Sudbury	705 564-4515	705 564-7191	Serious.Occur.css@ontario.ca
	Thunder Bay	705 564-4515	705 564-9557	Serious.OccurTH.css@ontario.ca
Hamilton / Niagara	Hamilton	905 521-7344	905 546-8277	Alexia.Watkins@ontario.ca
South West / Sud-Ouest	London	519 438-5111 ext. 3423	519 672-9461	Nancy.McGregor@ontario.ca

For more information, visit the ministry website at:  
[http://www.children.gov.on.ca/mcys/english/ministry/regional\\_offices\\_contact.asp](http://www.children.gov.on.ca/mcys/english/ministry/regional_offices_contact.asp).

Pour de plus amples renseignements, visitez le site Web du Ministère à  
<http://www.children.gov.on.ca/mcys/french/ministry/regoffice.asp>

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**E. Drinking Water Exceedance Results / Résultats de la mesure du dépassement des normes dans l'eau potable**

Name of School/Day Nursery /  
 Nom de l'école ou de la garderie : Leaming Jungle School, Cooksville Campus

For Lead Samples Only / Pour le plomb seulement

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result (µg/L) / Résultat de l'analyse (µg/L)	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario
650412 senior preschool washrm	2012/08/10	Standing / Stagnante	Lead / Plomb	17.6	10µg/L
650413 senior preschool washrm	2012/08/10	Flushed / Après rinçage	Lead / Plomb	2.3	10µg/L
650421 Kitchen	2012/08/10	Standing / Stagnante	Lead / Plomb	21.8	10µg/L
650422 Kitchen	2012/08/10	Flushed / Après rinçage	Lead / Plomb	3.0	10µg/L

Other Parameter Exceedances Under O. Regulation 243/07 / Autres dépassements des paramètres en vertu du Règl. de l'Ont. 243/07

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result Résultat de l'analyse	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario
		Standing / Stagnante			
		Flushed / Après rinçage			

Comments / Commentaires



Ontario

Ministry of  
the Environment  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results  
Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Avis de dépassement de la teneur normale en plomb  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

### Laboratory Information

In accordance with the Schools, Private Schools and Day Nurseries Regulation made under the *Safe Drinking Water Act, 2002* (O. Reg. 243/07), S. 6(1) and (2), licensed laboratories must provide written notification within 24 hours of confirming a lead exceedance (and/or other exceedance of the Standards prescribed by Schedule 1, 2 or 3 to Ontario Regulation 169/03 (Ontario Drinking Water Quality Standards) made under the Act, other than for fluoride) to the following authorities:

1. Operator of the school, private school or day nursery;
2. Ministry of the Environment Spills Action Centre;
3. Local Medical Officer of Health

### Operator Notification and Corrective Actions

O. Reg. 243/07 requires that the operator of the school, private school or day nursery who receives a report of a water sample test result that exceeds any of the prescribed standards in Section 6(1) shall, within 24 hours, give a copy of the report to:

1. Ministry of the Environment Spills Action Centre;
2. Local Medical Officer of Health;
3. Ministry of Education in the case of a public school; or Ministry of Children and Youth Services in the case of a day nursery.

The operator must also take any corrective action steps as directed by the Medical Officer of Health. Failure to notify these parties in accordance with the Regulation constitutes an offence under the Act.

### Issue Resolution

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results.

### Renseignements pour les laboratoires

Conformément aux paragraphes 6(1) et (2) du *Écoles, écoles privées et garderies* pris en application de la *Loi de 2002 sur la salubrité de l'eau potable* (Règl. de l'Ont. 243/07), les laboratoires autorisés qui confirment un dépassement de la teneur normale en plomb dans l'eau potable (ou tout autre dépassement des normes, autres que pour le fluorure, prescrites par les annexes 1, 2 ou 3 du Règlement de l'Ontario 169/03 – Normes de qualité de l'eau potable de l'Ontario, pris en application de la Loi) doivent avertir par écrit les instances ci-dessous dans les 24 heures après que le résultat a été obtenu :

1. L'exploitant de l'école, de l'école privée ou de la garderie;
2. Le Centre d'intervention en cas de déversement du ministère de l'Environnement;
3. Le médecin hygiéniste local.

### Communication des résultats à l'exploitant et mesures correctives

Le Règl. de l'Ont. 243/07 oblige l'exploitant de l'école, de l'école privée ou de la garderie qui reçoit un rapport d'analyse révélant un dépassement des normes indiquées au paragraphe 6(1) pour l'eau potable à remettre une copie du rapport d'analyse en question aux instances suivantes, dans les 24 heures qui suivent la réception du rapport :

1. Le Centre d'intervention en cas de déversement du ministère de l'Environnement;
2. Le médecin hygiéniste local;
3. Le ministère de l'Éducation si l'échantillon provient d'une école publique; ou le ministère des Services à l'enfance et à la jeunesse si l'échantillon provient d'une garderie.

L'exploitant doit prendre toutes les mesures correctives prescrites par le médecin hygiéniste. Le défaut de communiquer les résultats à ces instances conformément au règlement constitue un délit.

### Règlement d'une question

L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.



Ministry of  
the Environment  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results  
Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Avis de dépassement de la teneur normale en plomb  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**Enquiries**

Spills Action Centre  
Ministry of the Environment  
5775 Yonge Street, Suite 501  
Toronto, ON M2M 4J1

Telephone: 1 800 268-6060 (toll free) or 416 325-3000

Fax: 1 800 268-6062 (toll free) or 416 325-3011

Website: [www.ontario.ca/drinkingwater](http://www.ontario.ca/drinkingwater)

**Renseignements complémentaires**

Centre d'intervention en cas de déversement

Ministère de l'Environnement

5775, rue Yonge, bureau 501

Toronto (Ontario) M2M 4J1

Téléphone : 1 800 268-6060 (sans frais) or 416 325-3000

Télécopieur : 1 800 268-6062 (sans frais) or 416 325-3011

Site Web : [www.ontario.ca/eaupotable](http://www.ontario.ca/eaupotable)

Information on this form is collected by Ministry of the Environment staff on behalf of the Ministry in accordance with the *Safe Drinking Water Act, 2002* (SDWA) and its regulations. The collection, use and dissemination of this information by provincial institutions is governed by the *Freedom of Information and Protection of Privacy Act* (FIPPA). The information gathered herein will be used for the purpose of reporting lead exceedances from samples taken from schools, private schools and day nurseries under the SDWA and its regulations, and may be used for secondary purposes including investigations and law enforcement. Information contained on this form may be disclosed to other government agencies including municipalities, public health unit employees, the Ministry of Health and Long Term Care, the Ministry of Education and the Ministry of Community and Social Services pursuant to section 42 of FIPPA for the consistent purpose of administering programs related to drinking water safety.

Le personnel du ministère de l'Environnement recueille les renseignements figurant sur ce formulaire au nom du ministère conformément à la Loi de 2002 sur la salubrité de l'eau potable et à ses règlements. La collecte, l'utilisation et la communication de ces renseignements sont régies par la Loi sur l'accès à l'information et la protection de la vie privée. Les renseignements recueillis serviront à produire des rapports de dépassement de la teneur normale en plomb d'échantillons prélevés dans des écoles, des écoles privées et des garderies en vertu de la Loi de 2002 sur la salubrité de l'eau potable et de ses règlements. Ils pourront également servir à la réalisation d'enquêtes et à l'exécution de la loi. Les renseignements figurant sur ce formulaire peuvent être divulgués à d'autres organismes gouvernementaux, y compris à des services municipaux, à des services de santé publique, au ministère de la Santé et des Soins de longue durée, au ministère de l'Éducation et au ministère des Services sociaux et communautaires, conformément à l'article 42 de la Loi sur l'accès à l'information et la protection de la vie privée pour exécuter toute loi ou tout programme concernant la salubrité de l'eau potable.

### Schools, Private Schools and Day Nurseries (O. Reg. 243/07) Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)

#### C - 1. Exceedance Notifications/Corrective Actions / Avis de dépassement/Mesures correctives

Please complete section C-1 and submit with sections A, B, D and E within 24 hours to the agencies listed in Section D. Upon Issue Resolution please submit Section C-2 within seven days to the same authorities to whom you submitted the initial exceedance test results / Remplissez la section C-1 et soumettez-la dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. Une fois la question réglée, soumettez la section C-2 dans les sept jours aux mêmes organismes ou responsables que vous avez initialement informés du ou des dépassements de la teneur normale en plomb.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie

DWIS No. / N° DWIS

Learning Jungle School, Cooksville Campus

500067679

Are you co-located\* and by agreement you are the facility taking a single set of two one liter samples to meet the sampling requirements for all co-located facilities under this agreement? / Partagez-vous votre installation de plomberie\* et êtes-vous, en vertu d'une entente, l'établissement chargé de prélever une série unique de deux échantillons d'un litre afin de satisfaire aux exigences d'échantillonnage de tous les établissements qui partagent votre installation de plomberie, conformément à cette entente?

☐ Yes / Oui ☒ No / Non

If you answered Yes above, list the Names and DWIS No. for the schools/private schools and day nurseries you are sampling for and ensure that a copy of the test results is provided to those same facilities within 24 hours of receiving the test results from the laboratory. / Dans l'affirmative, fournissez le nom et le N° DWIS des écoles, écoles privées ou garderies au nom desquelles vous prélevez les échantillons et assurez-vous que ces établissements reçoivent une copie des résultats d'analyse dans les 24 heures suivant votre obtention des résultats d'analyse de la part du laboratoire.

Name of School / Private School / Day Nursery / Nom de l'école l'école privée ou de la garderie

DWIS No. / N° DWIS

1.

2.

3.

For more than 4 co-located facilities, attach additional Section C-1's as required. /

Si plus de 4 établissements partagent l'installation de plomberie, annexe le nombre de sections C-1 nécessaires.

\*Co-located Facilities means, Two or more O. Reg. 243/07 facilities (school, private school, day nursery) that are served by the same plumbing system.

The facilities may be either located in one building (Structure) or located in different buildings within one property. / On dit que des établissements « partagent une installation de plomberie » quand au moins deux établissements visés par le Règl. de l'Ont. 243/07 (école, école privée ou garderie) sont alimentés par une même installation de plomberie. Les établissements peuvent être situés dans un même bâtiment (structure partagée) ou dans des bâtiments différents sur une même propriété.

Earliest year plumbing installed (yyyy) /

Année d'installation de la plus ancienne section de plomberie (aaaa) before 1970

Was facility open to children under the age of 18 years at the time of sampling? /

L'établissement était-il ouvert aux enfants de moins de 18 ans au moment du prélèvement?

☒ Yes / Oui ☐ No / Non

Is this a re-sample test result for the same location for which a lead exceedance was previously reported? /

S'agit-il d'un prélèvement d'un robinet dont l'eau a déjà affiché un dépassement des normes de teneur en plomb?

☒ Yes / Oui ☐ No / Non

Indicate where you have sent this completed form. Contact information follows in Section D /

Précisez les autorités auxquelles vous avez transmis le présent formulaire. Leurs coordonnées figurent à la section D

☐ Ministry of the Environment Spills Action Centre  
Centre d'intervention en cas de déversement du ministère de l'Environnement

☐ Ministry of Children and Youth Services  
Ministère des Services à l'enfance et à la jeunesse

☒ Local Medical Officer of Health  
Médecin hygiéniste local

☐ Ministry of Education  
Ministère de l'Éducation

Indicate if Local Medical Officer of Health provided guidance on corrective actions. /

Indiquez si le médecin hygiéniste local a fourni des conseils sur les mesures à prendre.

☒ Yes / Oui ☐ No / Non

If you answered Yes, list guidance provided / Dans l'affirmative, précisez les conseils fournis

BASED ON 2 SAMPLE RESULTS, PUBLIC HEALTH HAS INDICATED  
THAT DRINKING FROM TAP WATER CAN BE REINSTATED. DAILY  
FLUSHING MUST BE CONTINUALLY IMPLEMENTED.

Name of person completing this section (print name) /  
Nom de la personne qui a rempli la présente section  
(en lettres moulées)

Signature

NESMITH CHINECUMANO

Date written notification submitted  
(yyyy/mm/dd) / Date de réception  
de l'avis écrit (aaaa/mm/jj)

2012/08/20

## INCIDENT REPORT

## DW System

**Name:** R243 LEARNING JUNGLE SCHOOL &  
COOKSVILLE CAMPUS (0003557)

**Address:** 78 AGNES ST  
MISSISSAUGA ON L5B 1J7

**District Office:** Halton-Peel District

**DWS #:** 500067679

**DWS Category:** Designated Facility

## DWS Owner

**Name:** LEARNING JUNGLE SCHOOL

**Mailing Address:** 45 SHEPPARD Ave E TORONTO  
ON Canada M2N 5W9

**Physical Address:** 45 SHEPPARD Ave E TORONTO  
ON Canada M2N 5W9

**Phone:** (416) 227-0461

**Fax:**

**Email:**

**Client Type:** COMMERCIAL

## MOE Information

**Incident Report #:** 1-3N0B-11

**AWQI #:** 108053

**Date & Time Reported to MOE:** August 21, 2012 02:07:22 PM

**Office Receiving Incident Report:** SAC

**Incident Info Received By:** SAC

**Incident Type:** O.Reg. 243 Lead Exceedance

**Referring Inspection Report #:**

**Incident Summary:** R243 Lead Exceedance

**MOE Response:** No Field Response

**Was an ERP called out?** N

**Master Incident Report #:** 1-3KIK-2

**Master AWQI #:**

**Date & Time MOE Arrival:**

**IDS Reference #:**

## Incident Description

Incident Date	Incident Description	Created By
August 21, 2012 02:07:22 PM	ECS: Rec'd a, b, d, and e. Resample #2 for AWQI 107103. Lead exceedance for plumbing samples taken on Aug. 10, 2012: - Sr Preschool Washroom: Standing 17.6 ug/L flushed 2.3 ug/L - Kitchen: standing 21.8 ug/L flushed 3.0 ug/L	CHEESIEL
August 21, 2012 02:07:22 PM	R243 Lead Exceedance	SADMIN
September 14, 2012 04:04:34 PM	Rec'd section C1 and C2. Flushed sample results for samples collection on Aug. 10, 2012 were below ODWQS for lead. HU advised incident has been resolved but facility is to continue with daily flushing. No further actions recommended at this time. Recommended for closure.	CHEESIEL

## Parameter Table

Sample Collection Date	Sample Location	Details	Parameter	Unit	Verbal DWS Result	Verbal Lab Result	Written DWS Result	Written Lab Result	Chlorine Residual	Result mg/L
August 10, 2012 12:00:00 AM			Lead	MG/L			0.0176	0.0176		
August 10, 2012 12:00:00 AM			Lead	MG/L			0.0218	0.0218		

## Caller/PO Information

**Contact Name:**

**Company:**

**Telephone #:**

**Fax Number:**

**Email Address:**

**Mailing Address:**

## Updates

**Date DWS Written Notification Provided:** August 31, 2012 12:00:00 AM

**Date Resolved:** July 16, 2012 12:00:00 AM

**Date Lab Written Notification Provided:** August 21, 2012 11:46:00 AM

**Notice of Resolution Provided:** August 31, 2012 12:08:00 AM

## Provincial Officer

**Name:** Elizabeth Chee Sing

**Badge #:**

**Work Unit:** Drinking Water Inspections Unit

**District/Area Office:** Halton-Peel District

**Date:** September 14, 2012

**Signature:**

## Supervisor

**Name:** Demetra Koros

**Work Unit:** Drinking Water Inspections Unit

**District/Area Office:** Halton-Peel District

**Date:** September 14, 2012

**Signature:**

## INCIDENT REPORT

### DW System

**System Name:** R243 LEARNING  
JUNGLE SCHOOL -  
COOKSVILLE CAMPUS  
(0003557)  
**System  
Address:** 78 AGNES ST  
MISSISSAUGA ON L5B  
1J7  
**District Office:** Halton-Peel District  
**DWS #:** 500067679  
**DWS Category:** Designated Facility

### DWS Owner

**Owner Name:** LEARNING JUNGLE SCHOOL  
**Owner Mailing  
Address:** 45 SHEPPARD Ave E TORONTO ON  
Canada M2N 5W9  
**Owner Physical  
Address:** 45 SHEPPARD AVE E TORONTO ON  
Canada M2N 5W9  
**Owner Phone:**  
**Owner Fax:**  
**Owner Email:**  
**Client Type:** COMMERCIAL

### MECP Information

**Incident Report #:** 1-3N0B-11  
**AWQI #:** 108053  
**Date & Time Reported to MECP:** Aug 21, 2012 14:07:22  
**Office Receiving Incident Report:** SAC  
**Incident Info Received By:** SAC  
**Incident Type:** O.Reg. 243 Lead Exceedence  
**Referring Inspection Report #:**  
**Incident Summary:** R243 Lead Exceedance  
**MECP Response:** No Field Response  
**Was an ERP called out?** N  
**Master Incident Report #:** 1-3KIK-2  
**Master AWQI #:**  
**Date & Time MECP Arrival:**  
**IDS Reference #:**

## Incident Description

Incident Date	Incident Description	Created By
Aug 21, 2012 14:07:22	ECS: Rec'd a, b, d, and e. Resample #2 for AWQI 107103. Lead exceedance for plumbing samples taken on Aug. 10, 2012: - Sr Preschool Washroom: Standing 17.6 ug/L flushed 2.3 ug/L - Kitchen: standing 21.8 ug/L flushed 3.0 ug/L	CHEESIEL
Aug 21, 2012 14:07:22	R243 Lead Exceedance	SADMIN
Sep 14, 2012 16:04:34	Rec'd section C1 and C2. Flushed sample results for samples collection on Aug. 10, 2012 were below ODWQS for lead. HU advised incident has been resolved but facility is to continue with daily flushing. No further actions recommended at this time. Recommended for closure.	CHEESIEL

## Parameter Table

Sample Collection Date	Sample Location	Details	Parameter	Unit	Verbal DWS Result	Verbal Lab Result	Written DWS Result	Written Lab Result	Chlorine Residual	Result mg/L
08/10/2012 00:00:00			Lead	MG/L			0.0176	0.0176		

## Offences

Suspected Violation(s)/Offence(s)

**Caller/PO Information**

**Contact Name:**  
**Telephone #:**  
**Email Address:**  
**Mailing Address:**

**Company:**  
**Fax Number:**

---

**Provincial Officer**

**Name:** Elizabeth Chee Sing  
**Work Unit:** Drinking Water Inspections Unit  
**Date:** February 18, 2025  
**Signature:**

**Badge #:** 1430  
**District/Area Office:** Halton-Peel District

**Supervisor**

**Name:** Demetra Koros  
**Work Unit:** Drinking Water Inspections Unit  
**Date:** February 18, 2025  
**Signature:**

**District/Area Office:** Halton-Peel District

4:08 pm, Jul 30, 2012



Ministry of  
the Environment  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results**  
**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Avis de dépassement de la teneur normale en plomb**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**Instructions:**

- Please print if completing by hand.
- Submit completed forms by fax or e-mail.
- Lab completes sections A, B, D and E.
- Facility operator completes Section C-1 and submits with sections A,B,D and E within 24 hours to the applicable agencies listed in section D. Facility operator completes and submits Section C-2 upon Issue Resolution.

**Instructions :**

- Écrivez en caractères d'imprimerie si vous remplissez à la main.
- Transmettez le document rempli par télécopieur ou par courriel.
- Le laboratoire doit remplir les sections A, B, D et E.
- L'exploitant doit remplir la section C-1 et la soumettre dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. L'exploitant doit remplir la section C-2 et la soumettre une fois la question réglée.

SAC Office use only / À l'usage du CICD

AWQI Number / N° de l'avis de déclaration d'une eau de mauvaise qualité :

107579

**A. Laboratory Information / Renseignements sur le laboratoire**

Laboratory Name / Nom du laboratoire <b>York-Durham Regional Environmental Laboratory</b>			Licence Number / Numéro du permis <b>s.21</b>		
Street No. and Name / N° et nom de la rue <b>901 McKay Road</b>		Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section	
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité <b>Pickering</b>	Province <b>ON</b>		Postal Code / Code postal <b>L1W 3A3</b>	
Business Telephone No. / N° de téléphone <b>905 686-0041</b>		Laboratory Written Notification Prepared by / Avis écrit du laboratoire préparé par <b>Hasan Ahmed</b>			
Date of exceedance O. Reg 169/03 test result authorized / Date de la constatation du dépassement des normes du Règl. de l'Ont. 169/03		2012 07 30		Date of exceedance notifications submitted / Date de communication du dépassement des normes	
Signed by (print name) / Signé par (en lettres moulées) <b>Hasan Ahmed</b>		Signature 			

**B. Facility Information / Renseignements sur l'établissement**

Name of School/Day Nursery / Nom de l'école ou de la garderie <b>Learning Jungle School, Cooksville Campus</b>					
Legal Name of School/Day Nursery Operation (i.e. School Board) / Dénomination sociale de l'établissement (c.-à-d. conseil scolaire) <b>Learning Jungle School, Cooksville Campus</b>					
Type / Type	<input type="checkbox"/> School / École	<input type="checkbox"/> Private School / École privée	<input checked="" type="checkbox"/> Day Nursery / Garderie		
DWIS No. / N° DWIS <b>500067679</b>	Ministry of Education SFIS No./School No. /N° du SIS du ministère de l'Éducation / N° de l'école		Day Care Licence No. /N° du permis de garde d'enfants		
Street No. and Name / N° et nom de la rue <b>78 Agnes Street</b>	Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section		
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité <b>Mississauga</b>	Province <b>ONT.</b>		Postal Code / Code postal <b>L5B 1J7</b>	
Contact Information / Personne-ressource Last Name / Nom de famille <b>Kuo</b>		First Name / Prénom <b>Pahai</b>			
Position / Poste occupé		Telephone No. / N° de téléphone <b>905 273-7023</b>		Fax No. / N° de télécopieur <b>416 229-0381</b>	
Email Address / Courriel <b>pkuo@learningjungle.com</b>					

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**E. Drinking Water Exceedance Results / Résultats de la mesure du dépassement des normes dans l'eau potable**

Name of School/Day Nursery /  
 Nom de l'école ou de la garderie : Learning Jungle School, Cooksville Campus

For Lead Samples Only / Pour le plomb seulement

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result (µg/L) / Résultat de l'analyse (µg/L)	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario"
646605 Sr.Preschool Washroom	2012/07/20	Standing / Stagnante	Lead / Plomb	18.3	10µg/L
646606 Sr.Preschool Washroom	2012/07/20	Flushed / Après rinçage	Lead / Plomb	0.9	10µg/L
646607 Kitchen	2012/07/20	Standing / Stagnante	Lead / Plomb	16.5	10µg/L
646608 Kitchen	2012/07/20	Flushed / Après rinçage	Lead / Plomb	1.4	10µg/L

Other Parameter Exceedances Under O. Regulation 243/07 / Autres dépassements des paramètres en vertu du Règl. de l'Ont. 243/07

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result Résultat de l'analyse	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario"
		Standing / Stagnante			
		Flushed / Après rinçage			

Comments / Commentaires

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**D. Exceedance Notifications / Avis de dépassement**

Name of School/Private School/Day Nursery / Nom de l'école, de l'école privée ou de la garderie

Learning Jungle School, Cooksville Campus

Local Medical Officer of Health / Médecin hygiéniste local

Peel Region Public Health

Telephone No. / N° de téléphone	Fax No. / N° de télécopieur	Email Address / Courriel
905 799-7700 ext. / poste	905 501-0305	

Public schools submit exceedance results to Ministry of Education. /

Les écoles privées doivent communiquer tout dépassement au ministère de l'Éducation.

Day nurseries submit exceedance results to Ministry of Children and Youth Services. /

Les garderies doivent communiquer tout dépassement au ministère des Services à l'enfance et à la jeunesse.

If you are e-mailing this section, please enter "R243 Exceedance and name of your School/Private School/Day Nursery in Subject line. /

Si vous transmettez cette section par courriel, écrivez dans le champ d'objet « Dépassement – Règl. 243 » suivi du nom de votre école, école privée ou garderie.

**Ministry of the Environment Spills Action Centre /**

**Centre d'intervention en cas de déversement du ministère de l'Environnement**

Telephone: / Téléphone : 1 800 268-6060 (toll free / sans frais) or 416 325-3000

Fax: / Télécopieur : 1 800 268-6062 (toll free / sans frais) or 416 325-3011

Email: / Courriel : moe.sac.moe@ontario.ca

**Ministry of Education /**

**Ministère de l'Éducation**

Telephone: / Téléphone : 416-325-2015

Fax: / Télécopieur : 416 325 4024

Email: / Courriel : steven.mitchell@ontario.ca

Or / Ou

**Ministry of Children and Youth Services /**

**Ministère des Services à l'enfance et à la jeunesse**

Region Région	Office Bureau	Telephone Téléphone	Fax Télécopieur	E-mail Courriel
Central West / Centre-Ouest	Mississauga	905 567-7177 ext. 352	905 567-3215	Martina.Rodrigues@ontario.ca
Central East / Centre-Est	Newmarket	905 868-8900 ext. 5250	905-895-6804	Jennifer.Peddle@ontario.ca
Toronto	Toronto	416 325-0575	416 327-0044	Beata.Machnik@ontario.ca
South East / Sud-Est	Kingston	613 536-7275	613 536-7272	Janet.Gibbs@ontario.ca
Eastern / Est	Ottawa	613 787-5279	613 787-3990	Diane.Henrie@ontario.ca
North East / Nord-Est	North Bay	705 474-3540	705 474-5446	Yvonne.Jeffrey@ontario.ca
Northern / Nord	Kenora	705 564-4515	705 564-7194	Serious.OccurKE.css@ontario.ca
	Sault Ste. Marie	705 564-4515	705 564-7193	Serious.OccurSA.css@ontario.ca
	Sudbury	705 564-4515	705 564-7191	Serious.Occur.css@ontario.ca
	Thunder Bay	705 564-4515	705 564-9557	Serious.OccurTH.css@ontario.ca
Hamilton / Niagara	Hamilton	905 521-7344	905 546-8277	Alexia.Watkins@ontario.ca
South West / Sud-Ouest	London	519 438-5111 ext. 3423	519 672-9461	Nancy.McGregor@ontario.ca

For more information, visit the ministry website at:  
[http://www.children.gov.on.ca/mcys/english/ministry/regional\\_offices\\_contact.asp](http://www.children.gov.on.ca/mcys/english/ministry/regional_offices_contact.asp).

Pour de plus amples renseignements, visitez le site Web du Ministère à  
<http://www.children.gov.on.ca/mcys/french/ministry/regoffice.asp>



Ministry of  
the Environment  
Ministère de  
l'Environnement

## Notice of Lead Exceedance Test Results Schools, Private Schools and Day Nurseries (O. Reg. 243/07) Avis de dépassement de la teneur normale en plomb Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)

### Laboratory Information

In accordance with the Schools, Private Schools and Day Nurseries Regulation made under the *Safe Drinking Water Act, 2002* (O. Reg. 243/07), S. 6(1) and (2), licensed laboratories must provide written notification within 24 hours of confirming a lead exceedance (and/or other exceedance of the Standards prescribed by Schedule 1, 2 or 3 to Ontario Regulation 169/03 (Ontario Drinking Water Quality Standards) made under the Act, other than for fluoride) to the following authorities:

1. Operator of the school, private school or day nursery;
2. Ministry of the Environment Spills Action Centre;
3. Local Medical Officer of Health.

### Operator Notification and Corrective Actions

O. Reg. 243/07 requires that the operator of the school, private school or day nursery who receives a report of a water sample test result that exceeds any of the prescribed standards in Section 6(1) shall, within 24 hours, give a copy of the report to:

1. Ministry of the Environment Spills Action Centre;
2. Local Medical Officer of Health;
3. Ministry of Education in the case of a public school; or  
Ministry of Children and Youth Services in the case of a day nursery.

The operator must also take any corrective action steps as directed by the Medical Officer of Health. Failure to notify these parties in accordance with the Regulation constitutes an offence under the Act.

### Issue Resolution

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results.

### Renseignements pour les laboratoires

Conformément aux paragraphes 6(1) et (2) du *Écoles, écoles privées et garderies* pris en application de la *Loi de 2002 sur la salubrité de l'eau potable* (Règl. de l'Ont. 243/07), les laboratoires autorisés qui confirment un dépassement de la teneur normale en plomb dans l'eau potable (ou tout autre dépassement des normes, autres que pour le fluorure, prescrites par les annexes 1, 2 ou 3 du Règlement de l'Ontario 169/03 – Normes de qualité de l'eau potable de l'Ontario, pris en application de la Loi) doivent avvertir par écrit les instances ci-dessous dans les 24 heures après que le résultat a été obtenu :

1. L'exploitant de l'école, de l'école privée ou de la garderie;
2. Le Centre d'intervention en cas de déversement du ministère de l'Environnement;
3. Le médecin hygiéniste local.

### Communication des résultats à l'exploitant et mesures correctives

Le Règl. de l'Ont. 243/07 oblige l'exploitant de l'école, de l'école privée ou de la garderie qui reçoit un rapport d'analyse révélant un dépassement des normes indiquées au paragraphe 6(1) pour l'eau potable à remettre une copie du rapport d'analyse en question aux instances suivantes, dans les 24 heures qui suivent la réception du rapport :

1. Le Centre d'intervention en cas de déversement du ministère de l'Environnement;
2. Le médecin hygiéniste local;
3. Le ministère de l'Éducation si l'échantillon provient d'une école publique; ou le ministère des Services à l'enfance et à la jeunesse si l'échantillon provient d'une garderie.

L'exploitant doit prendre toutes les mesures correctives prescrites par le médecin hygiéniste. Le défaut de communiquer les résultats à ces instances conformément au règlement constitue un délit.

### Règlement d'une question

L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.



Ministry of  
the Environment  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results  
Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Avis de dépassement de la teneur normale en plomb  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**Enquiries**

Spills Action Centre  
Ministry of the Environment  
5775 Yonge Street, Suite 501  
Toronto, ON M2M 4J1

Telephone: 1 800 268-6060 (toll free) or 416 325-3000

Fax: 1 800 268-6062 (toll free) or 416 325-3011

Website: [www.ontario.ca/drinkingwater](http://www.ontario.ca/drinkingwater)

**Renseignements complémentaires**

Centre d'intervention en cas de déversement  
Ministère de l'Environnement  
5775, rue Yonge, bureau 501  
Toronto (Ontario) M2M 4J1

Téléphone : 1 800 268-6060 (sans frais) or 416 325-3000

Télécopieur : 1 800 268-6062 (sans frais) or 416 325-3011

Site Web : [www.ontario.ca/eaupotable](http://www.ontario.ca/eaupotable)

Information on this form is collected by Ministry of the Environment staff on behalf of the Ministry in accordance with the *Safe Drinking Water Act, 2002* (SDWA) and its regulations. The collection, use and dissemination of this information by provincial institutions is governed by the *Freedom of Information and Protection of Privacy Act* (FIPPA). The information gathered herein will be used for the purpose of reporting lead exceedances from samples taken from schools, private schools and day nurseries under the SDWA and its regulations, and may be used for secondary purposes including investigations and law enforcement. Information contained on this form may be disclosed to other government agencies including municipalities, public health unit employees, the Ministry of Health and Long Term Care, the Ministry of Education and the Ministry of Community and Social Services pursuant to section 42 of FIPPA for the consistent purpose of administering programs related to drinking water safety.

Le personnel du ministère de l'Environnement recueille les renseignements figurant sur ce formulaire au nom du ministère conformément à la Loi de 2002 sur la salubrité de l'eau potable et à ses règlements. La collecte, l'utilisation et la communication de ces renseignements sont régies par la Loi sur l'accès à l'information et la protection de la vie privée. Les renseignements recueillis serviront à produire des rapports de dépassement de la teneur normale en plomb d'échantillons prélevés dans des écoles, des écoles privées et des garderies en vertu de la Loi de 2002 sur la salubrité de l'eau potable et de ses règlements. Ils pourront également servir à la réalisation d'enquêtes et à l'exécution de la loi. Les renseignements figurant sur ce formulaire peuvent être divulgués à d'autres organismes gouvernementaux, y compris à des services municipaux, à des services de santé publique, au ministère de la Santé et des Soins de longue durée, au ministère de l'Éducation et au ministère des Services sociaux et communautaires, conformément à l'article 42 de la Loi sur l'accès à l'information et la protection de la vie privée pour exécuter toute loi ou tout programme concernant la salubrité de l'eau potable.

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**C - 1. Exceedance Notifications/Corrective Actions / Avis de dépassement/Mesures correctives**

Please complete section C-1 and submit with sections A, B, D and E within 24 hours to the agencies listed in Section D. Upon Issue Resolution please submit Section C-2 within seven days to the same authorities to whom you submitted the initial exceedance test results / Remplissez la section C-1 et soumettez-la dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. Une fois la question réglée, soumettez la section C-2 dans les sept jours aux mêmes organismes ou responsables que vous avez initialement informés du ou des dépassements de la teneur normale en plomb.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
Learning Jungle School, Cooksville Campus	500067679

Are you co-located\* and by agreement you are the facility taking a single set of two one liter samples to meet the sampling requirements for all co-located facilities under this agreement? / Partagez-vous votre installation de plomberie\* et êtes-vous, en vertu d'une entente, l'établissement chargé de prélever une série unique de deux échantillons d'un litre afin de satisfaire aux exigences d'échantillonnage de tous les établissements qui partagent votre installation de plomberie, conformément à cette entente?

☐ Yes / Oui ☐ No / Non

If you answered Yes above, list the Names and DWIS No. for the schools/private schools and day nurseries you are sampling for and ensure that a copy of the test results is provided to those same facilities within 24 hours of receiving the test results from the laboratory. / Dans l'affirmative, fournissez le nom et le N° DWIS des écoles, écoles privées ou garderies au nom desquelles vous prélevez les échantillons et assurez-vous que ces établissements reçoivent une copie des résultats d'analyse dans les 24 heures suivant votre obtention des résultats d'analyse de la part du laboratoire.

Name of School / Private School / Day Nursery / Nom de l'école l'école privée ou de la garderie	DWIS No. / N° DWIS
1.	
2.	
3.	

For more than 4 co-located facilities, attach additional Section C-1's as required. /

Si plus de 4 établissements partagent l'installation de plomberie, annexe le nombre de sections C-1 nécessaires.

\*Co-located Facilities means, Two or more O. Reg 243/07 facilities (school, private school, day nursery) that are served by the same plumbing system.

The facilities may be either located in one building (Structure) or located in different buildings within one property. / On dit que des établissements « partagent une installation de plomberie » quand au moins deux établissements visés par le Règl. de l'Ont. 243/07 (école, école privée ou garderie) sont alimentés par une même installation de plomberie. Les établissements peuvent être situés dans un même bâtiment (structure partagée) ou dans des bâtiments différents sur une même propriété.

Earliest year plumbing installed (yyyy) /

Année d'installation de la plus ancienne section de plomberie (aaaa) \_\_\_\_\_

Was facility open to children under the age of 18 years at the time of sampling? /

L'établissement était-il ouvert aux enfants de moins de 18 ans au moment du prélèvement?

☐ Yes / Oui ☐ No / Non

Is this a re-sample test result for the same location for which a lead exceedance was previously reported? /

S'agit-il d'un prélèvement d'un robinet dont l'eau a déjà affiché un dépassement des normes de teneur en plomb?

☐ Yes / Oui ☐ No / Non

Indicate where you have sent this completed form. Contact information follows in Section D /

Précisez les autorités auxquelles vous avez transmis le présent formulaire. Leurs coordonnées figurent à la section D

☐ Ministry of the Environment Spills Action Centre  
Centre d'intervention en cas de déversement du ministère de l'Environnement

☐ Local Medical Officer of Health  
Médecin hygiéniste local

☐ Ministry of Children and Youth Services  
Ministère des Services à l'enfance et à la jeunesse

☐ Ministry of Education  
Ministère de l'Éducation

Indicate if Local Medical Officer of Health provided guidance on corrective actions. /

Indiquez si le médecin hygiéniste local a fourni des conseils sur les mesures à prendre.

☐ Yes / Oui ☐ No / Non

If you answered Yes, list guidance provided / Dans l'affirmative, précisez les conseils fournis.

---

---

---

---

---

---

---

---

---

---

Name of person completing this section (print name) / Nom de la personne qui a rempli la présente section (en lettres moulées)	Signature	Date written notification submitted (yyyy/mm/dd) / Date de réception de l'avis écrit (aaaa/mm/jj)
--	-----------	---

SAC Office use only / À l'usage du CIOD

AWQI Number / N° de l'avis de déclaration  
d'une eau de mauvaise qualité :**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)****C - 2. Notice of Issue Resolution / Avis de règlement d'une question**

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. **You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results.** / L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. **Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.**

In the case of co-located facilities, those facilities that have reached an agreement to have one set of samples taken on their behalf, will need to have a representative for each facility sign in the co-location section at the bottom of this page to indicate that they have complied with all corrective actions that the public health unit has required. / En ce qui concerne les établissements qui partagent une installation de plomberie, chaque établissement qui a conclu une entente prévoyant le prélèvement d'une série unique d'échantillons en son nom doit désigner un représentant qui signera la section portant sur la partage de l'installation de plomberie au bas de la présente page afin de confirmer qu'elle a pris toutes les mesures correctives prescrites par le bureau de santé publique.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
Learning Jungle School, Cooksville Campus	500067679

**Contact Information / Personne-ressource**

Last Name / Nom de famille	First Name / Prénom	Telephone No. / N° de téléphone ext. / poste
----------------------------	---------------------	--

Name of Local Public Health Unit

Date Initial Exceedance Submitted to the Ministry of the Environment - Spills Action Centre (yyyy/mm/dd) / Date de signalement du dépassement au ministère de l'Environnement - Centre d'intervention en cas de déversement (aaaa/mm/jj)			
Date Resolved (yyyy/mm/dd) / Date de résolution (aaaa/mm/jj)		Date Resolution Submitted (yyyy/mm/dd) Date de soumission de l'avis de résolution (aaaa/mm/jj)	

Additional Comments / Commentaires supplémentaires :

**I have complied with all corrective actions required by my Local Public Health Unit. /****J'ai pris toutes les mesures correctives prescrites par le bureau de santé publique local. Signed by / Signé par**

Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
----------------------------	---------------------	-----------	--

Co-location Signatures if applicable. / Signatures des représentants des établissements qui partagent une installation de plomberie, le cas échéant.

1. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
Signed by / Signé par Last Name / Nom de famille	First Name / Prénom
Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
2. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
Signed by / Signé par Last Name / Nom de famille	First Name / Prénom
Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
3. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
Signed by / Signé par Last Name / Nom de famille	First Name / Prénom
Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)

SAC Office use only / À l'usage du CIO

AWQI Number / N° de l'avis de déclaration  
d'une eau de mauvaise qualité

108053

Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)

AWQI Updated By Simon Ng

3:26 pm, Aug 31, 2012

**C - 2. Notice of Issue Resolution / Avis de règlement d'une question**

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results. / L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.

In the case of co-located facilities, those facilities that have reached an agreement to have one set of samples taken on their behalf, will need to have a representative for each facility sign in the co-location section at the bottom of this page to indicate that they have complied with all corrective actions that the public health unit has required. / En ce qui concerne les établissements qui partagent une installation de plomberie, chaque établissement qui a conclu une entente prévoyant le prélèvement d'une série unique d'échantillons en son nom doit désigner un représentant qui signera la section portant sur la partage de l'installation de plomberie au bas de la présente page afin de confirmer qu'elle a pris toutes les mesures correctives prescrites par le bureau de santé publique.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
Learning Jungle School, Cooksville Campus	500067679

## Contact Information / Personne-ressource

Last Name / Nom de famille	First Name / Prénom	Telephone No. / N° de téléphone
CHINCHURNO	NESMITH	(416) 227-0761 ext. / poste

Name of Local Public Health Unit

PEEL PUBLIC HEALTH

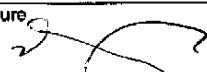
Date Initial Exceedance Submitted to the Ministry of the Environment - Spills Action Centre (yyyy/mm/dd) / Date de signalement du dépassement au ministère de l'Environnement - Centre d'intervention en cas de déversement (aaaa/mm/jj)	2012	07	16
--	------	----	----

Date Resolved (yyyy/mm/dd) / Date de résolution (aaaa/mm/jj)	2012	08	21	Date Resolution Submitted (yyyy/mm/dd) / Date de soumission de l'avis de résolution (aaaa/mm/jj)	2012	08	22
--	------	----	----	--	------	----	----

Additional Comments / Commentaires supplémentaires :

I have complied with all corrective actions required by my Local Public Health Unit. /

J'ai pris toutes les mesures correctives prescrites par le bureau de santé publique local. Signed by / Signé par

Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
CHINCHURNO	NESMITH		2012 08 22

Co-location Signatures if applicable. / Signatures des représentants des établissements qui partagent une installation de plomberie, le cas échéant.

1. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
---	--------------------

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
---	---------------------	-----------	---------------------------------------

2. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
---	--------------------

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
---	---------------------	-----------	---------------------------------------

3. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
---	--------------------

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
---	---------------------	-----------	---------------------------------------



Ministry of  
the Environment  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results**  
**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Avis de dépassement de la teneur normale en plomb**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**Instructions:**

- Please print if completing by hand.
- Submit completed forms by fax or e-mail.
- Lab completes sections A, B, D and E
- Facility operator completes Section C-1 and submits with sections A,B,D and E within 24 hours to the applicable agencies listed in section D. Facility operator completes and submits Section C-2 upon Issue Resolution.

**Instructions :**

- Écrivez en caractères d'imprimerie si vous remplissez à la main.
- Transmettez le document rempli par télécopieur ou par courriel.
- Le laboratoire doit remplir les sections A, B, D et E.
- L'exploitant doit remplir la section C-1 et la soumettre dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. L'exploitant doit remplir la section C-2 et la soumettre une fois la question réglée.

SAC Office use only / À l'usage du CICO

AWQI Number / N° de l'avis de déclaration  
d'une eau de mauvaise qualité

**108053**

**A. Laboratory Information / Renseignements sur le laboratoire**

Laboratory Name / Nom du laboratoire <b>York-Durham Regional Environmental Laboratory</b>			Licence Number / Numéro du permis <b>s.21</b>		
Street No. and Name / N° et nom de la rue <b>901 McKay Road</b>		Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section	
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité <b>Pickering</b>	Province <b>ON</b>		Postal Code / Code postal <b>L1W 3A3</b>	
Business Telephone No. / N° de téléphone <b>905 686-0041</b>		Laboratory Written Notification Prepared by / Avis écrit du laboratoire préparé par <b>Hasan Ahmed</b>			
Date of exceedance O. Reg 169/03 test result authorized / Date de la constatation du dépassement des normes du Regl. de l'Ont. 169/03		<b>2012</b>	<b>08</b>	<b>21</b>	Date of exceedance notifications submitted / Date de communication du dépassement des normes
Signed by (print name) / Signé par (en lettres moulées) <b>Hasan Ahmed</b>		Signature 			

**B. Facility Information / Renseignements sur l'établissement**

Name of School/Day Nursery / Nom de l'école ou de la garderie <b>Learning Jungle School, Cooksville Campus</b>					
Legal Name of School/Day Nursery Operation (i.e. School Board) / Dénomination sociale de l'établissement (c.-à-d. conseil scolaire) <b>Learning Jungle School, Cooksville Campus</b>					
Type / Type	<input type="checkbox"/> School / École	<input type="checkbox"/> Private School / École privée	<input checked="" type="checkbox"/> Day Nursery / Garderie		
DWIS No. / N° DWIS <b>500067679</b>	Ministry of Education SFIS No./School No. /N° du SIS du ministère de l'Éducation / N° de l'école		Day Care Licence No. /N° du permis de garde d'enfants		
Street No. and Name / N° et nom de la rue <b>78 Agnes Street.</b>	Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section		
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité <b>Mississauga</b>	Province <b>ONT.</b>		Postal Code / Code postal <b>L5B 1J7</b>	
Contact Information / Personne-ressource Last Name / Nom de famille <b>Chingcuanco</b>		First Name / Prénom <b>Nesmith</b>			
Position / Poste occupé		Telephone No. / N° de téléphone <b>905 273-7023</b>		Fax No. / N° de télécopieur <b>416 229-0381</b>	
Email Address / Courriel <b>nchingcuanco@learningjungle.com</b>					

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**D. Exceedance Notifications / Avis de dépassement**

Name of School/Private School/Day Nursery / Nom de l'école, de l'école privée ou de la garderie

Learning Jungle School, Cooksville Campus

Local Medical Officer of Health / Médecin hygiéniste local

Peel Region Public Health

Telephone No. / N° de téléphone ext. / poste	Fax No. / N° de télécopieur	Email Address / Courriel
905 799-7700	905 501-0305	

Public schools submit exceedance results to Ministry of Education. /

Les écoles privées doivent communiquer tout dépassement au ministère de l'Éducation.

Day nurseries submit exceedance results to Ministry of Children and Youth Services. /

Les garderies doivent communiquer tout dépassement au ministère des Services à l'enfance et à la jeunesse.

If you are e-mailing this section, please enter "R243 Exceedance and name of your School/Private School/Day Nursery in Subject line. /

Si vous transmettez cette section par courriel, écrivez dans le champ d'objet « Dépassement – Règl. 243 » suivi du nom de votre école, école privée ou garderie.

**Ministry of the Environment Spills Action Centre /**

**Centre d'intervention en cas de déversement du ministère de l'Environnement**

Telephone / Téléphone : 1 800 268-6060 (toll free / sans frais) or 416 325-3000

Fax: / Télécopieur : 1 800 268-6062 (toll free / sans frais) or 416 325-3011

Email: / Courriel : moe.sac.moe@ontario.ca

**Ministry of Education /**

**Ministère de l'Éducation**

Telephone / Téléphone : 416-325-2015

Fax: / Télécopieur : 416 325 4024

Email: / Courriel : steven.mitchell@ontario.ca

Or / Ou

**Ministry of Children and Youth Services /**

**Ministère des Services à l'enfance et à la jeunesse**

Region Région	Office Bureau	Telephone Téléphone	Fax Télécopieur	E-mail Courriel
Central West / Centre-Ouest	Mississauga	905 567-7177 ext. 352	905 567-3215	Martina.Rodrigues@ontario.ca
Central East / Centre-Est	Newmarket	905 868-8900 ext. 5250	905-895-6804	Jennifer.Peddle@ontario.ca
Toronto	Toronto	416 325-0575	416 327-0044	Beata.Machnik@ontario.ca
South East / Sud-Est	Kingston	613 536-7275	613 536-7272	Janet.Gibbs@ontario.ca
Eastern / Est	Ottawa	613 787-5279	613 787-3990	Diane.Henne@ontario.ca
North East / Nord-Est	North Bay	705 474-3540	705 474-5446	Yvonne.Jeffrey@ontario.ca
Northern / Nord	Kenora	705 564-4515	705 564-7194	Serious.OccurKE.css@ontario.ca
	Sault Ste. Marie	705 564-4515	705 564-7193	Serious.OccurSA.css@ontario.ca
	Sudbury	705 564-4515	705 564-7191	Serious.Occur.css@ontario.ca
	Thunder Bay	705 564-4515	705 564-9557	Serious.OccurTH.css@ontario.ca
Hamilton / Niagara	Hamilton	905 521-7344	905 546-8277	Alexia.Watkins@ontario.ca
South West / Sud-Ouest	London	519 438-5111 ext. 3423	519 672-9461	Nancy.McGregor@ontario.ca

For more information, visit the ministry website at:

[http://www.children.gov.on.ca/mcys/english/ministry/regional\\_offices\\_contact.asp](http://www.children.gov.on.ca/mcys/english/ministry/regional_offices_contact.asp).

Pour de plus amples renseignements, visitez le site Web du Ministère à

<http://www.children.gov.on.ca/mcys/french/ministry/regoffice.asp>

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**E. Drinking Water Exceedance Results / Résultats de la mesure du dépassement des normes dans l'eau potable**

Name of School/Day Nursery /  
Nom de l'école ou de la garderie : Leaming Jungle School, Cooksville Campus

For Lead Samples Only / Pour le plomb seulement

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result (µg/L) / Résultat de l'analyse (µg/L)	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario"
650412 senior preschool washrm	2012/08/10	Standing / Stagnante	Lead / Plomb	17.6	10µg/L
650413 senior preschool washrm	2012/08/10	Flushed / Après rinçage	Lead / Plomb	2.3	10µg/L
650421 Kitchen	2012/08/10	Standing / Stagnante	Lead / Plomb	21.8	10µg/L
650422 Kitchen	2012/08/10	Flushed / Après rinçage	Lead / Plomb	3.0	10µg/L

Other Parameter Exceedances Under O. Regulation 243/07 / Autres dépassements des paramètres en vertu du Règl. de l'Ont. 243/07

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result Résultat de l'analyse	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario"
		Standing / Stagnante			
		Flushed / Après rinçage			

Comments / Commentaires



**Ontario**

Ministry of  
the Environment  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results  
Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Avis de dépassement de la teneur normale en plomb  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**Laboratory Information**

In accordance with the Schools, Private Schools and Day Nurseries Regulation made under the *Safe Drinking Water Act, 2002* (O. Reg. 243/07), S. 6(1) and (2), licensed laboratories must provide written notification within 24 hours of confirming a lead exceedance (and/or other exceedance of the Standards prescribed by Schedule 1, 2 or 3 to Ontario Regulation 169/03 (Ontario Drinking Water Quality Standards) made under the Act, other than for fluoride) to the following authorities:

1. Operator of the school, private school or day nursery;
2. Ministry of the Environment Spills Action Centre;
3. Local Medical Officer of Health

**Operator Notification and Corrective Actions**

O. Reg. 243/07 requires that the operator of the school, private school or day nursery who receives a report of a water sample test result that exceeds any of the prescribed standards in Section 6(1) shall, within 24 hours, give a copy of the report to:

1. Ministry of the Environment Spills Action Centre;
2. Local Medical Officer of Health;
3. Ministry of Education in the case of a public school; or Ministry of Children and Youth Services in the case of a day nursery.

The operator must also take any corrective action steps as directed by the Medical Officer of Health. Failure to notify these parties in accordance with the Regulation constitutes an offence under the Act

**Issue Resolution**

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results.

**Renseignements pour les laboratoires**

Conformément aux paragraphes 6(1) et (2) du *Écoles, écoles privées et garderies* pris en application de la *Loi de 2002 sur la salubrité de l'eau potable* (Règl. de l'Ont. 243/07), les laboratoires autorisés qui confirment un dépassement de la teneur normale en plomb dans l'eau potable (ou tout autre dépassement des normes, autres que pour le fluorure, prescrites par les annexes 1, 2 ou 3 du Règlement de l'Ontario 169/03 – Normes de qualité de l'eau potable de l'Ontario, pris en application de la Loi) doivent avvertir par écrit les instances ci-dessous dans les 24 heures après que le résultat a été obtenu :

1. L'exploitant de l'école, de l'école privée ou de la garderie;
2. Le Centre d'intervention en cas de déversement du ministère de l'Environnement;
3. Le médecin hygiéniste local.

**Communication des résultats à l'exploitant et mesures correctives**

Le Règl. de l'Ont. 243/07 oblige l'exploitant de l'école, de l'école privée ou de la garderie qui reçoit un rapport d'analyse révélant un dépassement des normes indiquées au paragraphe 6(1) pour l'eau potable à remettre une copie du rapport d'analyse en question aux instances suivantes, dans les 24 heures qui suivent la réception du rapport :

1. Le Centre d'intervention en cas de déversement du ministère de l'Environnement;
2. Le médecin hygiéniste local;
3. Le ministère de l'Éducation si l'échantillon provient d'une école publique; ou le ministère des Services à l'enfance et à la jeunesse si l'échantillon provient d'une garderie.

L'exploitant doit prendre toutes les mesures correctives prescrites par le médecin hygiéniste. Le défaut de communiquer les résultats à ces instances conformément au règlement constitue un délit.

**Règlement d'une question**

L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.



Ministry of  
the Environment  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results  
Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Avis de dépassement de la teneur normale en plomb  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**Enquiries**

Spills Action Centre  
Ministry of the Environment  
5775 Yonge Street, Suite 501  
Toronto, ON M2M 4J1

Telephone: 1 800 268-6060 (toll free) or 416 325-3000

Fax: 1 800 268-6062 (toll free) or 416 325-3011

Website: [www.ontario.ca/drinkingwater](http://www.ontario.ca/drinkingwater)

**Renseignements complémentaires**

Centre d'intervention en cas de déversement

Ministère de l'Environnement

5775, rue Yonge, bureau 501

Toronto (Ontario) M2M 4J1

Téléphone : 1 800 268-6060 (sans frais) or 416 325-3000

Télécopieur : 1 800 268-6062 (sans frais) or 416 325-3011

Site Web : [www.ontario.ca/eaupotable](http://www.ontario.ca/eaupotable)

Information on this form is collected by Ministry of the Environment staff on behalf of the Ministry in accordance with the *Safe Drinking Water Act, 2002* (SDWA) and its regulations. The collection, use and dissemination of this information by provincial institutions is governed by the *Freedom of Information and Protection of Privacy Act* (FIPPA). The information gathered herein will be used for the purpose of reporting lead exceedances from samples taken from schools, private schools and day nurseries under the SDWA and its regulations, and may be used for secondary purposes including investigations and law enforcement. Information contained on this form may be disclosed to other government agencies including municipalities, public health unit employees, the Ministry of Health and Long Term Care, the Ministry of Education and the Ministry of Community and Social Services pursuant to section 42 of FIPPA for the consistent purpose of administering programs related to drinking water safety.

Le personnel du ministère de l'Environnement recueille les renseignements figurant sur ce formulaire au nom du ministère conformément à la Loi de 2002 sur la salubrité de l'eau potable et à ses règlements. La collecte, l'utilisation et la communication de ces renseignements sont régies par la Loi sur l'accès à l'information et la protection de la vie privée. Les renseignements recueillis serviront à produire des rapports de dépassement de la teneur normale en plomb d'échantillons prélevés dans des écoles, des écoles privées et des garderies en vertu de la Loi de 2002 sur la salubrité de l'eau potable et de ses règlements. Ils pourront également servir à la réalisation d'enquêtes et à l'exécution de la loi. Les renseignements figurant sur ce formulaire peuvent être divulgués à d'autres organismes gouvernementaux, y compris à des services municipaux, à des services de santé publique, au ministère de la Santé et des Soins de longue durée, au ministère de l'Éducation et au ministère des Services sociaux et communautaires, conformément à l'article 42 de la Loi sur l'accès à l'information et la protection de la vie privée pour exécuter toute loi ou tout programme concernant la salubrité de l'eau potable.

### Schools, Private Schools and Day Nurseries (O. Reg. 243/07) Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)

#### C - 1. Exceedance Notifications/Corrective Actions / Avis de dépassement/Mesures correctives

Please complete section C-1 and submit with sections A, B, D and E within 24 hours to the agencies listed in Section D. Upon Issue Resolution please submit Section C-2 within seven days to the same authorities to whom you submitted the initial exceedance test results / Remplissez la section C-1 et soumettez-la dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. Une fois la question réglée, soumettez la section C-2 dans les sept jours aux mêmes organismes ou responsables que vous avez initialement informés du ou des dépassements de la teneur normale en plomb.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie

DWIS No. / N° DWIS

Learning Jungle School, Cooksville Campus

500067679

Are you co-located\* and by agreement you are the facility taking a single set of two one liter samples to meet the sampling requirements for all co-located facilities under this agreement? / Partagez-vous votre installation de plomberie\* et êtes-vous, en vertu d'une entente, l'établissement chargé de prélever une série unique de deux échantillons d'un litre afin de satisfaire aux exigences d'échantillonnage de tous les établissements qui partagent votre installation de plomberie, conformément à cette entente?

☐ Yes / Oui ☒ No / Non

If you answered Yes above, list the Names and DWIS No. for the schools/private schools and day nurseries you are sampling for and ensure that a copy of the test results is provided to those same facilities within 24 hours of receiving the test results from the laboratory. / Dans l'affirmative, fournissez le nom et le N° DWIS des écoles, écoles privées ou garderies au nom desquelles vous prélevez les échantillons et assurez-vous que ces établissements reçoivent une copie des résultats d'analyse dans les 24 heures suivant votre obtention des résultats d'analyse de la part du laboratoire.

Name of School / Private School / Day Nursery / Nom de l'école l'école privée ou de la garderie

DWIS No. / N° DWIS

1.

2.

3.

For more than 4 co-located facilities, attach additional Section C-1's as required. /

Si plus de 4 établissements partagent l'installation de plomberie, annexe le nombre de sections C-1 nécessaires.

\*Co-located Facilities means, Two or more O. Reg. 243/07 facilities (school, private school, day nursery) that are served by the same plumbing system.

The facilities may be either located in one building (Structure) or located in different buildings within one property. / On dit que des établissements « partagent une installation de plomberie » quand au moins deux établissements visés par le Règl. de l'Ont. 243/07 (école, école privée ou garderie) sont alimentés par une même installation de plomberie. Les établissements peuvent être situés dans un même bâtiment (structure partagée) ou dans des bâtiments différents sur une même propriété.

Earliest year plumbing installed (yyyy) /

Année d'installation de la plus ancienne section de plomberie (aaaa) before 1970

Was facility open to children under the age of 18 years at the time of sampling? /

L'établissement était-il ouvert aux enfants de moins de 18 ans au moment du prélèvement?

☒ Yes / Oui ☐ No / Non

Is this a re-sample test result for the same location for which a lead exceedance was previously reported? /

S'agit-il d'un prélèvement d'un robinet dont l'eau a déjà affiché un dépassement des normes de teneur en plomb?

☒ Yes / Oui ☐ No / Non

Indicate where you have sent this completed form. Contact information follows in Section D /

Précisez les autorités auxquelles vous avez transmis le présent formulaire. Leurs coordonnées figurent à la section D

☐ Ministry of the Environment Spills Action Centre  
Centre d'intervention en cas de déversement du ministère de l'Environnement

☐ Ministry of Children and Youth Services  
Ministère des Services à l'enfance et à la jeunesse

☒ Local Medical Officer of Health  
Médecin hygiéniste local

☐ Ministry of Education  
Ministère de l'Éducation

Indicate if Local Medical Officer of Health provided guidance on corrective actions. /

Indiquez si le médecin hygiéniste local a fourni des conseils sur les mesures à prendre.

☒ Yes / Oui ☐ No / Non

If you answered Yes, list guidance provided / Dans l'affirmative, précisez les conseils fournis

BASED ON 2 SAMPLE RESULTS, PUBLIC HEALTH HAS INDICATED  
THAT DRINKING FROM TAP WATER CAN BE REINSTATED. DAILY  
FLUSHING MUST BE CONTINUALLY IMPLEMENTED.

Name of person completing this section (print name) /  
Nom de la personne qui a rempli la présente section  
(en lettres moulées)

Signature

NESMITH CHINECUMANO

Date written notification submitted  
(yyyy/mm/dd) / Date de réception  
de l'avis écrit (aaaa/mm/jj)

2012/08/20

**INCIDENT REPORT****DW System**

**Name:** R243 LEARNING JUNGLE SCHOOL &  
COOKSVILLE CAMPUS (0003557)

**Address:** 78 AGNES ST  
MISSISSAUGA ON L5B 1J7

**District Office:** Halton-Peel District

**DWS #:** 500067679

**DWS Category:** Designated Facility

**DWS Owner**

**Name:** LEARNING JUNGLE SCHOOL

**Mailing Address:** 45 SHEPPARD Ave E TORONTO  
ON Canada M2N 5W9

**Physical Address:** 45 SHEPPARD Ave E TORONTO  
ON Canada M2N 5W9

**Phone:** (416) 227-0461

**Fax:**

**Email:**

**Client Type:** COMMERCIAL

**MOE Information**

**Incident Report #:** 1-3LS9-4

**AWQI #:** 107579

**Date & Time Reported to MOE:** July 30, 2012 04:12:05 PM

**Office Receiving Incident Report:** SAC

**Incident Info Received By:** SAC

**Incident Type:** O.Reg. 243 Lead Exceedance

**Referring Inspection Report #:**

**Incident Summary:** R243 Lead Exceedance

**MOE Response:** No Field Response

**Was an ERP called out?** N

**Master Incident Report #:** 1-3KIK-2

**Master AWQI #:**

**Date & Time MOE Arrival:**

**IDS Reference #:**

## Incident Description

Incident Date	Incident Description	Created By
July 30, 2012 04:12:05 PM	R243 Lead Exceedance	SADMIN
July 31, 2012 04:23:46 PM	Test results: Preschool Washroom - Standing 18.3ug/L flushed 0.9ug/L  Kitchen - standing 16.5ug/L flushed 1.4ug/L	CHRISTOT
September 14, 2012 04:07:06 PM	Rec'd section C2. Flushed sample results for samples collection on Aug. 10, 2012 were below ODWQS for lead. HU advised incident has been resolved but facility is to continue with daily flushing. No further actions recommended at this time. Recommended for closure.	CHEESIEL

## Parameter Table

Sample Collection Date	Sample Location	Details	Parameter	Unit	Verbal DWS Result	Verbal Lab Result	Written DWS Result	Written Lab Result	Chlorine Residual	Result mg/L
July 20, 2012 12:00:00 AM			Lead	MG/L				0.0183		
July 20, 2012 12:00:00 AM			Lead	MG/L				0.0165		

## Caller/PO Information

**Contact Name:**

**Company:**

**Telephone #:**

**Fax Number:**

**Email Address:**

**Mailing Address:**

## Updates

**Date DWS Written Notification Provided:**

**Date Resolved:** July 16, 2012 12:00:00 AM

**Date Lab Written Notification Provided:** July 30, 2012 03:26:00 PM

**Notice of Resolution Provided:** August 31, 2012 12:08:00 AM

## Provincial Officer

**Name:** Elizabeth Chee Sing

**Badge #:**

**Work Unit:** Drinking Water Inspections Unit

**District/Area Office:** Halton-Peel District

**Date:** September 14, 2012

**Signature:**

## Supervisor

**Name:** Demetra Koros

**Work Unit:** Drinking Water Inspections Unit

**District/Area Office:** Halton-Peel District

**Date:** September 14, 2012

**Signature:**

## INCIDENT REPORT

### DW System

**System Name:** R243 LEARNING  
JUNGLE SCHOOL -  
COOKSVILLE CAMPUS  
(0003557)  
**System  
Address:** 78 AGNES ST  
MISSISSAUGA ON L5B  
1J7  
**District Office:** Halton-Peel District  
**DWS #:** 500067679  
**DWS Category:** Designated Facility

### DWS Owner

**Owner Name:** LEARNING JUNGLE SCHOOL  
**Owner Mailing  
Address:** 45 SHEPPARD Ave E TORONTO ON  
Canada M2N 5W9  
**Owner Physical  
Address:** 45 SHEPPARD AVE E TORONTO ON  
Canada M2N 5W9  
**Owner Phone:**  
**Owner Fax:**  
**Owner Email:**  
**Client Type:** COMMERCIAL

### MECP Information

**Incident Report #:** 1-3LS9-4  
**AWQI #:** 107579  
**Date & Time Reported to MECP:** Jul 30, 2012 16:12:05  
**Office Receiving Incident Report:** SAC  
**Incident Info Received By:** SAC  
**Incident Type:** O.Reg. 243 Lead Exceedence  
**Referring Inspection Report #:**  
**Incident Summary:** R243 Lead Exceedance  
**MECP Response:** No Field Response  
**Was an ERP called out?** N  
**Master Incident Report #:** 1-3KIK-2  
**Master AWQI #:**  
**Date & Time MECP Arrival:**  
**IDS Reference #:**

## Incident Description

Incident Date	Incident Description	Created By
Jul 30, 2012 16:12:05	R243 Lead Exceedance	SADMIN
Jul 31, 2012 16:23:46	Test results: Preschool Washroom - Standing 18.3ug/L flushed 0.9ug/L Kitchen - standing 16.5ug/L flushed 1.4ug/L	CHRISTOT
Sep 14, 2012 16:07:06	Rec'd section C2. Flushed sample results for samples collection on Aug. 10, 2012 were below ODWQS for lead. HU advised incident has been resolved but facility is to continue with daily flushing. No further actions recommended at this time. Recommended for closure.	CHEESIEL

## Parameter Table

Sample Collection Date	Sample Location	Details	Parameter	Unit	Verbal DWS Result	Verbal Lab Result	Written DWS Result	Written Lab Result	Chlorine Residual	Result mg/L
07/20/2012 00:00:00			Lead	MG/L				0.0183		

## Offences

Suspected Violation(s)/Offence(s)

**Caller/PO Information**

**Contact Name:**  
**Telephone #:**  
**Email Address:**  
**Mailing Address:**

**Company:**  
**Fax Number:**

---

**Provincial Officer**

**Name:** Elizabeth Chee Sing  
**Work Unit:** Drinking Water Inspections Unit  
**Date:** February 18, 2025  
**Signature:**

**Badge #:** 1430  
**District/Area Office:** Halton-Peel District

**Supervisor**

**Name:** Demetra Koros  
**Work Unit:** Drinking Water Inspections Unit  
**Date:** February 18, 2025  
**Signature:**

**District/Area Office:** Halton-Peel District

11:27 am, Jul 13, 2012



Ministry of  
the Environment  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results**  
**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Avis de dépassement de la teneur normale en plomb**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**Instructions:**

- Please print if completing by hand.
- Submit completed forms by fax or e-mail.
- Lab completes sections A, B, D and E.
- Facility operator completes Section C-1 and submits with sections A, B, D and E within 24 hours to the applicable agencies listed in section D. Facility operator completes and submits Section C-2 upon Issue Resolution.

**Instructions :**

- Écrivez en caractères d'imprimerie si vous remplissez à la main.
- Transmettez le document rempli par télécopieur ou par courriel.
- Le laboratoire doit remplir les sections A, B, D et E.
- L'exploitant doit remplir la section C-1 et la soumettre dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. L'exploitant doit remplir la section C-2 et la soumettre une fois la question réglée.

SAC Office use only / À l'usage du CIQD  
AWQI Number / N° de l'avis de déclaration  
d'une eau de mauvaise qualité :

107103

**A. Laboratory Information / Renseignements sur le laboratoire**

Laboratory Name / Nom du laboratoire <b>York-Durham Regional Environmental Laboratory</b>			Licence Number / Numéro du permis <b>s.21</b>		
Street No. and Name / N° et nom de la rue <b>901 McKay Road</b>		Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section	
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité <b>Pickering</b>	Province <b>ON</b>		Postal Code / Code postal <b>L1W 3A3</b>	
Business Telephone No. / N° de téléphone <b>905 686-0041</b>		Laboratory Written Notification Prepared by / Avis écrit du laboratoire préparé par <b>Hasan Ahmed</b>			
Date of exceedance O. Reg 169/03 test result authorized / Date de la constatation du dépassement des normes du Règl. de l'Ont. 169/03		<b>2012</b>	<b>07</b>	<b>13</b>	Date of exceedance notifications submitted / Date de communication du dépassement des normes
Signed by (print name) / Signé par (en lettres moulées) <b>Hasan Ahmed</b>		Signature 			

**B. Facility Information / Renseignements sur l'établissement**

Name of School/Day Nursery / Nom de l'école ou de la garderie <b>Learning Jungle School, Cooksville Campus</b>					
Legal Name of School/Day Nursery Operation (i.e. School Board) / Dénomination sociale de l'établissement (c.-à-d. conseil scolaire) <b>Learning Jungle School, Cooksville Campus</b>					
Type / Type	<input type="checkbox"/> School / École	<input type="checkbox"/> Private School / École privée	<input checked="" type="checkbox"/> Day Nursery / Garderie		
DWIS No. / N° DWIS <b>500067679</b>	Ministry of Education SFIS No./School No. /N° du SIIS du ministère de l'Éducation / N° de l'école		Day Care Licence No. /N° du permis de garde d'enfants		
Street No. and Name / N° et nom de la rue <b>78 Agnes Street</b>	Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section		
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité <b>Mississauga</b>	Province <b>ONT.</b>		Postal Code / Code postal <b>L5B 1J7</b>	
Contact Information / Personne-ressource Last Name / Nom de famille <b>Kuo</b>		First Name / Prénom <b>Pahai</b>			
Position / Poste occupé		Telephone No. / N° de téléphone <b>905 273-7023</b>		Fax No. / N° de télécopieur <b>416 229-0381</b>	
Email Address / Courriel <b>pkuo@learninijungle.com</b>					

**E. Drinking Water Exceedance Results / Résultats de la mesure du dépassement des normes dans l'eau potable**

Name of School/Day Nursery /  
Nom de l'école ou de la garderie : Learning Jungle School, Cooksville Campus

For Lead Samples Only / Pour le plomb seulement

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result (µg/L) / Résultat de l'analyse (µg/L)	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario"
643157 Kitchen	2012/07/09	Standing / Stagnante	Lead / Plomb	39.5	10µg/L
643158 Kitchen	2012/07/09	Flushed / Après rinçage	Lead / Plomb	44.3	10µg/L
		Standing / Stagnante	Lead / Plomb		10µg/L
		Flushed / Après rinçage	Lead / Plomb		10µg/L

Other Parameter Exceedances Under O. Regulation 243/07 / Autres dépassements des paramètres en vertu du Règl. de l'Ont. 243/07

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result Résultat de l'analyse	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario"
		Standing / Stagnante			
		Flushed / Après rinçage			

Comments / Commentaires

## Schools, Private Schools and Day Nurseries (O. Reg. 243/07) Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)

### C - 1. Exceedance Notifications/Corrective Actions / Avis de dépassement/Mesures correctives

Please complete section C-1 and submit with sections A, B, D and E within 24 hours to the agencies listed in Section D. Upon Issue Resolution please submit Section C-2 within seven days to the same authorities to whom you submitted the initial exceedance test results / Remplissez la section C-1 et soumettez-la dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. Une fois la question réglée, soumettez la section C-2 dans les sept jours aux mêmes organismes ou responsables que vous avez initialement informés du ou des dépassements de la teneur normale en plomb.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie

DWIS No. / N° DWIS

Learning Jungle School, Cooksville Campus

500067679

Are you co-located\* and by agreement you are the facility taking a single set of two one liter samples to meet the sampling requirements for all co-located facilities under this agreement? / Partagez-vous votre installation de plomberie\* et êtes-vous, en vertu d'une entente, l'établissement chargé de prélever une série unique de deux échantillons d'un litre afin de satisfaire aux exigences d'échantillonnage de tous les établissements qui partagent votre installation de plomberie, conformément à cette entente?

☐ Yes / Oui ☐ No / Non

If you answered Yes above, list the Names and DWIS No. for the schools/private schools and day nurseries you are sampling for and ensure that a copy of the test results is provided to those same facilities within 24 hours of receiving the test results from the laboratory. / Dans l'affirmative, fournissez le nom et le N° DWIS des écoles, écoles privées ou garderies au nom desquelles vous prélevez les échantillons et assurez-vous que ces établissements reçoivent une copie des résultats d'analyse dans les 24 heures suivant votre obtention des résultats d'analyse de la part du laboratoire.

Name of School / Private School / Day Nursery / Nom de l'école l'école privée ou de la garderie

DWIS No. / N° DWIS

1.

2.

3.

For more than 4 co-located facilities, attach additional Section C-1's as required. /

Si plus de 4 établissements partagent l'installation de plomberie, annexe le nombre de sections C-1 nécessaires.

\*Co-located Facilities means, Two or more O. Reg 243/07 facilities (school, private school, day nursery) that are served by the same plumbing system.

The facilities may be either located in one building (Structure) or located in different buildings within one property. / On dit que des établissements « partagent une installation de plomberie » quand au moins deux établissements visés par le Règl. de l'Ont. 243/07 (école, école privée ou garderie) sont alimentés par une même installation de plomberie. Les établissements peuvent être situés dans un même bâtiment (structure partagée) ou dans des bâtiments différents sur une même propriété.

Earliest year plumbing installed (yyyy) /

Année d'installation de la plus ancienne section de plomberie (aaaa) \_\_\_\_\_

Was facility open to children under the age of 18 years at the time of sampling? /

L'établissement était-il ouvert aux enfants de moins de 18 ans au moment du prélèvement?

☐ Yes / Oui ☐ No / Non

Is this a re-sample test result for the same location for which a lead exceedance was previously reported? /

S'agit-il d'un prélèvement d'un robinet dont l'eau a déjà affiché un dépassement des normes de teneur en plomb?

☐ Yes / Oui ☐ No / Non

Indicate where you have sent this completed form. Contact information follows in Section D /

Précisez les autorités auxquelles vous avez transmis le présent formulaire. Leurs coordonnées figurent à la section D

☐ Ministry of the Environment Spills Action Centre  
Centre d'intervention en cas de déversement du ministère de l'Environnement

☐ Local Medical Officer of Health  
Médecin hygiéniste local

☐ Ministry of Children and Youth Services  
Ministère des Services à l'enfance et à la jeunesse

☐ Ministry of Education  
Ministère de l'Éducation

Indicate if Local Medical Officer of Health provided guidance on corrective actions. /

Indiquez si le médecin hygiéniste local a fourni des conseils sur les mesures à prendre.

☐ Yes / Oui ☐ No / Non

If you answered Yes, list guidance provided / Dans l'affirmative, précisez les conseils fournis.

Name of person completing this section (print name) /  
Nom de la personne qui a rempli la présente section  
(en lettres moulées)

Signature

Date written notification submitted  
(yyyy/mm/dd) / Date de réception  
de l'avis écrit (aaaa/mm/jj)

SAC Office use only / À l'usage du CIQD

AWQI Number / N° de l'avis de déclaration  
d'une eau de mauvaise qualité :**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)****C - 2. Notice of Issue Resolution / Avis de règlement d'une question**

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. **You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results.** / L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. **Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.**

In the case of co-located facilities, those facilities that have reached an agreement to have one set of samples taken on their behalf, will need to have a representative for each facility sign in the co-location section at the bottom of this page to indicate that they have complied with all corrective actions that the public health unit has required. / En ce qui concerne les établissements qui partagent une installation de plomberie, chaque établissement qui a conclu une entente prévoyant le prélèvement d'une série unique d'échantillons en son nom doit désigner un représentant qui signera la section portant sur la partage de l'installation de plomberie au bas de la présente page afin de confirmer qu'elle a pris toutes les mesures correctives prescrites par le bureau de santé publique.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
--	--------------------

**Contact Information / Personne-ressource**

Last Name / Nom de famille	First Name / Prénom	Telephone No. / N° de téléphone ext. / poste
----------------------------	---------------------	--

Name of Local Public Health Unit

Date Initial Exceedance Submitted to the Ministry of the Environment - Spills Action Centre (yyyy/mm/dd) / Date de signalement du dépassement au ministère de l'Environnement - Centre d'intervention en cas de déversement (aaaa/mm/jj)			
Date Resolved (yyyy/mm/dd) / Date de résolution (aaaa/mm/jj)		Date Resolution Submitted (yyyy/mm/dd) Date de soumission de l'avis de résolution (aaaa/mm/jj)	

Additional Comments / Commentaires supplémentaires :

**I have complied with all corrective actions required by my Local Public Health Unit. /****J'ai pris toutes les mesures correctives prescrites par le bureau de santé publique local. Signed by / Signé par**

Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
----------------------------	---------------------	-----------	--

Co-location Signatures if applicable. / Signatures des représentants des établissements qui partagent une installation de plomberie, le cas échéant.

1. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
---	--------------------

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
---	---------------------	-----------	--

2. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
---	--------------------

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
---	---------------------	-----------	--

3. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
---	--------------------

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
---	---------------------	-----------	--

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**D. Exceedance Notifications / Avis de dépassement**

Name of School/Private School/Day Nursery / Nom de l'école, de l'école privée ou de la garderie

Learning Jungle School, Cooksville Campus

Local Medical Officer of Health / Médecin hygiéniste local

Peel Region Public Health

Telephone No. / N° de téléphone ext. / poste	Fax No. / N° de télécopieur	Email Address / Courriel
905 799-7700	905 501-0305	

Public schools submit exceedance results to Ministry of Education. /  
 Les écoles privées doivent communiquer tout dépassement au ministère de l'Éducation.

Day nurseries submit exceedance results to Ministry of Children and Youth Services. /  
 Les garderies doivent communiquer tout dépassement au ministère des Services à l'enfance et à la jeunesse.

If you are e-mailing this section, please enter "R243 Exceedance and name of your School/Private School/Day Nursery in Subject line. /  
 Si vous transmettez cette section par courriel, écrivez dans le champ d'objet « Dépassement – Règl. 243 » suivi du nom de votre école, école privée ou garderie.

**Ministry of the Environment Spills Action Centre /  
 Centre d'intervention en cas de déversement du ministère de l'Environnement**

Telephone: / Téléphone : 1 800 268-6060 (toll free / sans frais) or 416 325-3000

Fax: / Télécopieur : 1 800 268-6062 (toll free / sans frais) or 416 325-3011

Email: / Courriel : moe.sac.moe@ontario.ca

**Ministry of Education /  
 Ministère de l'Éducation**

Telephone: / Téléphone : 416-325-2015

Fax: / Télécopieur : 416 325 4024

Email: / Courriel : steven.mitchell@ontario.ca

Or / Ou

**Ministry of Children and Youth Services /  
 Ministère des Services à l'enfance et à la jeunesse**

Region Région	Office Bureau	Telephone Téléphone	Fax Télécopieur	E-mail Courriel
Central West / Centre-Ouest	Mississauga	905 567-7177 ext. 352	905 567-3215	Martina.Rodrigues@ontario.ca
Central East / Centre-Est	Newmarket	905 868-8900 ext. 5250	905-895-6804	Jennifer.Peddle@ontario.ca
Toronto	Toronto	416 325-0575	416 327-0044	Beata.Machnik@ontario.ca
South East / Sud-Est	Kingston	613 536-7275	613 536-7272	Janet.Gibbs@ontario.ca
Eastern / Est	Ottawa	613 787-5279	613 787-3990	Diane.Henrie@ontario.ca
North East / Nord-Est	North Bay	705 474-3540	705 474-5446	Yvonne.Jeffrey@ontario.ca
Northern / Nord	Kenora	705 564-4515	705 564-7194	Serious.OccurKE.css@ontario.ca
	Sault Ste. Marie	705 564-4515	705 564-7193	Serious.OccurSA.css@ontario.ca
	Sudbury	705 564-4515	705 564-7191	Serious.Occur.css@ontario.ca
	Thunder Bay	705 564-4515	705 564-9557	Serious.OccurTH.css@ontario.ca
Hamilton / Niagara	Hamilton	905 521-7344	905 546-8277	Alexia.Watkins@ontario.ca
South West / Sud-Ouest	London	519 438-5111ext. 3423	519 672-9461	Nancy.McGregor@ontario.ca

For more information, visit the ministry website at:  
[http://www.children.gov.on.ca/mcys/english/ministry/regional\\_offices\\_contact.asp](http://www.children.gov.on.ca/mcys/english/ministry/regional_offices_contact.asp).

Pour de plus amples renseignements, visitez le site Web du Ministère à  
<http://www.children.gov.on.ca/mcys/french/ministry/regoffice.asp>



Ministry of  
the Environment  
Ministère de  
l'Environnement

## Notice of Lead Exceedance Test Results Schools, Private Schools and Day Nurseries (O. Reg. 243/07) Avis de dépassement de la teneur normale en plomb Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)

### Laboratory Information

In accordance with the Schools, Private Schools and Day Nurseries Regulation made under the *Safe Drinking Water Act, 2002* (O. Reg. 243/07), S. 6(1) and (2), licensed laboratories must provide written notification within 24 hours of confirming a lead exceedance (and/or other exceedance of the Standards prescribed by Schedule 1, 2 or 3 to Ontario Regulation 169/03 (Ontario Drinking Water Quality Standards) made under the Act, other than for fluoride) to the following authorities:

1. Operator of the school, private school or day nursery;
2. Ministry of the Environment Spills Action Centre;
3. Local Medical Officer of Health.

### Operator Notification and Corrective Actions

O. Reg. 243/07 requires that the operator of the school, private school or day nursery who receives a report of a water sample test result that exceeds any of the prescribed standards in Section 6(1) shall, within 24 hours, give a copy of the report to:

1. Ministry of the Environment Spills Action Centre;
2. Local Medical Officer of Health;
3. Ministry of Education in the case of a public school; or  
Ministry of Children and Youth Services in the case of a day nursery.

The operator must also take any corrective action steps as directed by the Medical Officer of Health. Failure to notify these parties in accordance with the Regulation constitutes an offence under the Act.

### Issue Resolution

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results.

### Renseignements pour les laboratoires

Conformément aux paragraphes 6(1) et (2) du *Écoles, écoles privées et garderies* pris en application de la *Loi de 2002 sur la salubrité de l'eau potable* (Règl. de l'Ont. 243/07), les laboratoires autorisés qui confirment un dépassement de la teneur normale en plomb dans l'eau potable (ou tout autre dépassement des normes, autres que pour le fluorure, prescrites par les annexes 1, 2 ou 3 du Règlement de l'Ontario 169/03 – Normes de qualité de l'eau potable de l'Ontario, pris en application de la Loi) doivent avvertir par écrit les instances ci-dessous dans les 24 heures après que le résultat a été obtenu :

1. L'exploitant de l'école, de l'école privée ou de la garderie;
2. Le Centre d'intervention en cas de déversement du ministère de l'Environnement;
3. Le médecin hygiéniste local.

### Communication des résultats à l'exploitant et mesures correctives

Le Règl. de l'Ont. 243/07 oblige l'exploitant de l'école, de l'école privée ou de la garderie qui reçoit un rapport d'analyse révélant un dépassement des normes indiquées au paragraphe 6(1) pour l'eau potable à remettre une copie du rapport d'analyse en question aux instances suivantes, dans les 24 heures qui suivent la réception du rapport :

1. Le Centre d'intervention en cas de déversement du ministère de l'Environnement;
2. Le médecin hygiéniste local;
3. Le ministère de l'Éducation si l'échantillon provient d'une école publique; ou le ministère des Services à l'enfance et à la jeunesse si l'échantillon provient d'une garderie.

L'exploitant doit prendre toutes les mesures correctives prescrites par le médecin hygiéniste. Le défaut de communiquer les résultats à ces instances conformément au règlement constitue un délit.

### Règlement d'une question

L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.



Ministry of  
the Environment  
  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results  
Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Avis de dépassement de la teneur normale en plomb  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**Enquiries**

Spills Action Centre  
Ministry of the Environment  
5775 Yonge Street, Suite 501  
Toronto, ON M2M 4J1

Telephone: 1 800 268-6060 (toll free) or 416 325-3000

Fax: 1 800 268-6062 (toll free) or 416 325-3011

Website: [www.ontario.ca/drinkingwater](http://www.ontario.ca/drinkingwater)

Information on this form is collected by Ministry of the Environment staff on behalf of the Ministry in accordance with the *Safe Drinking Water Act*, 2002 (SDWA) and its regulations. The collection, use and dissemination of this information by provincial institutions is governed by the *Freedom of Information and Protection of Privacy Act* (FIPPA). The information gathered herein will be used for the purpose of reporting lead exceedances from samples taken from schools, private schools and day nurseries under the SDWA and its regulations, and may be used for secondary purposes including investigations and law enforcement. Information contained on this form may be disclosed to other government agencies including municipalities, public health unit employees, the Ministry of Health and Long Term Care, the Ministry of Education and the Ministry of Community and Social Services pursuant to section 42 of FIPPA for the consistent purpose of administering programs related to drinking water safety.

**Renseignements complémentaires**

Centre d'intervention en cas de déversement  
Ministère de l'Environnement  
5775, rue Yonge, bureau 501  
Toronto (Ontario) M2M 4J1

Téléphone : 1 800 268-6060 (sans frais) or 416 325-3000

Télécopieur : 1 800 268-6062 (sans frais) or 416 325-3011

Site Web : [www.ontario.ca/eaupotable](http://www.ontario.ca/eaupotable)

Le personnel du ministère de l'Environnement recueille les renseignements figurant sur ce formulaire au nom du ministère conformément à la Loi de 2002 sur la salubrité de l'eau potable et à ses règlements. La collecte, l'utilisation et la communication de ces renseignements sont régies par la Loi sur l'accès à l'information et la protection de la vie privée. Les renseignements recueillis serviront à produire des rapports de dépassement de la teneur normale en plomb d'échantillons prélevés dans des écoles, des écoles privées et des garderies en vertu de la Loi de 2002 sur la salubrité de l'eau potable et de ses règlements. Ils pourront également servir à la réalisation d'enquêtes et à l'exécution de la loi. Les renseignements figurant sur ce formulaire peuvent être divulgués à d'autres organismes gouvernementaux, y compris à des services municipaux, à des services de santé publique, au ministère de la Santé et des Soins de longue durée, au ministère de l'Éducation et au ministère des Services sociaux et communautaires, conformément à l'article 42 de la Loi sur l'accès à l'information et la protection de la vie privée pour exécuter toute loi ou tout programme concernant la salubrité de l'eau potable.

11:47 am, Jul 16, 2012



Ministry of  
the Environment  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results****Schools, Private Schools and Day Nurseries (O. Reg. 243/07)****Avis de dépassement de la teneur normale en plomb****Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)****Instructions:**

- Please print if completing by hand.
- Submit completed forms by fax or e-mail.
- Lab completes sections A, B, D and E.
- Facility operator completes Section C-1 and submits with sections A, B, D and E within 24 hours to the applicable agencies listed in section D. Facility operator completes and submits Section C-2 upon Issue Resolution.

**Instructions :**

- Écrivez en caractères d'imprimerie si vous remplissez à la main.
- Transmettez le document rempli par télécopieur ou par courriel.
- Le laboratoire doit remplir les sections A, B, D et E.
- L'exploitant doit remplir la section C-1 et la soumettre dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. L'exploitant doit remplir la section C-2 et la soumettre une fois la question réglée.

SAC Office use only / À l'usage du CICD

AWQI Number / N° de l'avis de déclaration  
d'une eau de mauvaise qualité

107103

**A. Laboratory Information / Renseignements sur le laboratoire**

Laboratory Name / Nom du laboratoire <b>York-Durham Regional Environmental Laboratory</b>		Licence Number / Numéro du permis <b>s.21</b>	
Street No. and Name / N° et nom de la rue <b>901 McKay Road</b>	Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité <b>Pickering</b>	Province <b>ON</b>	Postal Code / Code postal <b>L1W 3A3</b>
Business Telephone No. / N° de téléphone <b>905 686-0041</b>		Laboratory Written Notification Prepared by / Avis écrit du laboratoire préparé par <b>Hasan Ahmed</b>	
Date of exceedance O. Reg 169/03 test result authorized / Date de la constatation du dépassement des normes du Règl. de l'Ont. 169/03 <b>2012 07 13</b>		Date of exceedance notifications submitted / Date de communication du dépassement des normes <b>2012 07 13</b>	
Signed by (print name) / Signé par (en lettres moulées) <b>Hasan Ahmed</b>		Signature 	

**B. Facility Information / Renseignements sur l'établissement**

Name of School/Day Nursery / Nom de l'école ou de la garderie <b>Learning Jungle School, Cooksville Campus</b>			
Legal Name of School/Day Nursery Operation (i.e. School Board) / Dénomination sociale de l'établissement (c.-à-d. conseil scolaire) <b>Learning Jungle School, Cooksville Campus</b>			
Type / Type	<input type="checkbox"/> School / École	<input type="checkbox"/> Private School / École privée	<input checked="" type="checkbox"/> Day Nursery / Garderie
DWIS No. / N° DWIS <b>500067679</b>	Ministry of Education SFIS No./School No. /N° du SIS du ministère de l'Éducation / N° de l'école		Day Care Licence No. /N° du permis de garde d'enfants
Street No. and Name / N° et nom de la rue <b>78 Agnes Street</b>	Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité <b>Mississauga</b>	Province <b>ONT.</b>	Postal Code / Code postal <b>L5B 1J7</b>
Contact Information / Personne-ressource Last Name / Nom de famille <b>Kuo</b>		First Name / Prénom <b>Pahai</b>	
Position / Poste occupé		Telephone No. / N° de téléphone <b>905 273-7023</b> ext. / poste	Fax No. / N° de télécopieur <b>416 229-0381</b>
Email Address / Courriel <b>pkuo@learninijungle.com</b>			

## Schools, Private Schools and Day Nurseries (O. Reg. 243/07) Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)

### C - 1. Exceedance Notifications/Corrective Actions / Avis de dépassement/Mesures correctives

Please complete section C-1 and submit with sections A, B, D and E within 24 hours to the agencies listed in Section D. Upon Issue Resolution please submit Section C-2 within seven days to the same authorities to whom you submitted the initial exceedance test results / Remplissez la section C-1 et soumettez-la dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. Une fois la question réglée, soumettez la section C-2 dans les sept jours aux mêmes organismes ou responsables que vous avez initialement informés du ou des dépassements de la teneur normale en plomb

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie

DWIS No. / N° DWIS

Learning Jungle School, Cooksville Campus

500067679

Are you co-located\* and by agreement you are the facility taking a single set of two one liter samples to meet the sampling requirements for all co-located facilities under this agreement? / Partagez-vous votre installation de plomberie\* et êtes-vous, en vertu d'une entente, l'établissement chargé de prélever une série unique de deux échantillons d'un litre afin de satisfaire aux exigences d'échantillonnage de tous les établissements qui partagent votre installation de plomberie, conformément à cette entente?

☐ Yes / Oui
 ☒ No / Non

If you answered Yes above, list the Names and DWIS No. for the schools/private schools and day nurseries you are sampling for and ensure that a copy of the test results is provided to those same facilities within 24 hours of receiving the test results from the laboratory. / Dans l'affirmative, fournissez le nom et le N° DWIS des écoles, écoles privées ou garderies au nom desquelles vous prélevez les échantillons et assurez-vous que ces établissements reçoivent une copie des résultats d'analyse dans les 24 heures suivant votre obtention des résultats d'analyse de la part du laboratoire.

Name of School / Private School / Day Nursery / Nom de l'école l'école privée ou de la garderie

DWIS No. / N° DWIS

1.

2.

3.

For more than 4 co-located facilities, attach additional Section C-1's as required. /

Si plus de 4 établissements partagent l'installation de plomberie, annexe le nombre de sections C-1 nécessaires.

\*Co-located Facilities means, Two or more O. Reg 243/07 facilities (school, private school, day nursery) that are served by the same plumbing system.

The facilities may be either located in one building (Structure) or located in different buildings within one property. / On dit que des établissements « partagent une installation de plomberie » quand au moins deux établissements visés par le Règl. de l'Ont. 243/07 (école, école privée ou garderie) sont alimentés par une même installation de plomberie. Les établissements peuvent être situés dans un même bâtiment (structure partagée) ou dans des bâtiments différents sur une même propriété

Earliest year plumbing installed (yyyy) /

Année d'installation de la plus ancienne section de plomberie (aaaa)

before 1970

Was facility open to children under the age of 18 years at the time of sampling? /

L'établissement était-il ouvert aux enfants de moins de 18 ans au moment du prélèvement?

☒ Yes / Oui
 ☐ No / Non

Is this a re-sample test result for the same location for which a lead exceedance was previously reported? /

S'agit-il d'un prélèvement d'un robinet dont l'eau a déjà affiché un dépassement des normes de teneur en plomb?

☐ Yes / Oui
 ☒ No / Non

Indicate where you have sent this completed form. Contact information follows in Section D /

Précisez les autorités auxquelles vous avez transmis le présent formulaire. Leurs coordonnées figurent à la section D

☒ Ministry of the Environment Spills Action Centre  
Centre d'intervention en cas de déversement du ministère de l'Environnement

☒ Local Medical Officer of Health  
Médecin hygiéniste local

☐ Ministry of Children and Youth Services  
Ministère des Services à l'enfance et à la jeunesse

☒ Ministry of Education  
Ministère de l'Éducation

Indicate if Local Medical Officer of Health provided guidance on corrective actions. /

Indiquez si le médecin hygiéniste local a fourni des conseils sur les mesures à prendre.

☒ Yes / Oui
 ☐ No / Non

If you answered Yes, list guidance provided / Dans l'affirmative, précisez les conseils fournis

Use bottled water for drinking.

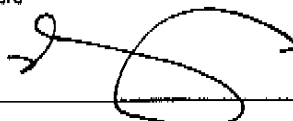
Label says not to use for drinking.

Retest water quality.

Name of person completing this section (print name) /  
Nom de la personne qui a rempli la présente section  
(en lettres majuscules)

NESMYA CAINGUANCO

Signature


Date written notification submitted  
(yyyy/mm/dd) / Date de réception  
de l'avis écrit (aaaa/mm/jj)

2012/07/16

SAC Office use only / À l'usage du CICO

AWQI Number / N° de l'avis de déclaration  
d'une épu de mauvaise qualité :**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)****C - 2. Notice of Issue Resolution / Avis de règlement d'une question**

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results. / L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.

In the case of co-located facilities, those facilities that have reached an agreement to have one set of samples taken on their behalf, will need to have a representative for each facility sign in the co-location section at the bottom of this page to indicate that they have complied with all corrective actions that the public health unit has required. / En ce qui concerne les établissements qui partagent une installation de plomberie, chaque établissement qui a conclu une entente prévoyant le prélèvement d'une série unique d'échantillons en son nom doit désigner un représentant qui signera la section portant sur la partage de l'installation de plomberie au bas de la présente page afin de confirmer qu'elle a pris toutes les mesures correctives prescrites par le bureau de santé publique.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
--	--------------------

Contact Information / Personne-ressource	First Name / Prénom	Telephone No. / N° de téléphone
Last Name / Nom de famille		ext. / poste

Name of Local Public Health Unit

Date Initial Exceedance Submitted to the Ministry of the Environment - Spills Action Centre (yyyy/mm/dd) / Date de signalement du dépassement au ministère de l'Environnement - Centre d'intervention en cas de déversement (aaaa/mm/jj)			
Date Resolved (yyyy/mm/dd) / Date de résolution (aaaa/mm/jj)		Date Resolution Submitted (yyyy/mm/dd) Date de soumission de l'avis de résolution (aaaa/mm/jj)	

Additional Comments / Commentaires supplémentaires :

I have complied with all corrective actions required by my Local Public Health Unit. /  
J'ai pris toutes les mesures correctives prescrites par le bureau de santé publique local. Signed by / Signé par

Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
----------------------------	---------------------	-----------	--

Co-location Signatures if applicable. / Signatures des représentants des établissements qui partagent une installation de plomberie, le cas échéant.

1. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
---	--------------------

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
---	---------------------	-----------	--

2. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
---	--------------------

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
---	---------------------	-----------	--

3. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
---	--------------------

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
---	---------------------	-----------	--

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**D. Exceedance Notifications / Avis de dépassement**

Name of School/Private School/Day Nursery / Nom de l'école, de l'école privée ou de la garderie

Learning Jungle School, Cooksville Campus

Local Medical Officer of Health / Médecin hygiéniste local

Peel Region Public Health

Telephone No. / N° de téléphone	Fax No. / N° de télécopieur	Email Address / Courriel
905 799-7700 ext. / poste	905 501-0305	

Public schools submit exceedance results to Ministry of Education. /

Les écoles privées doivent communiquer tout dépassement au ministère de l'Éducation.

Day nurseries submit exceedance results to Ministry of Children and Youth Services. /

Les garderies doivent communiquer tout dépassement au ministère des Services à l'enfance et à la jeunesse.

If you are e-mailing this section, please enter "R243 Exceedance and name of your School/Private School/Day Nursery in Subject line. /

Si vous transmettez cette section par courriel, écrivez dans le champ d'objet « Dépassement – Règl. 243 » suivi du nom de votre école, école privée ou garderie

**Ministry of the Environment Spills Action Centre /**

**Centre d'intervention en cas de déversement du ministère de l'Environnement**

Telephone. / Téléphone : 1 800 268-6060 (toll free / sans frais) or 416 325-3000

Fax / Télécopieur : 1 800 268-6062 (toll free / sans frais) or 416 325-3011

Email / Courriel : moe.sac.mee@ontario.ca

**Ministry of Education /**

**Ministère de l'Éducation**

Telephone: / Téléphone : 416-325-2015

Fax: / Télécopieur : 416 325 4024

Email / Courriel : steven.mitchell@ontario.ca

Or / Ou

**Ministry of Children and Youth Services /**

**Ministère des Services à l'enfance et à la jeunesse**

Region Région	Office Bureau	Telephone Téléphone	Fax Télécopieur	E-mail Courriel
Central West / Centre-Ouest	Mississauga	905 567-7177 ext. 352	905 567-3215	Martina.Rodrigues@ontario.ca
Central East / Centre-Est	Newmarket	905 868-8900 ext. 5250	905-895-6804	Jennifer.Peddle@ontario.ca
Toronto	Toronto	416 325-0575	416 327-0044	Beata.Machnik@ontario.ca
South East / Sud-Est	Kingston	613 536-7275	613 536-7272	Janet.Gibbs@ontario.ca
Eastern / Est	Ottawa	613 787-5279	613 787-3990	Diane.Henrie@ontario.ca
North East / Nord-Est	North Bay	705 474-3540	705 474-5446	Yvonne.Jeffrey@ontario.ca
Northern / Nord	Kenora	705 564-4515	705 564-7194	Serious.OccurKE.css@ontario.ca
	Sault Ste. Marie	705 564-4515	705 564-7193	Serious.OccurSA.css@ontario.ca
	Sudbury	705 564-4515	705 564-7191	Serious.Occur.css@ontario.ca
	Thunder Bay	705 564-4515	705 564-9557	Serious.OccurTH.css@ontario.ca
Hamilton / Niagara	Hamilton	905 621-7344	905 546-8277	Alexia.Watkins@ontario.ca
South West / Sud-Ouest	London	519 438-5111 ext. 3423	519 672-9461	Nancy.McGregor@ontario.ca

For more information, visit the ministry website at:  
[http://www.children.gov.on.ca/mcys/english/ministry/regional\\_offices\\_contact.asp](http://www.children.gov.on.ca/mcys/english/ministry/regional_offices_contact.asp).

Pour de plus amples renseignements, visitez le site Web du Ministère à  
<http://www.children.gov.on.ca/mcys/franck/ministry/regoffice.asp>

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**E. Drinking Water Exceedance Results / Résultats de la mesure du dépassement des normes dans l'eau potable**

Name of School/Day Nursery /  
Nom de l'école ou de la garderie : Learning Jungle School, Cooksville Campus

**For Lead Samples Only / Pour le plomb seulement**

Sample ID, Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result (µg/L) / Résultat de l'analyse (µg/L)	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario"
643157 Kitchen	2012/07/09	Standing / Stagnante	Lead / Plomb	39.5	10µg/L
643158 Kitchen	2012/07/09	Flushed / Après rinçage	Lead / Plomb	44.3	10µg/L
		Standing / Stagnante	Lead / Plomb		10µg/L
		Flushed / Après rinçage	Lead / Plomb		10µg/L

**Other Parameter Exceedances Under O. Regulation 243/07 / Autres dépassements des paramètres en vertu du Règl. de l'Ont. 243/07**

Sample ID, Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result Résultat de l'analyse	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario"
		Standing / Stagnante			
		Flushed / Après rinçage			

Comments / Commentaires

SAC Office use only / À l'usage du CIO

AWQI Number / N° de l'avis de déclaration  
d'une eau de mauvaise qualité

108053

Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)

AWQI Updated By Simon Ng

3:26 pm, Aug 31, 2012

**C - 2. Notice of Issue Resolution / Avis de règlement d'une question**

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results. / L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.

In the case of co-located facilities, those facilities that have reached an agreement to have one set of samples taken on their behalf, will need to have a representative for each facility sign in the co-location section at the bottom of this page to indicate that they have complied with all corrective actions that the public health unit has required. / En ce qui concerne les établissements qui partagent une installation de plomberie, chaque établissement qui a conclu une entente prévoyant le prélèvement d'une série unique d'échantillons en son nom doit désigner un représentant qui signera la section portant sur la partage de l'installation de plomberie au bas de la présente page afin de confirmer qu'elle a pris toutes les mesures correctives prescrites par le bureau de santé publique.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
Learning Jungle School, Cooksville Campus	500067679

Contact Information / Personne-ressource		
Last Name / Nom de famille	First Name / Prénom	Telephone No. / N° de téléphone
CHINCHURNO	NESMITH	(416) 227-0761 ext. / poste

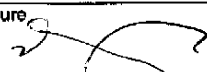
Name of Local Public Health Unit
PEEL PUBLIC HEALTH

Date Initial Exceedance Submitted to the Ministry of the Environment - Spills Action Centre (yyyy/mm/dd) / Date de signalement du dépassement au ministère de l'Environnement - Centre d'intervention en cas de déversement (aaaa/mm/jj)	2012	07	16
--	------	----	----

Date Resolved (yyyy/mm/dd) / Date de résolution (aaaa/mm/jj)	2012	08	21	Date Resolution Submitted (yyyy/mm/dd) / Date de soumission de l'avis de résolution (aaaa/mm/jj)	2012	08	22
--	------	----	----	--	------	----	----

Additional Comments / Commentaires supplémentaires :

I have complied with all corrective actions required by my Local Public Health Unit. / J'ai pris toutes les mesures correctives prescrites par le bureau de santé publique local. Signed by / Signé par

Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
CHINCHURNO	NESMITH		2012 08 22

Co-location Signatures if applicable. / Signatures des représentants des établissements qui partagent une installation de plomberie, le cas échéant.

1. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
---	--------------------

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
---	---------------------	-----------	---------------------------------------

2. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
---	--------------------

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
---	---------------------	-----------	---------------------------------------

3. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
---	--------------------

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)
---	---------------------	-----------	---------------------------------------



Ministry of  
the Environment  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results**  
**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Avis de dépassement de la teneur normale en plomb**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**Instructions:**

- Please print if completing by hand.
- Submit completed forms by fax or e-mail.
- Lab completes sections A, B, D and E
- Facility operator completes Section C-1 and submits with sections A,B,D and E within 24 hours to the applicable agencies listed in section D. Facility operator completes and submits Section C-2 upon Issue Resolution.

**Instructions :**

- Écrivez en caractères d'imprimerie si vous remplissez à la main.
- Transmettez le document rempli par télécopieur ou par courriel.
- Le laboratoire doit remplir les sections A, B, D et E.
- L'exploitant doit remplir la section C-1 et la soumettre dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. L'exploitant doit remplir la section C-2 et la soumettre une fois la question réglée.

SAC Office use only / À l'usage du CICC

AWQI Number / N° de l'avis de déclaration  
d'une eau de mauvaise qualité

**108053**

**A. Laboratory Information / Renseignements sur le laboratoire**

Laboratory Name / Nom du laboratoire <b>York-Durham Regional Environmental Laboratory</b>			Licence Number / Numéro du permis <b>s.21</b>		
Street No. and Name / N° et nom de la rue <b>901 McKay Road</b>		Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section	
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité <b>Pickering</b>	Province <b>ON</b>		Postal Code / Code postal <b>L1W 3A3</b>	
Business Telephone No. / N° de téléphone <b>905 686-0041</b>		Laboratory Written Notification Prepared by / Avis écrit du laboratoire préparé par <b>Hasan Ahmed</b>			
Date of exceedance O. Reg 169/03 test result authorized / Date de la constatation du dépassement des normes du Regl. de l'Ont. 169/03 <b>2012 08 21</b>		Date of exceedance notifications submitted / Date de communication du dépassement des normes <b>2012 08 21</b>		Signature 	
Signed by (print name) / Signé par (en lettres moulées) <b>Hasan Ahmed</b>					

**B. Facility Information / Renseignements sur l'établissement**

Name of School/Day Nursery / Nom de l'école ou de la garderie <b>Learning Jungle School, Cooksville Campus</b>					
Legal Name of School/Day Nursery Operation (i.e. School Board) / Dénomination sociale de l'établissement (c.-à-d. conseil scolaire) <b>Learning Jungle School, Cooksville Campus</b>					
Type / Type	<input type="checkbox"/> School / École <input type="checkbox"/> Private School / École privée <input checked="" type="checkbox"/> Day Nursery / Garderie				
DWIS No. / N° DWIS <b>500067679</b>	Ministry of Education SFIS No./School No. /N° du SIS du ministère de l'Éducation / N° de l'école		Day Care Licence No. /N° du permis de garde d'enfants		
Street No. and Name / N° et nom de la rue <b>78 Agnes Street.</b>	Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section		
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité <b>Mississauga</b>	Province <b>ONT.</b>		Postal Code / Code postal <b>L5B 1J7</b>	
Contact Information / Personne-ressource Last Name / Nom de famille <b>Chingcuanco</b>		First Name / Prénom <b>Nesmith</b>			
Position / Poste occupé		Telephone No. / N° de téléphone <b>905 273-7023</b> ext. / poste		Fax No. / N° de télécopieur <b>416 229-0381</b>	
Email Address / Courriel <b>nchingcuanco@learningjungle.com</b>					

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**D. Exceedance Notifications / Avis de dépassement**

Name of School/Private School/Day Nursery / Nom de l'école, de l'école privée ou de la garderie

Learning Jungle School, Cooksville Campus

Local Medical Officer of Health / Médecin hygiéniste local

Peel Region Public Health

Telephone No. / N° de téléphone ext. / poste	Fax No. / N° de télécopieur	Email Address / Courriel
905 799-7700	905 501-0305	

Public schools submit exceedance results to Ministry of Education. /

Les écoles privées doivent communiquer tout dépassement au ministère de l'Éducation.

Day nurseries submit exceedance results to Ministry of Children and Youth Services. /

Les garderies doivent communiquer tout dépassement au ministère des Services à l'enfance et à la jeunesse.

If you are e-mailing this section, please enter "R243 Exceedance and name of your School/Private School/Day Nursery in Subject line. /

Si vous transmettez cette section par courriel, écrivez dans le champ d'objet « Dépassement – Règl. 243 » suivi du nom de votre école, école privée ou garderie.

**Ministry of the Environment Spills Action Centre /**

**Centre d'intervention en cas de déversement du ministère de l'Environnement**

Telephone / Téléphone : 1 800 268-6060 (toll free / sans frais) or 416 325-3000

Fax: / Télécopieur : 1 800 268-6062 (toll free / sans frais) or 416 325-3011

Email: / Courriel : moe.sac.moe@ontario.ca

**Ministry of Education /**

**Ministère de l'Éducation**

Telephone / Téléphone : 416-325-2015

Fax: / Télécopieur : 416 325 4024

Email: / Courriel : steven.mitchell@ontario.ca

Or / Ou

**Ministry of Children and Youth Services /**

**Ministère des Services à l'enfance et à la jeunesse**

Region Région	Office Bureau	Telephone Téléphone	Fax Télécopieur	E-mail Courriel
Central West / Centre-Ouest	Mississauga	905 567-7177 ext. 352	905 567-3215	Martina.Rodrigues@ontario.ca
Central East / Centre-Est	Newmarket	905 868-8900 ext. 5250	905-895-6804	Jennifer.Peddle@ontario.ca
Toronto	Toronto	416 325-0575	416 327-0044	Beata.Machnik@ontario.ca
South East / Sud-Est	Kingston	613 536-7275	613 536-7272	Janet.Gibbs@ontario.ca
Eastern / Est	Ottawa	613 787-5279	613 787-3990	Diane.Henne@ontario.ca
North East / Nord-Est	North Bay	705 474-3540	705 474-5446	Yvonne.Jeffrey@ontario.ca
Northern / Nord	Kenora	705 564-4515	705 564-7194	Serious.OccurKE.css@ontario.ca
	Sault Ste. Marie	705 564-4515	705 564-7193	Serious.OccurSA.css@ontario.ca
	Sudbury	705 564-4515	705 564-7191	Serious.Occur.css@ontario.ca
	Thunder Bay	705 564-4515	705 564-9557	Serious.OccurTH.css@ontario.ca
Hamilton / Niagara	Hamilton	905 521-7344	905 546-8277	Alexia.Watkins@ontario.ca
South West / Sud-Ouest	London	519 438-5111 ext. 3423	519 672-9461	Nancy.McGregor@ontario.ca

For more information, visit the ministry website at:  
[http://www.children.gov.on.ca/mcys/english/ministry/regional\\_offices\\_contact.asp](http://www.children.gov.on.ca/mcys/english/ministry/regional_offices_contact.asp).

Pour de plus amples renseignements, visitez le site Web du Ministère à  
<http://www.children.gov.on.ca/mcys/french/ministry/regoffice.asp>

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**E. Drinking Water Exceedance Results / Résultats de la mesure du dépassement des normes dans l'eau potable**

Name of School/Day Nursery /  
 Nom de l'école ou de la garderie : Leaming Jungle School, Cooksville Campus

For Lead Samples Only / Pour le plomb seulement

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result (µg/L) / Résultat de l'analyse (µg/L)	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario
650412 senior preschool washrm	2012/08/10	Standing / Stagnante	Lead / Plomb	17.6	10µg/L
650413 senior preschool washrm	2012/08/10	Flushed / Après rinçage	Lead / Plomb	2.3	10µg/L
650421 Kitchen	2012/08/10	Standing / Stagnante	Lead / Plomb	21.8	10µg/L
650422 Kitchen	2012/08/10	Flushed / Après rinçage	Lead / Plomb	3.0	10µg/L

Other Parameter Exceedances Under O. Regulation 243/07 / Autres dépassements des paramètres en vertu du Règl. de l'Ont. 243/07

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result Résultat de l'analyse	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario
		Standing / Stagnante			
		Flushed / Après rinçage			

Comments / Commentaires



**Ontario**

Ministry of  
the Environment  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results  
Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Avis de dépassement de la teneur normale en plomb  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**Laboratory Information**

In accordance with the Schools, Private Schools and Day Nurseries Regulation made under the *Safe Drinking Water Act, 2002* (O. Reg. 243/07), S. 6(1) and (2), licensed laboratories must provide written notification within 24 hours of confirming a lead exceedance (and/or other exceedance of the Standards prescribed by Schedule 1, 2 or 3 to Ontario Regulation 169/03 (Ontario Drinking Water Quality Standards) made under the Act, other than for fluoride) to the following authorities:

1. Operator of the school, private school or day nursery;
2. Ministry of the Environment Spills Action Centre;
3. Local Medical Officer of Health

**Operator Notification and Corrective Actions**

O. Reg. 243/07 requires that the operator of the school, private school or day nursery who receives a report of a water sample test result that exceeds any of the prescribed standards in Section 6(1) shall, within 24 hours, give a copy of the report to:

1. Ministry of the Environment Spills Action Centre;
2. Local Medical Officer of Health;
3. Ministry of Education in the case of a public school; or Ministry of Children and Youth Services in the case of a day nursery.

The operator must also take any corrective action steps as directed by the Medical Officer of Health. Failure to notify these parties in accordance with the Regulation constitutes an offence under the Act

**Issue Resolution**

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results.

**Renseignements pour les laboratoires**

Conformément aux paragraphes 6(1) et (2) du *Écoles, écoles privées et garderies* pris en application de la *Loi de 2002 sur la salubrité de l'eau potable* (Règl. de l'Ont. 243/07), les laboratoires autorisés qui confirment un dépassement de la teneur normale en plomb dans l'eau potable (ou tout autre dépassement des normes, autres que pour le fluorure, prescrites par les annexes 1, 2 ou 3 du Règlement de l'Ontario 169/03 – Normes de qualité de l'eau potable de l'Ontario, pris en application de la Loi) doivent avertir par écrit les instances ci-dessous dans les 24 heures après que le résultat a été obtenu :

1. L'exploitant de l'école, de l'école privée ou de la garderie;
2. Le Centre d'intervention en cas de déversement du ministère de l'Environnement;
3. Le médecin hygiéniste local.

**Communication des résultats à l'exploitant et mesures correctives**

Le Règl. de l'Ont. 243/07 oblige l'exploitant de l'école, de l'école privée ou de la garderie qui reçoit un rapport d'analyse révélant un dépassement des normes indiquées au paragraphe 6(1) pour l'eau potable à remettre une copie du rapport d'analyse en question aux instances suivantes, dans les 24 heures qui suivent la réception du rapport :

1. Le Centre d'intervention en cas de déversement du ministère de l'Environnement;
2. Le médecin hygiéniste local;
3. Le ministère de l'Éducation si l'échantillon provient d'une école publique; ou le ministère des Services à l'enfance et à la jeunesse si l'échantillon provient d'une garderie.

L'exploitant doit prendre toutes les mesures correctives prescrites par le médecin hygiéniste. Le défaut de communiquer les résultats à ces instances conformément au règlement constitue un délit.

**Règlement d'une question**

L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.



Ministry of  
the Environment  
Ministère de  
l'Environnement

**Notice of Lead Exceedance Test Results  
Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Avis de dépassement de la teneur normale en plomb  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**Enquiries**

Spills Action Centre  
Ministry of the Environment  
5775 Yonge Street, Suite 501  
Toronto, ON M2M 4J1

Telephone: 1 800 268-6060 (toll free) or 416 325-3000

Fax: 1 800 268-6062 (toll free) or 416 325-3011

Website: [www.ontario.ca/drinkingwater](http://www.ontario.ca/drinkingwater)

**Renseignements complémentaires**

Centre d'intervention en cas de déversement

Ministère de l'Environnement

5775, rue Yonge, bureau 501

Toronto (Ontario) M2M 4J1

Téléphone : 1 800 268-6060 (sans frais) or 416 325-3000

Télécopieur : 1 800 268-6062 (sans frais) or 416 325-3011

Site Web : [www.ontario.ca/eaupotable](http://www.ontario.ca/eaupotable)

Information on this form is collected by Ministry of the Environment staff on behalf of the Ministry in accordance with the *Safe Drinking Water Act*, 2002 (SDWA) and its regulations. The collection, use and dissemination of this information by provincial institutions is governed by the *Freedom of Information and Protection of Privacy Act* (FIPPA). The information gathered herein will be used for the purpose of reporting lead exceedances from samples taken from schools, private schools and day nurseries under the SDWA and its regulations, and may be used for secondary purposes including investigations and law enforcement. Information contained on this form may be disclosed to other government agencies including municipalities, public health unit employees, the Ministry of Health and Long Term Care, the Ministry of Education and the Ministry of Community and Social Services pursuant to section 42 of FIPPA for the consistent purpose of administering programs related to drinking water safety.

Le personnel du ministère de l'Environnement recueille les renseignements figurant sur ce formulaire au nom du ministère conformément à la Loi de 2002 sur la salubrité de l'eau potable et à ses règlements. La collecte, l'utilisation et la communication de ces renseignements sont régies par la Loi sur l'accès à l'information et la protection de la vie privée. Les renseignements recueillis serviront à produire des rapports de dépassement de la teneur normale en plomb d'échantillons prélevés dans des écoles, des écoles privées et des garderies en vertu de la Loi de 2002 sur la salubrité de l'eau potable et de ses règlements. Ils pourront également servir à la réalisation d'enquêtes et à l'exécution de la loi. Les renseignements figurant sur ce formulaire peuvent être divulgués à d'autres organismes gouvernementaux, y compris à des services municipaux, à des services de santé publique, au ministère de la Santé et des Soins de longue durée, au ministère de l'Éducation et au ministère des Services sociaux et communautaires, conformément à l'article 42 de la Loi sur l'accès à l'information et la protection de la vie privée pour exécuter toute loi ou tout programme concernant la salubrité de l'eau potable.

### Schools, Private Schools and Day Nurseries (O. Reg. 243/07) Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)

#### C - 1. Exceedance Notifications/Corrective Actions / Avis de dépassement/Mesures correctives

Please complete section C-1 and submit with sections A, B, D and E within 24 hours to the agencies listed in Section D. Upon Issue Resolution please submit Section C-2 within seven days to the same authorities to whom you submitted the initial exceedance test results / Remplissez la section C-1 et soumettez-la dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. Une fois la question réglée, soumettez la section C-2 dans les sept jours aux mêmes organismes ou responsables que vous avez initialement informés du ou des dépassements de la teneur normale en plomb.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie

DWIS No. / N° DWIS

Learning Jungle School, Cooksville Campus

500067679

Are you co-located\* and by agreement you are the facility taking a single set of two one liter samples to meet the sampling requirements for all co-located facilities under this agreement? / Partagez-vous votre installation de plomberie\* et êtes-vous, en vertu d'une entente, l'établissement chargé de prélever une série unique de deux échantillons d'un litre afin de satisfaire aux exigences d'échantillonnage de tous les établissements qui partagent votre installation de plomberie, conformément à cette entente?

☐ Yes / Oui ☒ No / Non

If you answered Yes above, list the Names and DWIS No. for the schools/private schools and day nurseries you are sampling for and ensure that a copy of the test results is provided to those same facilities within 24 hours of receiving the test results from the laboratory. / Dans l'affirmative, fournissez le nom et le N° DWIS des écoles, écoles privées ou garderies au nom desquelles vous prélevez les échantillons et assurez-vous que ces établissements reçoivent une copie des résultats d'analyse dans les 24 heures suivant votre obtention des résultats d'analyse de la part du laboratoire.

Name of School / Private School / Day Nursery / Nom de l'école l'école privée ou de la garderie

DWIS No. / N° DWIS

1.

2.

3.

For more than 4 co-located facilities, attach additional Section C-1's as required. /

Si plus de 4 établissements partagent l'installation de plomberie, annexe le nombre de sections C-1 nécessaires.

\*Co-located Facilities means, Two or more O. Reg. 243/07 facilities (school, private school, day nursery) that are served by the same plumbing system.

The facilities may be either located in one building (Structure) or located in different buildings within one property. / On dit que des établissements « partagent une installation de plomberie » quand au moins deux établissements visés par le Règl. de l'Ont. 243/07 (école, école privée ou garderie) sont alimentés par une même installation de plomberie. Les établissements peuvent être situés dans un même bâtiment (structure partagée) ou dans des bâtiments différents sur une même propriété.

Earliest year plumbing installed (yyyy) /

Année d'installation de la plus ancienne section de plomberie (aaaa) before 1970

Was facility open to children under the age of 18 years at the time of sampling? /

L'établissement était-il ouvert aux enfants de moins de 18 ans au moment du prélèvement?

☒ Yes / Oui ☐ No / Non

Is this a re-sample test result for the same location for which a lead exceedance was previously reported? /

S'agit-il d'un prélèvement d'un robinet dont l'eau a déjà affiché un dépassement des normes de teneur en plomb?

☒ Yes / Oui ☐ No / Non

Indicate where you have sent this completed form. Contact information follows in Section D /

Précisez les autorités auxquelles vous avez transmis le présent formulaire. Leurs coordonnées figurent à la section D

☐ Ministry of the Environment Spills Action Centre  
Centre d'intervention en cas de déversement du ministère de l'Environnement

☐ Ministry of Children and Youth Services  
Ministère des Services à l'enfance et à la jeunesse

☒ Local Medical Officer of Health  
Médecin hygiéniste local

☐ Ministry of Education  
Ministère de l'Éducation

Indicate if Local Medical Officer of Health provided guidance on corrective actions. /

Indiquez si le médecin hygiéniste local a fourni des conseils sur les mesures à prendre.

☒ Yes / Oui ☐ No / Non

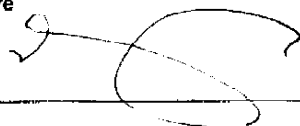
If you answered Yes, list guidance provided / Dans l'affirmative, précisez les conseils fournis

BASED ON 2 SAMPLE RESULTS, PUBLIC HEALTH HAS INDICATED  
THAT DRINKING FROM TAP WATER CAN BE REINSTATED. DAILY  
FLUSHING MUST BE CONTINUALLY IMPLEMENTED.

Name of person completing this section (print name) /  
Nom de la personne qui a rempli la présente section  
(en lettres moulées)

NESMITH CHINECUMANO

Signature


Date written notification submitted  
(yyyy/mm/dd) / Date de réception  
de l'avis écrit (aaaa/mm/jj)

2012/08/24

## INCIDENT REPORT

## DW System

**Name:** R243 LEARNING JUNGLE SCHOOL &  
COOKSVILLE CAMPUS (0003557)

**Address:** 78 AGNES ST  
MISSISSAUGA ON L5B 1J7

**District Office:** Halton-Peel District

**DWS #:** 500067679

**DWS Category:** Designated Facility

## DWS Owner

**Name:** LEARNING JUNGLE SCHOOL

**Mailing Address:** 45 SHEPPARD Ave E TORONTO  
ON Canada M2N 5W9

**Physical Address:** 45 SHEPPARD Ave E TORONTO  
ON Canada M2N 5W9

**Phone:** (416) 227-0461

**Fax:**

**Email:**

**Client Type:** COMMERCIAL

## MOE Information

**Incident Report #:** 1-3KIK-2

**AWQI #:** 107103

**Date & Time Reported to MOE:** July 13, 2012 11:31:10 AM

**Office Receiving Incident Report:** SAC

**Incident Info Received By:** SAC

**Incident Type:** O.Reg. 243 Lead Exceedance

**Referring Inspection Report #:**

**Incident Summary:** R243 Lead Exceedance

**MOE Response:** No Field Response

**Was an ERP called out?** N

**Master Incident Report #:**

**Master AWQI #:**

**Date & Time MOE Arrival:**

**IDS Reference #:**

## Incident Description

Incident Date	Incident Description	Created By
July 13, 2012 11:31:10 AM	R243 Lead Exceedance	SADMIN
July 13, 2012 03:06:11 PM	ECS: 13:57 rec'd email from PR who spoke with Sandra Angelucci, Peel HU. HU advised the following C/A: two sets of resamples (seven days apart), one set of the resamples must include a sample upstream and downstream from the original sample location (which was a kitchen tap), alternative water is to be provided at the facility, day care operator must post signs to indicate to potential users not to drink the water.	CHEESIEL
July 13, 2012 03:09:13 PM	ECS: Rec'd section a, b, d and e. Called DWS and spoke to Jeanine Kaps who indicated that Pahai Kuo was on vacation. JK spoke with the HU and was aware of the C/A required. They have purchased bottled water and are providing it as drinking water. There is no food prep at the facility. Signs have been posted at the faucets and there are no fountains. DWS has not ordered sample bottles from the lab yet but will do so shortly. DWS to update me when they have resampled.	CHEESIEL
July 16, 2012 03:55:51 PM	ECS: rec'd section C1.	CHEESIEL
July 27, 2012 09:19:23 AM	ECS: Spoke to Janine Kaps, Learning Jungle School, who advised that first resample was taken last Friday and results are expected today. They are waiting for the next set of resample bottles to take the 7-30 day resample. The facility is still providing bottled water and signs are still posted. Their head office phone #416-227-0461, ask for Pahai Kuo or Nesmith.	CHEESIEL
September 14, 2012 04:10:06 PM	Rec'd section C2. Flushed sample results for samples collection on Aug. 10, 2012 were below ODWQS for lead. HU advised incident has been resolved but facility is to continue with daily flushing. No further actions recommended at this time. Recommended for closure.	CHEESIEL

## Parameter Table

Sample Collection Date	Sample Location	Details	Parameter	Unit	Verbal DWS Result	Verbal Lab Result	Written DWS Result	Written Lab Result	Chlorine Residual	Result mg/L
July 09, 2012 12:00:00 AM			Lead	MG/L			0.0395	0.0395		
July 09, 2012 12:00:00 AM			Lead	MG/L			0.0443	0.0443		

## Caller/PO Information

**Contact Name:**

**Company:**

**Telephone #:**

**Fax Number:**

**Email Address:**

**Mailing Address:**

## Updates

**Date DWS Written Notification Provided:** July 16, 2012 12:00:00 AM

**Date Resolved:** July 16, 2012 12:00:00 AM

**Date Lab Written Notification Provided:** July 13, 2012 11:12:00 AM

**Notice of Resolution Provided:** August 31, 2012 12:08:00 AM

## Provincial Officer

**Name:** Elizabeth Chee Sing

**Badge #:**

**Work Unit:** Drinking Water Inspections Unit

**District/Area Office:** Halton-Peel District

**Date:** September 14, 2012

**Signature:**

## Supervisor

**Name:** Demetra Koros

**Work Unit:** Drinking Water Inspections Unit

**District/Area Office:** Halton-Peel District

**Date:** September 14, 2012

**Signature:**

## INCIDENT REPORT

### DW System

**System Name:** R243 LEARNING  
JUNGLE SCHOOL -  
COOKSVILLE CAMPUS  
(0003557)  
**System  
Address:** 78 AGNES ST  
MISSISSAUGA ON L5B  
1J7  
**District Office:** Halton-Peel District  
**DWS #:** 500067679  
**DWS Category:** Designated Facility

### DWS Owner

**Owner Name:** LEARNING JUNGLE SCHOOL  
**Owner Mailing  
Address:** 45 SHEPPARD Ave E TORONTO ON  
Canada M2N 5W9  
**Owner Physical  
Address:** 45 SHEPPARD AVE E TORONTO ON  
Canada M2N 5W9  
**Owner Phone:**  
**Owner Fax:**  
**Owner Email:**  
**Client Type:** COMMERCIAL

### MECP Information

**Incident Report #:** 1-3KIK-2  
**AWQI #:** 107103  
**Date & Time Reported to MECP:** Jul 13, 2012 11:31:10  
**Office Receiving Incident Report:** SAC  
**Incident Info Received By:** SAC  
**Incident Type:** O.Reg. 243 Lead Exceedence  
**Referring Inspection Report #:**  
**Incident Summary:** R243 Lead Exceedance  
**MECP Response:** No Field Response  
**Was an ERP called out?** N  
**Master Incident Report #:**  
**Master AWQI #:**  
**Date & Time MECP Arrival:**  
**IDS Reference #:**

## Incident Description

Incident Date	Incident Description	Created By
Jul 13, 2012 11:31:10	R243 Lead Exceedance	SADMIN
Jul 13, 2012 15:06:11	ECS: 13:57 rec'd email from PR who spoke with Sandra Angelucci, Peel HU. HU advised the following C/A: two sets of resamples (seven days apart), one set of the resamples must include a sample upstream and downstream from the original sample location (which was a kitchen tap), alternative water is to be provided at the facility, day care operator must post signs to indicate to potential users not to drink the water.	CHEESIEL
Jul 13, 2012 15:09:13	ECS: Rec'd section a, b, d and e. Called DWS and spoke to Jeanine Kaps who indicated that Pahai Kuo was on vacation. JK spoke with the HU and was aware of the C/A required. They have purchased bottled water and are providing it as drinking water. There is no food prep at the facility. Signs have been posted at the faucets and there are no fountains. DWS has not ordered sample bottles from the lab yet but will do so shortly. DWS to update me when they have resampled.	CHEESIEL
Jul 16, 2012 15:55:51	ECS: rec'd section C1.	CHEESIEL
Jul 27, 2012 09:19:23	ECS: Spoke to Janine Kaps, Learning Jungle School, who advised that first resample was taken last Friday and results are expected today. They are waiting for the next set of resample bottles to take the 7-30 day resample. The facility is still providing bottled water and signs are still posted. Their head office phone #416-227-0461, ask for Pahai Kuo or Nesmith.	CHEESIEL
Sep 14, 2012 16:10:06	Rec'd section C2. Flushed sample results for samples collection on Aug. 10, 2012 were below ODWQS for lead. HU advised incident has been resolved but facility is to continue with daily flushing. No further actions recommended at this time. Recommended for closure.	CHEESIEL

## Parameter Table

Sample Collection Date	Sample Location	Details	Parameter	Unit	Verbal DWS Result	Verbal Lab Result	Written DWS Result	Written Lab Result	Chlorine Residual	Result mg/L
07/09/2012 00:00:00			Lead	MG/L			0.0395	0.0395		

## Offences

Suspected Violation(s)/Offence(s)

## Caller/PO Information

Contact Name:  
Telephone #:  
Email Address:  
Mailing Address:

Company:  
Fax Number:

## Provincial Officer

Name: Elizabeth Chee Sing  
Work Unit: Drinking Water Inspections Unit  
Date: February 18, 2025  
Signature:

Badge #: 1430  
District/Area Office: Halton-Peel District

## Supervisor

Name: Demetra Koros  
Work Unit: Drinking Water Inspections Unit  
Date: February 18, 2025  
Signature:

District/Area Office: Halton-Peel District

## INCIDENT REPORT

## DW System

**System Name:** R243 LEARNING  
JUNGLE SCHOOL -  
COOKSVILLE CAMPUS  
(0003557)  
**System  
Address:** 78 AGNES ST  
MISSISSAUGA ON L5B  
1J7  
**District Office:** Halton-Peel District  
**DWS #:** 500067679  
**DWS Category:** Designated Facility

## DWS Owner

**Owner Name:** LEARNING JUNGLE SCHOOL  
**Owner Mailing  
Address:** 45 SHEPPARD Ave E TORONTO ON  
Canada M2N 5W9  
**Owner Physical  
Address:** 45 SHEPPARD AVE E TORONTO ON  
Canada M2N 5W9  
**Owner Phone:**  
**Owner Fax:**  
**Owner Email:**  
**Client Type:** COMMERCIAL

## MECP Information

**Incident Report #:** 1-2Y62-7  
**AWQI #:** 102025  
**Date & Time Reported to MECP:** Jul 15, 2011 13:05:16  
**Office Receiving Incident Report:** SAC  
**Incident Info Received By:** SAC  
**Incident Type:** O.Reg. 243 Lead Exceedence  
**Referring Inspection Report #:**  
**Incident Summary:** R243 Lead Exceedance  
**MECP Response:** No Field Response  
**Was an ERP called out?** N  
**Master Incident Report #:**  
**Master AWQI #:**  
**Date & Time MECP Arrival:**  
**IDS Reference #:**

## Incident Description

Incident Date	Incident Description	Created By
Jul 15, 2011 13:05:16	R243 Lead Exceedance	SADMIN
Jul 29, 2011 13:28:45	This is a slave to master incident 1-2XD6-3. Recommended for closure.	SEEBORRA

## Parameter Table

Sample Collection Date	Sample Location	Details	Parameter	Unit	Verbal DWS Result	Verbal Lab Result	Written DWS Result	Written Lab Result	Chlorine Residual	Result mg/L
07/11/2011 00:00:00			Lead	MG/L				0.0762		

## Offences

Suspected Violation(s)/Offence(s)

**Caller/PO Information**

**Contact Name:**  
**Telephone #:**  
**Email Address:**  
**Mailing Address:**

**Company:**  
**Fax Number:**

---

**Provincial Officer**

**Name:** Rattan Seeboruth  
**Work Unit:** Drinking Water Inspections Unit  
**Date:** February 18, 2025  
**Signature:**

**Badge #:** 1423  
**District/Area Office:** Halton-Peel District

**Supervisor**

**Name:** Demetra Koros  
**Work Unit:** Drinking Water Inspections Unit  
**Date:** February 18, 2025  
**Signature:**

**District/Area Office:** Halton-Peel District



Ministry of  
the Environment  
Ministère de  
l'Environnement

11:19 am, Jun 30, 2011  
**Notice of Lead Exceedance Test Results**  
**Schools, Private Schools and Day Nurseries**  
**Avis de dépassement de la teneur normale en plomb**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**Instructions:**

- Please print if completing by hand.
- Submit completed forms by fax or e-mail.
- Lab completes sections A, B, D and E.
- Facility operator completes Section C-1 and submits with sections A,B,D and E within 24 hours to the applicable agencies listed in section D. Facility operator completes and submits Section C-2 upon Issue Resolution.

**Instructions :**

- Écrivez en caractères d'imprimerie si vous remplissez à la main.
- Transmettez le document rempli par télécopieur ou par courriel.
- Le laboratoire doit remplir les sections A, B, D et E.
- L'exploitant doit remplir la section C-1 et la soumettre dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. L'exploitant doit remplir la section C-2 et la soumettre une fois la question réglée.

SAC Office use only / À l'usage du CIGD

AWQI Number / N° de l'avis de déclaration d'une eau de mauvaise qualité :

101711

**A. Laboratory Information / Renseignements sur le laboratoire**

Laboratory Name / Nom du laboratoire <b>York-Durham Regional Environmental Laboratory</b>			Licence Number / Numéro du permis <b>s.21</b>		
Street No. and Name / N° et nom de la rue <b>901 McKay Road</b>		Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section	
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité <b>Pickering</b>	Province <b>ON</b>		Postal Code / Code postal <b>L1W 3A3</b>	
Business Telephone No. / N° de téléphone <b>905 686-0041</b>		Laboratory Written Notification Prepared by / Avis écrit du laboratoire préparé par			
Date of exceedance O. Reg 169/03 test result authorized / Date de la constatation du dépassement des normes du Règl. de l'Ont. 169/03		YYYY <b>2011</b>	MM <b>06</b>	DD <b>30</b>	Date of exceedance notifications submitted / Date de communication du dépassement des normes
Signed by (print name) / Signé par (en lettres moulées) <b>Hasan Ahmed</b>		Signature 			

**B. Facility Information / Renseignements sur l'établissement**

Name of School/Day Nursery / Nom de l'école ou de la garderie <b>Learning Jungle School , Cooksville Campus</b>					
Legal Name of School/Day Nursery Operation (i.e. School Board) / Dénomination sociale de l'établissement (c.-à-d. conseil scolaire) <b>Learning Jungle School , Cooksville Campus</b>					
Type / Type	<input type="checkbox"/> School / École	<input type="checkbox"/> Private School / École privée	<input checked="" type="checkbox"/> Day Nursery / Garderie		
DWIS No. / N° DWIS <b>500067679</b>	Ministry of Education SFIS No./School No. /N° du SIIS du ministère de l'Éducation / N° de l'école		Day Care Licence No. /N° du permis de garde d'enfants		
Street No. and Name / N° et nom de la rue <b>78 Agnes Street</b>		Unit/Suite / Unité/bureau	Rural Route / Route rurale	Lot/Part/Block/Section / Lot/partie/bloc/section	
Concession/Plan	City/Town/Municipality / Ville/localité/municipalité <b>Mississauga</b>	Province <b>Ontario</b>		Postal Code / Code postal <b>L5B 1J7</b>	
Contact Information / Personne-ressource Last Name / Nom de famille <b>Kuo</b>		First Name / Prénom <b>Pahai</b>			
Position / Poste occupé		Telephone No. / N° de téléphone <b>905 273-7023</b>		Fax No. / N° de télécopieur <b>416 229-0381</b>	
Email Address / Courriel <b>www.learningjungle.com</b>					

Schools, Private Schools and Day Nurseries (O. Reg. 243/07)  
Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)

JUN-30-2011 10:57

19053032067

19053032067

P.02

000190

### E. Drinking Water Exceedance Results / Résultats de la mesure du dépassement des normes dans l'eau potable

Name of School/Day Nursery /  
Nom de l'école ou de la garderie : Learning Jungle School , Cooksville Campus

For Lead Samples Only / Pour le plomb seulement

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result (µg/L) / Résultat de l'analyse (µg/L)	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario"
578187 Kitchen	2011/06/20	Standing / Stagnante	Lead / Plomb	18.3	10µg/L
578188 Kitchen	2011/06/20	Flushed / Après rinçage	Lead / Plomb	3.1	10µg/L
		Standing / Stagnante	Lead / Plomb		10µg/L
		Flushed / Après rinçage	Lead / Plomb		10µg/L

Other Parameter Exceedances Under O. Regulation 243/07 / Autres dépassements des paramètres en vertu du Règl. de l'Ont. 243/07

Sample I.D. Location/ Identification de l'échantillon/lieu	Sample Collection Date (yyyy/mm/dd) / Date de prélèvement de l'échantillon (aaaa/mm/jj)	Sample Type / Type d'échantillon	Parameter Name / Nom du paramètre	Test Result Résultat de l'analyse	Ontario Drinking Water Quality Standard / Norme de qualité de l'eau potable de l'Ontario"
		Standing / Stagnante			
		Flushed / Après rinçage			

Comments / Commentaires

## Schools, Private Schools and Day Nurseries (O. Reg. 243/07) Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)

### C - 1. Exceedance Notifications/Corrective Actions / Avis de dépassement/Mesures correctives

Please complete section C-1 and submit with sections A, B, D and E within 24 hours to the agencies listed in Section D. Upon Issue Resolution please submit Section C-2 within seven days to the same authorities to whom you submitted the initial exceedance test results / Remplissez la section C-1 et soumettez-la dans les 24 heures aux organismes indiqués dans la section D, accompagnée des sections A, B, D et E. Une fois la question réglée, soumettez la section C-2 dans les sept jours aux mêmes organismes ou responsables que vous avez initialement informés du ou des dépassements de la teneur normale en plomb.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
Learning Jungle School, Cooksville Campus	500067679

Are you co-located\* and by agreement you are the facility taking a single set of two one liter samples to meet the sampling requirements for all co-located facilities under this agreement? / Partagez-vous votre installation de plomberie\* et êtes-vous, en vertu d'une entente, l'établissement chargé de prélever une série unique de deux échantillons d'un litre afin de satisfaire aux exigences d'échantillonnage de tous les établissements qui partagent votre installation de plomberie, conformément à cette entente?

☐ Yes / Oui ☐ No / Non

If you answered Yes above, list the Names and DWIS No. for the schools/private schools and day nurseries you are sampling for and ensure that a copy of the test results is provided to those same facilities within 24 hours of receiving the test results from the laboratory. / Dans l'affirmative, fournissez le nom et le N° DWIS des écoles, écoles privées ou garderies au nom desquelles vous prélevez les échantillons et assurez-vous que ces établissements reçoivent une copie des résultats d'analyse dans les 24 heures suivant votre obtention des résultats d'analyse de la part du laboratoire.

Name of School / Private School / Day Nursery / Nom de l'école l'école privée ou de la garderie	DWIS No. / N° DWIS
1.	
2.	
3.	

For more than 4 co-located facilities, attach additional Section C-1's as required. /

Si plus de 4 établissements partagent l'installation de plomberie, annexe le nombre de sections C-1 nécessaires.

\*Co-located Facilities means, Two or more O. Reg 243/07 facilities (school, private school, day nursery) that are served by the same plumbing system.

The facilities may be either located in one building (Structure) or located in different buildings within one property. / On dit que des établissements « partagent une installation de plomberie » quand au moins deux établissements visés par le Règl. de l'Ont. 243/07 (école, école privée ou garderie) sont alimentés par une même installation de plomberie. Les établissements peuvent être situés dans un même bâtiment (structure partagée) ou dans des bâtiments différents sur une même propriété.

Earliest year plumbing installed (yyyy) /

Année d'installation de la plus ancienne section de plomberie (aaaa) \_\_\_\_\_

Was facility open to children under the age of 18 years at the time of sampling? /

L'établissement était-il ouvert aux enfants de moins de 18 ans au moment du prélèvement?

☐ Yes / Oui ☐ No / Non

Is this a re-sample test result for the same location for which a lead exceedance was previously reported? /

S'agit-il d'un prélèvement d'un robinet dont l'eau a déjà affiché un dépassement des normes de teneur en plomb?

☐ Yes / Oui ☐ No / Non

Indicate where you have sent this completed form. Contact information follows in Section D /

Précisez les autorités auxquelles vous avez transmis le présent formulaire. Leurs coordonnées figurent à la section D

☐ Ministry of the Environment Spills Action Centre  
Centre d'intervention en cas de déversement du ministère de l'Environnement

☐ Local Medical Officer of Health  
Médecin hygiéniste local

☐ Ministry of Children and Youth Services  
Ministère des Services à l'enfance et à la jeunesse

☐ Ministry of Education  
Ministère de l'Éducation

Indicate if Local Medical Officer of Health provided guidance on corrective actions. /

Indiquez si le médecin hygiéniste local a fourni des conseils sur les mesures à prendre.

☐ Yes / Oui ☐ No / Non

If you answered Yes, list guidance provided / Dans l'affirmative, précisez les conseils fournis.

---



---



---



---



---

Name of person completing this section (print name) / Nom de la personne qui a rempli la présente section (en lettres moulées)	Signature	Date written notification submitted (yyyy/mm/dd) / Date de réception de l'avis écrit (aaaa/mm/jj)
--	-----------	---

SAC Office use only / À l'usage du C/C/D

AWQI Number / N° de l'avis de déclaration  
d'une eau de mauvaise qualité :**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)****C - 2. Notice of Issue Resolution / Avis de règlement d'une question**

This section is to be completed by the Operator of the School/Private School/Day Nursery once all corrective actions required by your Medical Officer of Health have been completed. **You must then complete and submit the Notice of Issue Resolution within seven days to the same agencies notified of the initial lead exceedance test results.** / L'exploitant de l'école, de l'école privée ou de la garderie doit remplir cette section une fois qu'il aura pris toutes les mesures correctives prescrites par le médecin hygiéniste local. **Vous devez remplir l'avis de règlement d'une question dans les sept jours et le soumettre aux organismes qui ont été informés du ou des dépassements de la teneur normale en plomb.**

In the case of co-located facilities, those facilities that have reached an agreement to have one set of samples taken on their behalf, will need to have a representative for each facility sign in the co-location section at the bottom of this page to indicate that they have complied with all corrective actions that the public health unit has required. / En ce qui concerne les établissements qui partagent une installation de plomberie, chaque établissement qui a conclu une entente prévoyant le prélèvement d'une série unique d'échantillons en son nom doit désigner un représentant qui signera la section portant sur la partage de l'installation de plomberie au bas de la présente page afin de confirmer qu'elle a pris toutes les mesures correctives prescrites par le bureau de santé publique.

Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS
Learning Jungle School, Cooksville Campus	500067679

Contact Information / Personne-ressource

Last Name / Nom de famille	First Name / Prénom	Telephone No. / N° de téléphone
		ext. / poste

Name of Local Public Health Unit

Date Initial Exceedance Submitted to the Ministry of the Environment - Spills Action Centre (yyyy/mm/dd) /

Date de signalement du dépassement au ministère de l'Environnement - Centre d'intervention en cas de déversement (aaaa/mm/jj)

XXXX	XX	XX
XXXX	XX	XX

Date Resolved (yyyy/mm/dd) /

Date de résolution (aaaa/mm/jj)

XXXX	XX	XX
XXXX	XX	XX

Date Resolution Submitted (yyyy/mm/dd)

Date de soumission de l'avis de résolution (aaaa/mm/jj)

XXXX	XX	XX
XXXX	XX	XX

Additional Comments / Commentaires supplémentaires :

**I have complied with all corrective actions required by my Local Public Health Unit. /****J'ai pris toutes les mesures correctives prescrites par le bureau de santé publique local. Signed by / Signé par**

Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)

Co-location Signatures if applicable. / Signatures des représentants des établissements qui partagent une installation de plomberie, le cas échéant.

1. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)

2. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)

3. Name of School/Private School/Day Nursery / Nom de l'école ou de la garderie	DWIS No. / N° DWIS

Signed by / Signé par Last Name / Nom de famille	First Name / Prénom	Signature	Date (yyyy/mm/dd) / Date (aaaa/mm/jj)

**Schools, Private Schools and Day Nurseries (O. Reg. 243/07)**  
**Écoles, écoles privées et garderies (Règl. de l'Ont. 243/07)**

**D. Exceedance Notifications / Avis de dépassement**

Name of School/Private School/Day Nursery / Nom de l'école, de l'école privée ou de la garderie

Learning Jungle School, Cooksville Campus

Local Medical Officer of Health / Médecin hygiéniste local

Peel Region Public Health

Telephone No. / N° de téléphone

905 799-7700

ext. /  
poste

Fax No. / N° de télécopieur

905 501-0305

Email Address / Courriel

Public schools submit exceedance results to Ministry of Education. /

Les écoles privées doivent communiquer tout dépassement au ministère de l'Éducation.

Day nurseries submit exceedance results to Ministry of Children and Youth Services. /

Les garderies doivent communiquer tout dépassement au ministère des Services à l'enfance et à la jeunesse.

If you are e-mailing this section, please enter "R243 Exceedance and name of your School/Private School/Day Nursery in Subject line. /

Si vous transmettez cette section par courriel, écrivez dans le champ d'objet « Dépassement – Règl. 243 » suivi du nom de votre école, école privée ou garderie.

**Ministry of the Environment Spills Action Centre /**

**Centre d'intervention en cas de déversement du ministère de l'Environnement**

Telephone: / Téléphone : 1 800 268-6060 (toll free / sans frais) or 416 325-3000

Fax: / Télécopieur : 1 800 268-6062 (toll free / sans frais) or 416 325-3011

Email: / Courriel : moe.sac.moe@ontario.ca

**Ministry of Education /**

**Ministère de l'Éducation**

Telephone: / Téléphone : 416-325-2015

Fax: / Télécopieur : 416 325 4024

Email: / Courriel : steven.mitchell@ontario.ca

Or / Ou

**Ministry of Children and Youth Services /**

**Ministère des Services à l'enfance et à la jeunesse**

Region Région	Office Bureau	Telephone Téléphone	Fax Télécopieur	E-mail Courriel
Central West / Centre-Ouest	Mississauga	905 567-7177 ext. 352	905 567-3215	Martina.Rodrigues@ontario.ca
Central East / Centre-Est	Newmarket	905 868-8900 ext. 5250	905-895-6804	Jennifer.Peddle@ontario.ca
Toronto	Toronto	416 325-0575	416 327-0044	Beata.Machnik@ontario.ca
South East / Sud-Est	Kingston	613 536-7275	613 536-7272	Janet.Gibbs@ontario.ca
Eastern / Est	Ottawa	613 787-5279	613 787-3990	Diane.Henrie@ontario.ca
North East / Nord-Est	North Bay	705 474-3540	705 474-5446	Yvonne.Jeffrey@ontario.ca
Northern / Nord	Kenora	705 564-4515	705 564-7194	Serious.OccurKE.css@ontario.ca
	Sault Ste. Marie	705 564-4515	705 564-7193	Serious.OccurSA.css@ontario.ca
	Sudbury	705 564-4515	705 564-7191	Serious.Occur.css@ontario.ca
	Thunder Bay	705 564-4515	705 564-9557	Serious.OccurTH.css@ontario.ca
Hamilton / Niagara	Hamilton	905 521-7344	905 546-8277	Alexia.Watkins@ontario.ca
South West / Sud-Ouest	London	519 438-5111 ext. 3423	519 672-9461	Nancy.McGregor@ontario.ca

For more information, visit the ministry website at:  
[http://www.children.gov.on.ca/mcys/english/ministry/regional\\_offices\\_contact.asp](http://www.children.gov.on.ca/mcys/english/ministry/regional_offices_contact.asp).

Pour de plus amples renseignements, visitez le site Web du Ministère à  
<http://www.children.gov.on.ca/mcys/french/ministry/regoffice.asp>

## INCIDENT REPORT

### DW System

**System Name:** R243 LEARNING  
JUNGLE SCHOOL -  
COOKSVILLE CAMPUS  
(0003557)  
**System  
Address:** 78 AGNES ST  
MISSISSAUGA ON L5B  
1J7  
**District Office:** Halton-Peel District  
**DWS #:** 500067679  
**DWS Category:** Designated Facility

### DWS Owner

**Owner Name:** LEARNING JUNGLE SCHOOL  
**Owner Mailing  
Address:** 45 SHEPPARD Ave E TORONTO ON  
Canada M2N 5W9  
**Owner Physical  
Address:** 45 SHEPPARD AVE E TORONTO ON  
Canada M2N 5W9  
**Owner Phone:**  
**Owner Fax:**  
**Owner Email:**  
**Client Type:** COMMERCIAL

### MECP Information

**Incident Report #:** 1-2XD6-3  
**AWQI #:** 101711  
**Date & Time Reported to MECP:** Jun 30, 2011 11:21:04  
**Office Receiving Incident Report:** SAC  
**Incident Info Received By:** SAC  
**Incident Type:** O.Reg. 243 Lead Exceedence  
**Referring Inspection Report #:**  
**Incident Summary:** R243 Lead Exceedance  
**MECP Response:** No Field Response  
**Was an ERP called out?** N  
**Master Incident Report #:**  
**Master AWQI #:**  
**Date & Time MECP Arrival:**  
**IDS Reference #:**

## Incident Description

Incident Date	Incident Description	Created By
Jun 30, 2011 11:21:04	R243 Lead Exceedance	SADMIN
Jul 05, 2011 15:16:15	Received LEN from Lab,	SEEBORRA
Aug 23, 2011 11:25:19	Spoke to Jenine Kaps, Supervisor at the school. She mentioned that resampling was done on July 13th. Standing sample had lead contamination. Health Unit had advised to continue daily flushing. She will fax me the documents by tomorrow.	SEEBORRA
Aug 26, 2011 13:20:06	Received notice of resolution. NFA. Recommended for closure.	SEEBORRA

## Parameter Table

Sample Collection Date	Sample Location	Details	Parameter	Unit	Verbal DWS Result	Verbal Lab Result	Written DWS Result	Written Lab Result	Chlorine Residual	Result mg/L
06/20/2011 00:00:00			Lead	MG/L				0.0183		

## Offences

Suspected Violation(s)/Offence(s)

**Caller/PO Information**

**Contact Name:**  
**Telephone #:**  
**Email Address:**  
**Mailing Address:**

**Company:**  
**Fax Number:**

---

**Provincial Officer**

**Name:** Rattan Seeboruth  
**Work Unit:** Drinking Water Inspections Unit  
**Date:** February 18, 2025  
**Signature:**

**Badge #:** 1423  
**District/Area Office:** Halton-Peel District

**Supervisor**

**Name:** Demetra Koros  
**Work Unit:** Drinking Water Inspections Unit  
**Date:** February 18, 2025  
**Signature:**

**District/Area Office:** Halton-Peel District

## Registration and Laboratory Services Notification

*Schools, Private Schools and Day Nurseries (O. Reg. 243/07)*

### Instructions for ALL FACILITIES

**School/Private School/Day Nursery Operators must complete and submit this form to the Ministry prior to submitting drinking water samples to your contracted licensed laboratory for testing. This form must be re-submitted within 10 days of any change to the information provided on the form as per subsection 5(6) of O. Reg. 243/07.**

Please complete this form and fax/email directly to:

Ministry of the Environment  
Drinking Water Programs Branch

**Fax:** 416 314-8716

**Email:** [reg170\\_formsubmission.moe@ontario.ca](mailto:reg170_formsubmission.moe@ontario.ca)

If you require assistance in completing the form, please call  
1 866 793-2588 (toll free).

The most current version of this form is posted on the  
Ministry of the Environment's Drinking Water Ontario  
website at [www.ontario.ca/drinkingwater](http://www.ontario.ca/drinkingwater)

### Form Submission Information (please check all that apply)

- ☐ This is my first submission
- ☒ I wish to update my facility information
- ☐ I wish to notify the Ministry that I am changing licensed laboratories for my drinking water testing
- ☐ I wish to notify the Ministry that I am adding another laboratory for my drinking water testing

### Section 1: Schools, Private Schools and Day Nurseries Information

Name of School/Day Nursery

Learning Jungle School - Cooksville Campus

Type

☐ School

☐ Private School

☒ Day Nursery

s.21

SFIS No.

(if known)

SFIS No.

(if known)

License No.

Interested Authority

☒ Ministry of Education

☐ Ministry of Children and Youth Services

☐ Other

**Drinking Water Information System (DWIS) No.** (MOE Number if previously applied for)

500067679

### Location of School/Day Nursery

Unit No.

Street No.

78

Street Name

Agnes Street

PO Box

Rural Route

Lot/Part/Block/Section

Concession/Plan

City/Town/Municipality

Mississauga

Province

Ontario

Postal Code

L5B 1J7

### Contact Information

Last Name

Kaps

First Name

Jeanine

Position

Supervisor

Telephone No. (including area code)

905-273-7023

Ext.

Fax No. (including area code)

416-229-0381

Email Address

[cooksville@learningjungle.com](mailto:cooksville@learningjungle.com)

**Additional Information** (Use this space if you wish to add any additional information)

Use [licensing@learningjungle.com](mailto:licensing@learningjungle.com) for communication.

**Section 2: School/Day Nursery Operator Information (if different than Section 1)**

Legal Name of School/Day Nursery Operator (i.e. school board/private school or individual/corporation who holds the licence for the day nursery)  
2096886 Ontario Inc. o/a Learning Jungle School - Cooksville Campus

Operator Contact Name  
Nesmith Chingcuanco

Unit No. 900	Street No. 45	Street Name Sheppard Avenue East	PO Box
-----------------	------------------	-------------------------------------	--------

Rural Route	Lot/Part/Block/Section	Concession/Plan
-------------	------------------------	-----------------

City/Town/Municipality Toronto	Province Ontario	Postal Code M2N 5W9
-----------------------------------	---------------------	------------------------

Business Telephone No. (including area code) 416-227-0461	Ext.	Fax No. (including area code) 416-229-0381
--	------	---

Email Address  
licensing@learningjungle.com

**Section 3: Co-location Information (if applicable)****"Co-located Facilities":**

Facilities are "co-located" if more than one school, private school, or day nursery is served by the same plumbing. The facilities may be either located in one building (structure) or located in different buildings within one property.

My School/ Private School/ Day Nursery is co-located with another O. Reg. 243/07 facility, as listed below.

Facility Name	Facility DWIS #	Check below if applicable
		<input type="checkbox"/> Yes, we are sharing lead sample results
Facility Name (if more than one)	Facility DWIS #	
		<input type="checkbox"/> Yes, we are sharing lead sample results
Facility Name (if more than two)	Facility DWIS #	
		<input type="checkbox"/> Yes, we are sharing lead sample results

If more facilities are co-located with your School /Day Nursery, please fill out as many Section 3 of the form as needed and attach additional sheets.

#### Section 4: Identification of Licensed Laboratory and Lead Testing

Subsection 5 (5) of O. Reg. 243/07 requires the identification of any contracted licensed laboratory(s) hired to perform lead testing.

The listing of licensed laboratories can be found on: <http://www.ontario.ca/drinkingwater/271380.pdf>

Please check one of the following:

- ☒ The facility (identified in section 1) will be sampling as required by O.Reg.243/07 and will be using the laboratory identified below for lead testing
- ☐ The facility (identified in section 1) will be sampling as required by O.Reg.243/07 and will be sharing samples with the co-located facility/facilities as indicated in section 3 of this form and will be using the laboratory identified below for lead testing
- ☐ The facility (identified in section 1) does not perform its own sampling because it is sharing sample results with the co-located facility indicated in section 3 of this form.

Failure to notify the parties in accordance with the Regulation and/or submission of false information constitutes an offence.

#### Name/Contact Information of Licensed Laboratory Performing Lead Testing

(Your licensed laboratory can assist with completing this section of the form)

Laboratory Name			Licence Number
York-Durham Regional Environmental Laboratory			
Unit No.	Street No.	Street Name	PO Box
	901	McKay Road	
City/Town/Municipality		Province	Postal Code
Pickering		Ontario	L1W 3A3

Please specify additional testing identified in MOE (Certificate of Approval, Order or Direction)

I declare that the information provided on this form is accurate.

Prepared by

Last Name

Chingcuanco

First Name

Nesmith

Middle Initial

Signature

Date (yyyy/mm/dd)

2013/05/08

Telephone No. (including area code)

416-227-0461

Collection of information on this form by staff of the Drinking Water Management Division on behalf of the Ministry of the Environment is in accordance with the *Safe Drinking Water Act, 2002* (SDWA) and its regulations. The collection, use and dissemination of this information are governed by the *Freedom of Information and Protection of Privacy Act* (FOIPPA). The information gathered herein will be used for the purpose of registration and compliance and may be used for secondary purposes including reporting, investigating and law enforcement under the SDWA and its regulations. Information on this form, including personal information, may be disclosed to other government agencies including municipalities, public health unit employees and the Ministry of Health and Long Term Care pursuant to section 42 of FOIPPA for the consistent purpose of administering programs related to drinking water safety. For questions and concerns, please contact the Ministry of the Environment at 1 866 793-2588.

**Ministry of the Environment,  
Conservation and Parks**

Corporate Services Branch  
40 St. Clair Avenue West  
Toronto ON M4V 1M2

**Ministère de l'Environnement, de la  
Protection de la nature et des Parcs**

Direction des services ministériels  
40, avenue St. Clair Ouest  
Toronto ON M4V 1M2



February 7, 2025

Caitlin Worona  
G2S Consulting Inc.  
4361 Harvester Road, Unit 12  
Burlington, Ontario L7L 5M4  
caitw@g2sconsulting.com

Dear Caitlin Worona:

**RE: MECP FOI A-2025-00831 / Your Reference G2S24602 –  
Acknowledgement Letter**

The Ministry is in receipt of your request made pursuant to the Freedom of Information and Protection of Privacy Act. **The search will be conducted on the following:**

**51, 53, and 55 Dundas Street West, Mississauga**

**Timeframe: January 1, 1900 to February 6, 2025**

**If there is any discrepancy, please contact us immediately.**

Please note the file number that has been assigned to your request. This number should be referred to in all future communications with our office.

If you have any questions, please contact Christian Brodersen at christian.brodersen@ontario.ca.

Yours truly,  
MECP Access and Privacy Office

**Ministry of the Environment,  
Conservation and Parks**

Corporate Services Branch  
40 St. Clair Avenue West  
Toronto ON M4V 1M2

**Ministère de l'Environnement, de la  
Protection de la nature et des Parcs**

Direction des services ministériels  
40, avenue St. Clair Ouest  
Toronto ON M4V 1M2



February 7, 2025

Caitlin Worona  
G2S Consulting Inc.  
4361 Harvester Road, Unit 12  
Burlington, Ontario L7L 5M4  
caitw@g2sconsulting.com

Dear Caitlin Worona:

**RE: MECP FOI A-2025-00836 / Your Reference G2S24602 –  
Acknowledgement Letter**

The Ministry is in receipt of your request made pursuant to the Freedom of Information and Protection of Privacy Act. **The search will be conducted on the following:**

**60 Agnes Street, Mississauga**

**Timeframe: January 1, 1900 to February 6, 2025**

**If there is any discrepancy, please contact us immediately.**

Please note the file number that has been assigned to your request. This number should be referred to in all future communications with our office.

If you have any questions, please contact Christian Brodersen at christian.brodersen@ontario.ca.

Yours truly,  
MECP Access and Privacy Office



February 10, 2025

Ms. Caitlin Worona  
G2S Consulting Inc.  
4361 Harvester Road, Unit 12  
Burlington, Ontario L7L 5M4  
caitw@g2sconsulting.com

Dear Caitlin Worona:

RE: **MECP FOI A-2025-00836, Your Reference G2S24602 – Decision Letter**

This letter is in response to your request made pursuant to the Freedom of Information and Protection of Privacy Act (the Act) relating to:

60 Agnes Street, Mississauga

Timeframe: January 1, 1900 to February 6, 2025

After a thorough search through the ministry files, no records were located responsive to your request. The official responsible for making the access decision on your request is the undersigned. This file is now closed.

You may request a review of my decision within 30 days from the date of this letter by contacting the Information and Privacy Commissioner/Ontario at <http://www.ipc.on.ca>. Please note there may be a fee associated with submitting the appeal.

If you have any questions, please contact Maham Imtiaz at [maham.imtiaz@ontario.ca](mailto:maham.imtiaz@ontario.ca).

Yours truly,  
***Maham Imtiaz***

for  
Josephine DeSouza  
Manager, Access and Privacy Office

**Ministry of the Environment,  
Conservation and Parks**

Corporate Services Branch  
40 St. Clair Avenue West  
Toronto ON M4V 1M2

**Ministère de l'Environnement, de la  
Protection de la nature et des Parcs**

Direction des services ministériels  
40, avenue St. Clair Ouest  
Toronto ON M4V 1M2



February 7, 2025

Ms. Caitlin Worona  
G2S Consulting Inc.  
4361 Harvester Road, Unit 12  
Burlington, Ontario L7L 5M4  
caitw@g2sconsulting.com

Dear Caitlin Worona:

**RE: MECP FOI A-2025-00852 – Acknowledgement Letter**

The Ministry is in receipt of your request made pursuant to the Freedom of Information and Protection of Privacy Act. **The search will be conducted on the following:**

**66 Agnes Street, Mississauga**

**Timeframe: January 1st, 1900 to February 6th, 2025**

**If there is any discrepancy, please contact us immediately.**

Please note the file number that has been assigned to your request. This number should be referred to in all future communications with our office.

If you have any questions, please contact Maham Imtiaz at [maham.imtiaz@ontario.ca](mailto:maham.imtiaz@ontario.ca).

Yours truly,  
MECP Access and Privacy Office



February 11, 2025

Ms. Caitlin Worona  
G2S Consulting Inc.  
4361 Harvester Road, Unit 12  
Burlington, Ontario L7L 5M4  
caitw@g2sconsulting.com

Dear Caitlin Worona:

RE: **MECP FOI A-2025-00852 – Decision Letter**

This letter is in response to your request made pursuant to the Freedom of Information and Protection of Privacy Act (the Act) relating to:

66 Agnes Street, Mississauga

Timeframe: January 1st, 1900 to February 6th, 2025

After a thorough search through the ministry files, no records were located responsive to your request. The official responsible for making the access decision on your request is the undersigned. This file is now closed.

You may request a review of my decision within 30 days from the date of this letter by contacting the Information and Privacy Commissioner/Ontario at <http://www.ipc.on.ca>. Please note there may be a fee associated with submitting the appeal.

If you have any questions, please contact Daniela Jaramillo at [daniela.jaramillo@ontario.ca](mailto:daniela.jaramillo@ontario.ca).

Yours truly,  
Daniela Jaramillo

for  
Josephine DeSouza  
Manager, Access and Privacy Office

**Ministry of the Environment,  
Conservation and Parks**

Corporate Services Branch  
40 St. Clair Avenue West  
Toronto ON M4V 1M2

**Ministère de l'Environnement, de la  
Protection de la nature et des Parcs**

Direction des services ministériels  
40, avenue St. Clair Ouest  
Toronto ON M4V 1M2



February 7, 2025

Ms. Caitlin Worona  
G2S Consulting Inc.  
4361 Harvester Road, Unit 12  
Burlington, Ontario L7L 5M4  
caitw@g2sconsulting.com

Dear Caitlin Worona:

**RE: MECP FOI A-2025-00855 – Acknowledgement Letter**

The Ministry is in receipt of your request made pursuant to the Freedom of Information and Protection of Privacy Act. **The search will be conducted on the following:**

**78 Agnes Street, Mississauga**

**Timeframe: January 1st, 1900 to February 6th, 2025**

**If there is any discrepancy, please contact us immediately.**

Please note the file number that has been assigned to your request. This number should be referred to in all future communications with our office.

If you have any questions, please contact Maham Imtiaz at [maham.imtiaz@ontario.ca](mailto:maham.imtiaz@ontario.ca).

Yours truly,  
MECP Access and Privacy Office

February 27, 2025

Ms. Caitlin Worona  
G2S Consulting Inc.  
4361 Harvester Road, Unit 12  
Burlington, Ontario L7L 5M4  
caitw@g2sconsulting.com

Dear Caitlin Worona:

**RE: MECP FOI A-2025-00855 – Decision Letter**

This letter is further to your request made pursuant to the Freedom of Information and Protection of Privacy Act (the Act) relating to 78 Agnes Street, Mississauga.

After a thorough search through the ministry files, records were located in response to your request. The final decision has been made to provide partial access to the requested information. The official responsible for making the access decision on your request is the undersigned.

Some of the information has been severed or withheld under the following sections of the Act:

s.21 Personal information of individuals for the protection of their personal privacy.

Records or information that are not relevant to the request (e.g., records that are blank, outside of the date range or do not relate directly to the subject matter) have been removed and marked "Not Relevant or 'N/R'".

Section 57 of the Act authorizes certain fees to be charged for processing a request. Our charges for processing this request are:

- |                              |                |
|------------------------------|----------------|
| • Search Time 0.92 @ 30/hour | <u>\$27.50</u> |
| • <b>Total</b>               | <b>\$27.50</b> |

In order to receive a copy of the records please forward this amount to our office. Payment(s) may be made by **March 31, 2025**. If payment has not been received by this date, the file will be closed, and you will be required to submit a new request.

Payment(s) may be made by one of the following options:

- Pay online through the Freedom of Information Request for Property Information Form: <https://forms.mgcs.gov.on.ca/en/dataset/012-2146>. Both the pdf download or “HTML” versions provide access to the payment option.
- Mail money order or cheque made payable to the “Minister of Finance (FOI)” or provide credit card information through the mail-in version of the form mentioned above.

Please **do not** mail cash or send your payment information via email.

You may request a review of my decision within 30 days from the date of this letter by contacting the Information and Privacy Commissioner/Ontario at <http://www.ipc.on.ca>. Please note there may be a fee associated with submitting the appeal.

If you decide to pursue this request after the deadline has passed, please contact the analyst below to discuss options that are available.

If you have any questions regarding this matter, contact Tara Hachey at [tara.hachey@ontario.ca](mailto:tara.hachey@ontario.ca).

Yours truly,



For:

Josephine DeSouza  
Manager, Access, and Privacy Office

**Ministry of the Environment,  
Conservation and Parks**

Corporate Services Branch  
40 St. Clair Avenue West  
Toronto ON M4V 1M2

**Ministère de l'Environnement, de la  
Protection de la nature et des Parcs**

Direction des services ministériels  
40, avenue St. Clair Ouest  
Toronto ON M4V 1M2



February 7, 2025

Ms. Caitlin Worona  
G2S Consulting Inc.  
4361 Harvester Road, Unit 12  
Burlington, Ontario L7L 5M4  
caitw@g2sconsulting.com

Dear Caitlin Worona:

**RE: MECP FOI A-2025-00856 – Acknowledgement Letter**

The Ministry is in receipt of your request made pursuant to the Freedom of Information and Protection of Privacy Act. **The search will be conducted on the following:**

**70 Agnes Street, Mississauga**

**Timeframe: January 1st, 1900 to February 6th, 2025**

**If there is any discrepancy, please contact us immediately.**

Please note the file number that has been assigned to your request. This number should be referred to in all future communications with our office.

If you have any questions, please contact Maham Imtiaz at  
maham.imtiaz@ontario.ca.

Yours truly,  
MECP Access and Privacy Office



March 3, 2025

Caitlin Worona  
G2S Consulting Inc.  
4361 Harvester Road, Unit 12  
Burlington, Ontario L7L 5M4  
caitw@g2sconsulting.com

Dear Caitlin Worona:

RE: **MECP FOI A-2025-00856 – Decision Letter**

This letter is in response to your request made pursuant to the Freedom of Information and Protection of Privacy Act (the Act) relating to:

70 Agnes Street, Mississauga

Timeframe: January 1st, 1900 to February 6th, 2025

After a thorough search through the ministry files, no records were located responsive to your request. The official responsible for making the access decision on your request is the undersigned. This file is now closed.

You may request a review of my decision within 30 days from the date of this letter by contacting the Information and Privacy Commissioner/Ontario at <http://www.ipc.on.ca>. Please note there may be a fee associated with submitting the appeal.



If you have any questions, please contact Christian Brodersen at [christian.brodersen@ontario.ca](mailto:christian.brodersen@ontario.ca).

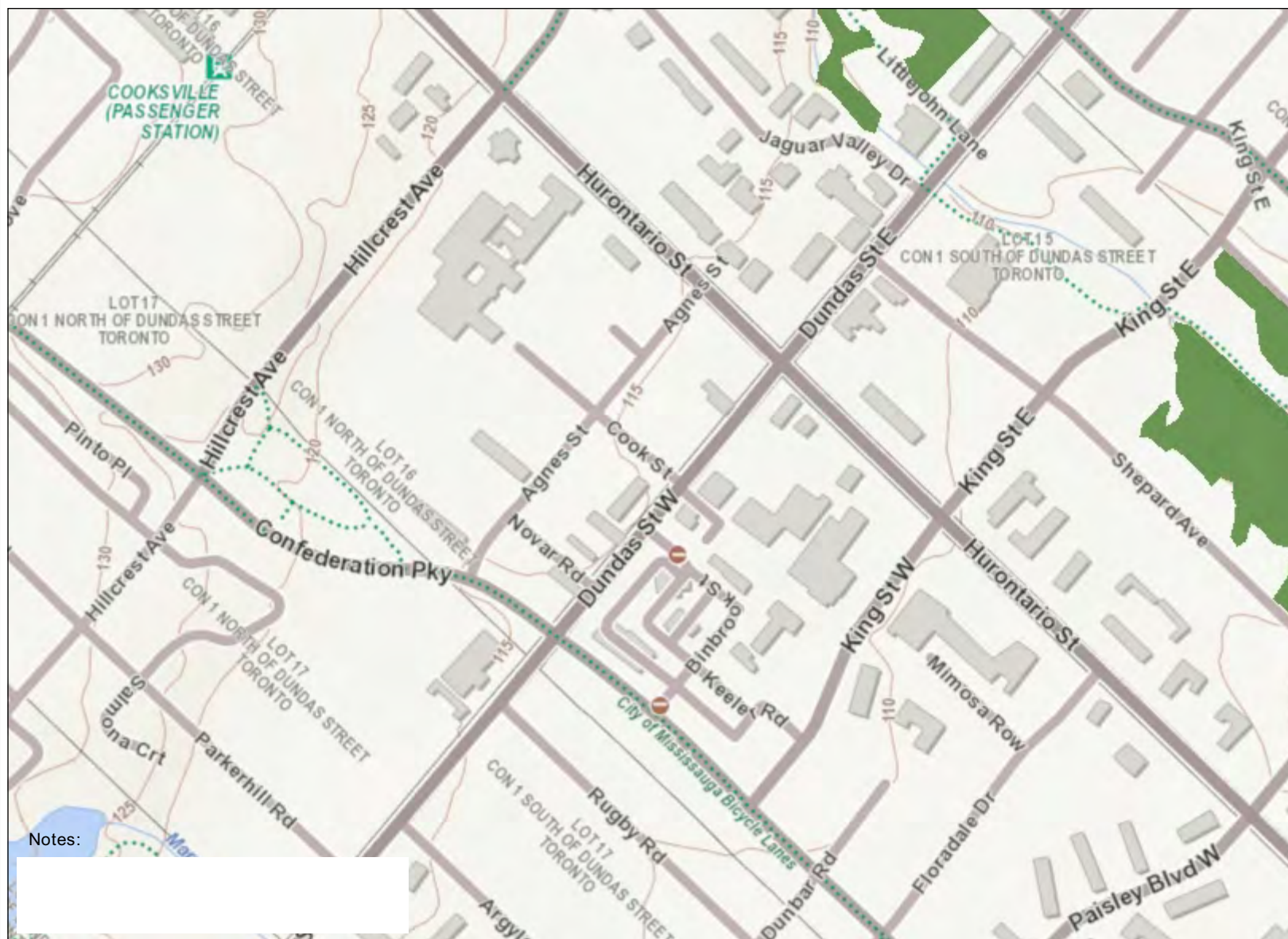
Yours truly,  
**Christian Brodersen**

for  
Josephine DeSouza  
Manager, Access and Privacy Office

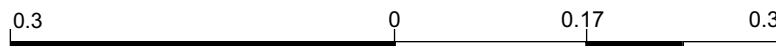
## Legend

ANSI

-  Earth Science Provincially Significant/sciences de la terre d'importance provinciale
-  Earth Science Regionally Significant/sciences de la terre d'importance régionale
-  Life Science Provincially Significant/sciences de la vie d'importance provinciale
-  Life Science Regionally Significant/sciences de la vie d'importance régionale
-  Evaluated Wetland
-  Provincially Significant/considérée d'importance provinciale
-  Non-Provincially Significant/non considérée d'importance provinciale
-  Unevaluated Wetland
-  Woodland
-  Conservation Reserve
-  Provincial Park
-  Natural Heritage System



Notes:



Kilometres Absence of a feature in the map does not mean they do not exist in this area.

This map should not be relied on as a precise indicator of routes or locations, nor as a guide to navigation. The Ontario Ministry of Natural Resources(OMNR) shall not be liable in any way for the use of, or reliance upon, this map or any information on this map.

© Copyright for Ontario Parcel data is held by King's Printer for Ontario and its licensors and may not be reproduced without permission. THIS IS NOT A PLAN OF SURVEY.



Imagery Copyright Notices: DRAPE © Aéro-Photo (1961) Inc., 2008 - 2009  
GTA 2005 / SWOOP 2006 / Simcoe-Muskoka-Dufferin © FirstBase Solutions, 2005 / 2006 / 2008  
© King's Printer for Ontario, 2025



---

**RE: TSSA Records Search**

---

From Public Information Services <publicinformationsservices@tssa.org>

Date Mon 2/3/2025 8:54 AM

To Cait Worona <caitw@g2sconsulting.com>

**NO RECORD FOUND IN CURRENT DATABASE**

Hello,

Thank you for your request for confirmation of public information. TSSA has performed a preliminary search of TSSA's current database.

- We confirm that there are no records in our current database of any fuel storage tanks at the subject address(es).

This is not a confirmation that there are no records in the archives. For a further search in our archives, please go to the [TSSA Client Portal](#) to complete an Application for Release of Public Information.

Please refer to [How to Submit a Public Information Request \(tssa.org\)](#) for instructions.

The associated fee must be paid via credit card (Visa or MasterCard).

Once all steps have been successfully completed you will receive your payment receipt via email.

TSSA does not make any representations or warranties with respect to the accuracy or completeness of any records released. The requestor assumes all risk in using or relying on the information provided.

If you have any questions or concerns, please do not hesitate to contact our Public Information Release team at [publicinformationsservices@tssa.org](mailto:publicinformationsservices@tssa.org).

Kind regards,



**Kimberly Gage | Public Information & Records Agent**

Public Information

345 Carlingview Drive

Toronto, Ontario M9W 6N9

Tel: +1 416-734-3581 | Fax: +1 416-734-3568 | E-Mail: [kgage@tssa.org](mailto:kgage@tssa.org)

[www.tssa.org](http://www.tssa.org)





**Winner of 2024 5-Star Safety Cultures Award**

**From:** Cait Worona  
<caitw@g2sconsulting.com>  
**Sent:** Friday, January 31, 2025  
2:24 PM  
**To:** Public Information Services

<publicinformationservices@tssa.org>

**Subject:** TSSA Records Search

**[CAUTION]:** This email originated outside the organisation.

Please do not click links or open attachments unless you recognise the source of this email and know the content is safe.

Good Afternoon,

May I have the following properties, located in Mississauga, searched for TSSA records?

51, 53, 55, 57, 59 Dundas Street West

60, 66, 70, 78 Agnes Street

3024 Hurontario Street

Thank you,

**Cait Worona, B.Sc.**

Environmental Scientist

G2S Consulting Inc.



4361 Harvester Road, Unit 12

Burlington, Ontario

L7L 5M4

Tel: 905-331-3735

Fax: 905-642-5999

Cell: 905-802-3724

[caitw@g2sconsulting.com](mailto:caitw@g2sconsulting.com)

[www.g2sconsulting.com](http://www.g2sconsulting.com)

***Offices in Burlington and Stouffville***

This electronic message and any attached documents are intended only for the named recipients. This communication from the Technical Standards and Safety Authority may contain information that is privileged, confidential or otherwise protected from disclosure and it must not be disclosed, copied,

---

**RE: TSSA Records Search**

---

From Public Information Services <publicinformationservices@tssa.org>

Date Tue 2/4/2025 9:06 AM

To Cait Worona <caitw@g2sconsulting.com>

**NO RECORD FOUND IN CURRENT DATABASE**

Hello,

Thank you for your request for confirmation of public information. TSSA has performed a preliminary search of TSSA's current database.

- We confirm that there are no records in our current database of any fuel storage tanks at the subject address(es).

This is not a confirmation that there are no records in the archives. For a further search in our archives, please go to the [TSSA Client Portal](#) to complete an Application for Release of Public Information.

Please refer to [How to Submit a Public Information Request \(tssa.org\)](#) for instructions.

The associated fee must be paid via credit card (Visa or MasterCard).

Once all steps have been successfully completed you will receive your payment receipt via email.

TSSA does not make any representations or warranties with respect to the accuracy or completeness of any records released. The requestor assumes all risk in using or relying on the information provided.

If you have any questions or concerns, please do not hesitate to contact our Public Information Release team at [publicinformationservices@tssa.org](mailto:publicinformationservices@tssa.org).

Kind regards,



**Kimberly Gage | Public Information & Records Agent**

Public Information

345 Carlingview Drive

Toronto, Ontario M9W 6N9

Tel: +1 416-734-3581 | Fax: +1 416-734-3568 | E-Mail: [kgage@tssa.org](mailto:kgage@tssa.org)

[www.tssa.org](http://www.tssa.org)





**Winner of 2024 5-Star Safety Cultures Award**

**From:** Cait Worona  
<caitw@g2sconsulting.com>  
**Sent:** Tuesday, February 4,  
2025 8:00 AM  
**To:** Public Information Services

<publicinformationservices@tssa.org>

**Subject:** TSSA Records Search

**[CAUTION]:** This email originated outside the organisation.

Please do not click links or open attachments unless you recognise the source of this email and know the content is safe.

Good Afternoon,

May I have the following properties, located in Mississauga, searched for TSSA records?

71, 73, 79, 84 Agnes Street

Thank you,

**Cait Worona, B.Sc.**

Environmental Scientist

G2S Consulting Inc.



4361 Harvester Road, Unit 12

Burlington, Ontario

L7L 5M4

Tel: 905-331-3735

Fax: 905-642-5999

Cell: 905-802-3724

[caitw@g2sconsulting.com](mailto:caitw@g2sconsulting.com)

[www.g2sconsulting.com](http://www.g2sconsulting.com)

***Offices in Burlington and Stouffville***

This electronic message and any attached documents are intended only for the named recipients. This communication from the Technical Standards and Safety Authority may contain information that is privileged, confidential or otherwise protected from disclosure and it must not be disclosed, copied,

## **Appendix E: Well Records**

Address of Well Location (Street Number/Name) 40 Dundas St. W		Township	Lot	Concession
County/District/Municipality		City/Town/Village Mississauga	Province Ontario	Postal Code
UTM Coordinates	Zone	Easting	North	Other
NAD 83	17	611659	4826031	
Municipal Plan and Sublot Number				

## Overburden and Bedrock Materials/Abandonment Sealing Record (see instructions on the back of this form)

General Colour	Most Common Material	Other Materials	General Description	Depth (m/ft)
From	To			From To
BRN	fill	gravel	loose	0 .31
BRN	sand	stones	soft loose	.31 3.35
BRN	sand		soft wet	3.35 3.96
GRY	shale		hard	3.96 5.49

Annular Space			
Depth Set at (m/ft)	Type of Sealant Used (Material and Type)	Volume Placed (m³/ft³)	
From To			
0 .31	Benseal concrete		
.31 3.96	Benseal		
3.96 5.49	filter sand		

Method of Construction	Well Use
<input type="checkbox"/> Cable Tool <input type="checkbox"/> Rotary (Conventional) <input type="checkbox"/> Rotary (Reverse) <input type="checkbox"/> Boring <input checked="" type="checkbox"/> Air percussion <input checked="" type="checkbox"/> Other, specify Direct Push	<input type="checkbox"/> Public <input type="checkbox"/> Domestic <input type="checkbox"/> Livestock <input type="checkbox"/> Irrigation <input type="checkbox"/> Industrial <input type="checkbox"/> Other, specify

Construction Record - Casing				Status of Well
Inside Diameter (cm/in)	Open Hole OR Material (Galvanized, Fibreglass, Concrete, Plastic, Steel)	Wall Thickness (cm/in)	Depth (m/ft)	
			From To	
	PVC		0 3.96	<input type="checkbox"/> Water Supply <input type="checkbox"/> Replacement Well <input checked="" type="checkbox"/> Test Hole <input type="checkbox"/> Recharge Well <input type="checkbox"/> Dewatering Well <input checked="" type="checkbox"/> Observation and/or Monitoring Hole <input type="checkbox"/> Alteration (Construction) <input type="checkbox"/> Abandoned, Insufficient Supply <input type="checkbox"/> Abandoned, Poor Water Quality <input type="checkbox"/> Abandoned, other, specify <input type="checkbox"/> Other, specify

Construction Record - Screen			
Outside Diameter (cm/in)	Material (Plastic, Galvanized, Steel)	Slot No.	Depth (m/ft)
			From To
	PVC	10	3.96 5.49

Water Details		Hole Diameter	
Water found at Depth (m/ft)	Kind of Water: <input type="checkbox"/> Fresh <input type="checkbox"/> Untested <input type="checkbox"/> Gas <input type="checkbox"/> Other, specify	Depth (m/ft)	Diameter (cm/in)
		From To	
		0 3.96	8.25
		3.96 5.49	5.71




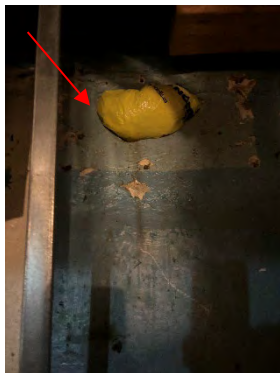


Business Name of Well Contractor Strata Soil Sampling Inc		Well Contractor's Licence No. 7241
Business Address (Street Number/Name) #2-147 West Beaver Creek		Municipality Richmond Hill
Province ON	Postal Code L4B1C6	Business E-mail Address wrecord@stratasoil.com
Bus. Telephone No. (inc. area code) (905) 764-1304		Name of Well Technician (Last Name, First Name) Mike
Well Technician's Licence No. 3448		Signature of Technician and/or Contractor [Signature]
Date Submitted 20100930		





Results of Well Yield Testing					
After test of well yield, water was: <input type="checkbox"/> Clear and sand free <input type="checkbox"/> Other, <i>specify</i> _____		Draw Down		Recovery	
		Time (min)	Water Level (m/ft)	Time (min)	Water Level (m/ft)
If pumping discontinued, give reason:		Static Level			
		1		1	
Pump intake set at (m/ft)		2		2	
Pumping rate (l/min / GPM)		3		3	
		4		4	
Duration of pumping ____ hrs + ____ min		5		5	
Final water level end of pumping (m/ft)		10		10	
If flowing give rate (l/min / GPM)		15		15	
		20		20	
Recommended pump depth (m/ft)		25		25	
Recommended pump rate (l/min / GPM)		30		30	
		40		40	
Well production (l/min / GPM)		50		50	
		60		60	
Disinfected? <input type="checkbox"/> Yes <input type="checkbox"/> No					

Map of Well Location	
Please provide a map below following instructions on the back.	
Comments:	
Well owner's information package delivered	Date Package Delivered
<input type="checkbox"/> Yes <input type="checkbox"/> No	Y Y Y Y M M D D
Date Work Completed	20100913
Ministry Use Only	
Audit No. z111726	
NOV 04 2010	
Received	

## **Appendix F: Site Photographs**



Picture and Description	
	
<b>Photo #1:</b> 51-57 Dundas Street West viewed from the east.	<b>Photo #2:</b> Basement of 51-57 Dundas Street West.
	
<b>Photo #3:</b> 60 Agnes Street viewed from the north.	<b>Photo #4:</b> Foam-filled historic location of vent and fill pipes within the present-day furnace room of 60 Agnes Street (indicated by red arrow).
	
<b>Photo #5:</b> 66 Agnes Street viewed from the north.	<b>Photo #6:</b> Chimney cleanout located behind the present day forced air furnace and hot water heater in 66 Agnes Street (indicated by red arrow).

Picture and Description	
	
<b>Photo #7:</b> The present-day furnace within 70 Agnes Street.	<b>Photo #8:</b> 78 Agnes Street viewed from the north.
	
<b>Photo #9:</b> The roof-mounted heating/ventilating/air conditioning unit (indicated by red arrow) at 78 Agnes Street.	<b>Photo #10:</b> The vacant grassed area central to the Site.

**Appendix G:**  
**Phase One ESA Questionnaire**



## PHASE ONE ESA QUESTIONNAIRE

Site Address: 51/57 Dundas St West-	
Project #:	
Owner: Lucie D'Guere	Occupant: A1 Copy + Print
Interviewee:	Relation to Site:
Property and Building Description and Size:	

1. Has the property or an adjacent property(s) currently or previously been used for an industrial or commercial use? If yes, please specify activities and time frames.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

2. Are there or have there been in the past, any damaged or discarded automotive or industrial batteries, pesticides, paints, or other chemicals in the aggregate, stored on or used at the property or on any of the adjacent properties? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

3. Are there currently, or have there been in the past, any industrial containers of chemicals located on the property or on any of the adjacent properties? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

4. Are you aware or do you have any prior knowledge that fill material has been brought onto the property that originated from an unknown origin or contaminated site? If yes, please specify location.

Interviewee	Observed During Site Visit
Yes <input type="radio"/> No <input checked="" type="radio"/> Unknown	Yes <input type="radio"/> No <input checked="" type="radio"/>

NOTES:

5. Has the property or any of the adjacent properties been used for the any of the following industries/activities/storage/related activities, either currently or historically (please mark where applicable):

AREA OF CONCERN	YES	NO	COMMENT
Chemicals		<input checked="" type="checkbox"/>	
Electrical Equipment		<input checked="" type="checkbox"/>	
Metal Smelting and/or Processing		<input checked="" type="checkbox"/>	
Mining		<input checked="" type="checkbox"/>	
Milling		<input checked="" type="checkbox"/>	
Petroleum and Natural Gas Drilling/Production/Processing/Retailing and/or Distribution (Including Gasoline Station)		<input checked="" type="checkbox"/>	
Transportation		<input checked="" type="checkbox"/>	
Junkyard, waste disposal/landfill/waste treatment and/or Processing, Recycling		<input checked="" type="checkbox"/>	
Wood, Pulp and Paper Products		<input checked="" type="checkbox"/>	
Appliance Equipment and/or Engine Repair/Reconditioning/Salvage		<input checked="" type="checkbox"/>	
Ash Deposit from boilers and/or other Thermal Facilities		<input checked="" type="checkbox"/>	
Asphalt Tar Manufacturing		<input checked="" type="checkbox"/>	
Coal Gasification		<input checked="" type="checkbox"/>	
Medical/Chemical/Radiological and/or Biological Labs		<input checked="" type="checkbox"/>	
Rifle and/or Pistol Firing Ranges		<input checked="" type="checkbox"/>	
Road Salt Storage Facilities		<input checked="" type="checkbox"/>	
Dry Cleaning Facilities		<input checked="" type="checkbox"/>	
Commercial Printing Facilities and/or Photo Developing Laboratory		<input checked="" type="checkbox"/>	
Site which have been or are likely to have been contaminated by substances migrating from other properties.		<input checked="" type="checkbox"/>	

6. Are there currently, or have there been in the past, any pits, ponds, or lagoons located on the property in connection with waste treatment or waste disposal? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	<input checked="" type="radio"/> No

NOTES:

7. Is there currently any, or has there been in the past, stained soil on the property? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	<input checked="" type="radio"/> No

NOTES:

8. Are there currently, or have there been in the past, any registered or unregistered storage tanks (above or underground) located on the property? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	<input checked="" type="radio"/> No

NOTES:

9. Are there currently, or have there been in the past, any vent pipes, fill pipes, or access ways indicating a fill pipe protruding from the ground on the property or adjacent to any structure located on the property? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	<input checked="" type="radio"/> No

NOTES:

10. Is there currently, or have there been in the past, evidence of leaks, spills or staining by substances other than water, or foul odours, associated with any flooring, drains, walls, ceilings, or exposed grounds on the property? If yes, please specify location.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes <input type="radio"/> No <input checked="" type="radio"/>

NOTES:

11. If the property is served by a private well or non-public water system, is there evidence or do you have prior knowledge that contaminants have been identified in the well or system that exceed guidelines applicable to the water system? If yes, please specify location.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes <input type="radio"/> No <input checked="" type="radio"/>

NOTES:

12. If the property served by a private well or non-public water system, have there been in the past, any well designated as contaminated by any government environmental/health agency? If yes, please specify location.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes <input type="radio"/> No <input checked="" type="radio"/>

NOTES:

13. Are you aware of any environmental liens or governmental notification relating to past or recurrent violations of environmental laws with respect to the property or any facility located on the property? If yes, please specify.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes <input type="radio"/> No <input checked="" type="radio"/>

NOTES:

14. Are you aware of current or past existence of hazardous substances or petroleum products with respect to the property or any facility located on the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	<input checked="" type="radio"/> No

NOTES:

15. Are you aware of any current or past existence of environmental violations with respect to the property or any facility located on the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	<input checked="" type="radio"/> No

NOTES:

16. Are you aware of any environmental site assessment of the property or facility that indicated the presence of hazardous substances or petroleum products on, or contamination of, the property or recommended further assessment of the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	<input checked="" type="radio"/> No

NOTES:

17. Are you aware of any past, threatened, or pending lawsuits or administrative proceedings concerning a release or threatened release of any hazardous substance or petroleum products involving the property by any owner or occupant of the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	<input checked="" type="radio"/> No

NOTES:

18. Does the property discharge wastewater (not including sanitary waste or storm water) onto or adjacent to the property and/or into a storm water system? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	<input checked="" type="radio"/> No

NOTES:

19. Are you aware of any hazardous substances or petroleum products, unidentified waste materials, tires, automotive or industrial batteries, or any other waste materials that have been dumped above grade, buried and/or burned on the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	<input checked="" type="radio"/> No

NOTES:

20. Is there, or has there been in the past, a transformer, capacitor, or any hydraulic equipment for which there are any records indicating the presence of PCBs? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	<input checked="" type="radio"/> No

NOTES:

21. Are there currently any site operating records available for the property? (please provide documents if obtainable):

SITE OPERATING RECORD	YES	NO	N/A
Regulatory Permits and Records		<input checked="" type="checkbox"/>	
Material Safety Data Sheets		<input checked="" type="checkbox"/>	
Underground Utility Drawings		<input checked="" type="checkbox"/>	
Chemical Inventory and Storage		<input checked="" type="checkbox"/>	
Storage Tanks		<input checked="" type="checkbox"/>	
Environmental Monitoring Data		<input checked="" type="checkbox"/>	
Waste Management Records		<input checked="" type="checkbox"/>	
Process, Production and Maintenance Documents		<input checked="" type="checkbox"/>	
Spills and Discharges		<input checked="" type="checkbox"/>	
Emergency Response and Contingency Plans		<input checked="" type="checkbox"/>	
Environmental Audit Reports		<input checked="" type="checkbox"/>	
Facility Site Plans		<input checked="" type="checkbox"/>	

Phase One ESA Questionnaire

---

Date: Jan 25/2025

Signature of Assessor: D. Spurren

Name of Assessor: Luiz D. Gueren

Signature of Interviewee:-----

Name of Interviewee:-----

## PHASE ONE ESA QUESTIONNAIRE

Site Address: 60 AGNES ST- MISS L5B1T7	
Project #:	
Owner: SHAHIDA KHOKHAN	Occupant:
Interviewee:	Relation to Site:
Property and Building Description and Size:	

1. Has the property or an adjacent property(s) currently or previously been used for an industrial or commercial use? If yes, please specify activities and time frames.

Interviewee	Observed During Site Visit	
<input checked="" type="radio"/> Yes <input type="radio"/> No <input type="radio"/> Unknown	Yes	No

NOTES: AIR WINGS TRAVEL AND TOURS  
MARLIN TRAVEL

2. Are there or have there been in the past, any damaged or discarded automotive or industrial batteries, pesticides, paints, or other chemicals in the aggregate, stored on or used at the property or on any of the adjacent properties? If yes, please specify location.

Interviewee	Observed During Site Visit	
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes	No

NOTES:

3. Are there currently, or have there been in the past, any industrial containers of chemicals located on the property or on any of the adjacent properties? If yes, please specify location.

Interviewee	Observed During Site Visit	
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes	No

NOTES:

4. Are you aware or do you have any prior knowledge that fill material has been brought onto the property that originated from an unknown origin or contaminated site? If yes, please specify location.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes <input type="checkbox"/> No <input type="checkbox"/>

NOTES:

5. Has the property or any of the adjacent properties been used for the any of the following industries/activities/storage/related activities, either currently or historically (please mark where applicable):

AREA OF CONCERN	YES	NO	COMMENT
Chemicals	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Electrical Equipment	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Metal Smelting and/or Processing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Mining	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Milling	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Petroleum and Natural Gas Drilling/Production/Processing/Retailing and/or Distribution (Including Gasoline Station)	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Transportation	<input type="checkbox"/>	<input type="checkbox"/>	
Junkyard, waste disposal/landfill/waste treatment and/or Processing, Recycling	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Wood, Pulp and Paper Products	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Appliance Equipment and/or Engine Repair/Reconditioning/Salvage	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Ash Deposit from boilers and/or other Thermal Facilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Asphalt Tar Manufacturing	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Coal Gasification	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Medical/Chemical/Radiological and/or Biological Labs	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Rifle and/or Pistol Firing Ranges	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Road Salt Storage Facilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Dry Cleaning Facilities	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Commercial Printing Facilities and/or Photo Developing Laboratory	<input type="checkbox"/>	<input checked="" type="checkbox"/>	
Site which have been or are likely to have been contaminated by substances migrating from other properties.	<input type="checkbox"/>	<input checked="" type="checkbox"/>	

6. Are there currently, or have there been in the past, any pits, ponds, or lagoons located on the property in connection with waste treatment or waste disposal? If yes, please specify location.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/>

NOTES:

7. Is there currently any, or has there been in the past, stained soil on the property? If yes, please specify location.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/>

NOTES:

8. Are there currently, or have there been in the past, any registered or unregistered storage tanks (above or underground) located on the property? If yes, please specify location.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/>

NOTES:

9. Are there currently, or have there been in the past, any vent pipes, fill pipes, or access ways indicating a fill pipe protruding from the ground on the property or adjacent to any structure located on the property? If yes, please specify location.

Interviewee	Observed During Site Visit
Yes <input type="radio"/> No <input type="radio"/> Unknown <input checked="" type="radio"/>	Yes <input type="radio"/> No <input type="radio"/>

NOTES:

10. Is there currently, or have there been in the past, evidence of leaks, spills or staining by substances other than water, or foul odours, associated with any flooring, drains, walls, ceilings, or exposed grounds on the property? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	No

NOTES:

11. If the property is served by a private well or non-public water system, is there evidence or do you have prior knowledge that contaminants have been identified in the well or system that exceed guidelines applicable to the water system? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	No

NOTES:

12. If the property served by a private well or non-public water system, have there been in the past, any well designated as contaminated by any government environmental/health agency? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	No

NOTES:

13. Are you aware of any environmental liens or governmental notification relating to past or recurrent violations of environmental laws with respect to the property or any facility located on the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	No

NOTES:

14. Are you aware of current or past existence of hazardous substances or petroleum products with respect to the property or any facility located on the property? If yes, please specify.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes <input type="radio"/> No <input type="radio"/>

NOTES:

15. Are you aware of any current or past existence of environmental violations with respect to the property or any facility located on the property? If yes, please specify.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes <input type="radio"/> No <input type="radio"/>

NOTES:

16. Are you aware of any environmental site assessment of the property or facility that indicated the presence of hazardous substances or petroleum products on, or contamination of, the property or recommended further assessment of the property? If yes, please specify.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes <input type="radio"/> No <input type="radio"/>

NOTES:

17. Are you aware of any past, threatened, or pending lawsuits or administrative proceedings concerning a release or threatened release of any hazardous substance or petroleum products involving the property by any owner or occupant of the property? If yes, please specify.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes <input type="radio"/> No <input type="radio"/>

NOTES:

18. Does the property discharge wastewater (not including sanitary waste or storm water) onto or adjacent to the property and/or into a storm water system? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	No

NOTES:

19. Are you aware of any hazardous substances or petroleum products, unidentified waste materials, tires, automotive or industrial batteries, or any other waste materials that have been dumped above grade, buried and/or burned on the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	No

NOTES:

20. Is there, or has there been in the past, a transformer, capacitor, or any hydraulic equipment for which there are any records indicating the presence of PCBs? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	No

NOTES:

21. Are there currently any site operating records available for the property? (please provide documents if obtainable):

SITE OPERATING RECORD	YES	NO	N/A
Regulatory Permits and Records		<input checked="" type="checkbox"/>	
Material Safety Data Sheets		<input checked="" type="checkbox"/>	
Underground Utility Drawings		<input checked="" type="checkbox"/>	
Chemical Inventory and Storage		<input checked="" type="checkbox"/>	
Storage Tanks		<input checked="" type="checkbox"/>	
Environmental Monitoring Data		<input checked="" type="checkbox"/>	
Waste Management Records		<input checked="" type="checkbox"/>	
Process, Production and Maintenance Documents		<input checked="" type="checkbox"/>	
Spills and Discharges		<input checked="" type="checkbox"/>	
Emergency Response and Contingency Plans		<input checked="" type="checkbox"/>	
Environmental Audit Reports		<input checked="" type="checkbox"/>	
Facility Site Plans		<input checked="" type="checkbox"/>	

Phase One ESA Questionnaire

---

Date: 03 FEB 2025

Signature of Assessor: \_\_\_\_\_

Name of Assessor: \_\_\_\_\_

Signature of Interviewee: \_\_\_\_\_

Name of Interviewee: \_\_\_\_\_



4351 Hurontario St., Unit 13, Mississauga, ON L5R 1B9  
905.331.3731 • 905.643.5999  
info@g2sconsulting.com



2700 Hurontario St., Unit 411, Mississauga, ON L5A 4Z1  
905.768.4034 • 905.643.5999  
info@g2sconsulting.com

## PHASE ONE ESA QUESTIONNAIRE

Site Address: <b>66 AGNES ST, MISSISSAUGA, ON L5B1J7</b>	
Project #:	
Owner: <b>Daniel Pineda And Marita Pineda</b>	Occupant: <b>Edwina Pineda Marin</b>
Interviewee:	Relation to Site:
Property and Building Description and Size: <small>Legal Description</small> <b>Single-family detached (not on water)/Lot size : 34.17 ft x 167.97 ft x 50.16 ft x 131.66 ft x 115.18 ft x 36.18 ft x 130.82 ft</b>	

1. Has the property or an adjacent property(s) currently or previously been used for an industrial or commercial use? If yes, please specify activities and time frames.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes No

NOTES:

2. Are there or have there been in the past, any damaged or discarded automotive or industrial batteries, pesticides, paints, or other chemicals in the aggregate, stored on or used at the property or on any of the adjacent properties? If yes, please specify location.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes No

NOTES:

3. Are there currently, or have there been in the past, any industrial containers of chemicals located on the property or on any of the adjacent properties? If yes, please specify location.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes No

NOTES:

- |             |    |         |                            |    |
|-------------|----|---------|----------------------------|----|
| Interviewee |    |         | Observed During Site Visit |    |
| Yes         | No | Unknown | Yes                        | No |

NOTES:

- | AREA OF CONCERN  | YES | NO | COMMENT |
|--|-----|----|---------|
| Chemicals  |     | X  |         |
| Electrical Equipment   |     | X  |         |
| Metal Smelting and/or Processing   |     | X  |         |
| Mining   |     | X  |         |
| Milling  |     | X  |         |
| Petroleum and Natural Gas<br>Drilling/Production/Processing/Retailing<br>and/or Distribution (Including Gasoline<br>Station) |     | X  |         |
| Transportation   |     | X  |         |
| Junkyard, waste disposal/landfill/waste<br>treatment and/or Processing, Recycling  |     | X  |         |
| Wood, Pulp and Paper Products  |     | X  |         |
| Appliance Equipment and/or Engine<br>Repair/Reconditioning/Salvage   |     | X  |         |
| Ash Deposit from boilers and/or other<br>Thermal Facilities  |     | X  |         |
| Asphalt Tar Manufacturing  |     | X  |         |
| Coal Gasification  |     | X  |         |
| Medical/Chemical/Radiological and/or<br>Biological Labs  |     | X  |         |
| Rifle and/or Pistol Firing Ranges  |     | X  |         |
| Road Salt Storage Facilities   |     | X  |         |
| Dry Cleaning Facilities  |     | X  |         |
| Commercial Printing Facilities and/or<br>Photo Developing Laboratory   |     | X  |         |
| Site which have been or are likely to have<br>been contaminated by substances<br>migrating from other properties.            |     | X  |         |

## Phase One ESA Questionnaire

6. Are there currently, or have there been in the past, any pits, ponds, or lagoons located on the property in connection with waste treatment or waste disposal? If yes, please specify location.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes No

NOTES:

7. Is there currently any, or has there been in the past, stained soil on the property? If yes, please specify location.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes No

NOTES:

8. Are there currently, or have there been in the past, any registered or unregistered storage tanks (above or underground) located on the property? If yes, please specify location.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes No

NOTES:

9. Are there currently, or have there been in the past, any vent pipes, fill pipes, or access ways indicating a fill pipe protruding from the ground on the property or adjacent to any structure located on the property? If yes, please specify location.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes No

NOTES:

## Phase One ESA Questionnaire

10. Is there currently, or have there been in the past, evidence of leaks, spills or staining by substances other than water, or foul odours, associated with any flooring, drains, walls, ceilings, or exposed grounds on the property? If yes, please specify location.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/>

NOTES:

11. If the property is served by a private well or non-public water system, is there evidence or do you have prior knowledge that contaminants have been identified in the well or system that exceed guidelines applicable to the water system? If yes, please specify location.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/>

NOTES:

12. If the property served by a private well or non-public water system, have there been in the past, any well designated as contaminated by any government environmental/health agency? If yes, please specify location.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/>

NOTES:

13. Are you aware of any environmental liens or governmental notification relating to past or recurrent violations of environmental laws with respect to the property or any facility located on the property? If yes, please specify.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown <input type="radio"/>	Yes <input type="radio"/> No <input type="radio"/>

NOTES:

## Phase One ESA Questionnaire

14. Are you aware of current or past existence of hazardous substances or petroleum products with respect to the property or any facility located on the property? If yes, please specify.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes No

NOTES:

15. Are you aware of any current or past existence of environmental violations with respect to the property or any facility located on the property? If yes, please specify.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes No

NOTES:

16. Are you aware of any environmental site assessment of the property or facility that indicated the presence of hazardous substances or petroleum products on, or contamination of, the property or recommended further assessment of the property? If yes, please specify.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes No

NOTES:

17. Are you aware of any past, threatened, or pending lawsuits or administrative proceedings concerning a release or threatened release of any hazardous substance or petroleum products involving the property by any owner or occupant of the property? If yes, please specify.

Interviewee	Observed During Site Visit
Yes <input checked="" type="radio"/> No <input type="radio"/> Unknown	Yes No

NOTES:

## Phase One ESA Questionnaire

18. Does the property discharge wastewater (not including sanitary waste or storm water) onto or adjacent to the property and/or into a storm water system? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	No

NOTES:

19. Are you aware of any hazardous substances or petroleum products, unidentified waste materials, tires, automotive or industrial batteries, or any other waste materials that have been dumped above grade, buried and/or burned on the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	No

NOTES:

20. Is there, or has there been in the past, a transformer, capacitor, or any hydraulic equipment for which there are any records indicating the presence of PCBs? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	<input checked="" type="radio"/> No	Unknown	Yes	No

NOTES:

21. Are there currently any site operating records available for the property? (please provide documents if obtainable):

SITE OPERATING RECORD	YES	NO	N/A
Regulatory Permits and Records		<input checked="" type="checkbox"/>	
Material Safety Data Sheets		<input checked="" type="checkbox"/>	
Underground Utility Drawings		<input checked="" type="checkbox"/>	
Chemical Inventory and Storage		<input checked="" type="checkbox"/>	
Storage Tanks		<input checked="" type="checkbox"/>	
Environmental Monitoring Data		<input checked="" type="checkbox"/>	
Waste Management Records		<input checked="" type="checkbox"/>	
Process, Production and Maintenance Documents		<input checked="" type="checkbox"/>	
Spills and Discharges		<input checked="" type="checkbox"/>	
Emergency Response and Contingency Plans		<input checked="" type="checkbox"/>	
Environmental Audit Reports		<input checked="" type="checkbox"/>	
Facility Site Plans		<input checked="" type="checkbox"/>	

Phase One ESA Questionnaire

---

Date: 03/06/2025

Signature of Assessor: \_\_\_\_\_

Name of Assessor: \_\_\_\_\_

Signature of Interviewee: [Signature]

Name of Interviewee: Daniel Pineda

## PHASE ONE ESA QUESTIONNAIRE

Site Address:	
Project #:	
Owner:	Occupant:
Interviewee:	Relation to Site:
Property and Building Description and Size:	

1. Has the property or an adjacent property(s) currently or previously been used for an industrial or commercial use? If yes, please specify activities and time frames.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

2. Are there or have there been in the past, any damaged or discarded automotive or industrial batteries, pesticides, paints, or other chemicals in the aggregate, stored on or used at the property or on any of the adjacent properties? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

3. Are there currently, or have there been in the past, any industrial containers of chemicals located on the property or on any of the adjacent properties? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

## Phase One ESA Questionnaire

4. Are you aware or do you have any prior knowledge that fill material has been brought onto the property that originated from an unknown origin or contaminated site? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

### NOTES:

5. Has the property or any of the adjacent properties been used for the any of the following industries/activities/storage/related activities, either currently or historically (please mark where applicable):

AREA OF CONCERN	YES	NO	COMMENT
Chemicals			D/K
Electrical Equipment			D/K
Metal Smelting and/or Processing			D/K
Mining			D/K
Milling			D/K
Petroleum and Natural Gas Drilling/Production/Processing/Retailing and/or Distribution (Including Gasoline Station)			D/K
Transportation			D/K
Junkyard, waste disposal/landfill/waste treatment and/or Processing, Recycling			D/K
Wood, Pulp and Paper Products			D/K
Appliance Equipment and/or Engine Repair/Reconditioning/Salvage			D/K
Ash Deposit from boilers and/or other Thermal Facilities			D/K
Asphalt Tar Manufacturing			D/K
Coal Gasification			D/K
Medical/Chemical/Radiological and/or Biological Labs			D/K
Rifle and/or Pistol Firing Ranges			D/K
Road Salt Storage Facilities			D/K
Dry Cleaning Facilities		✓	
Commercial Printing Facilities and/or Photo Developing Laboratory			D/K
Site which have been or are likely to have been contaminated by substances migrating from other properties.			D/K

## Phase One ESA Questionnaire

6. Are there currently, or have there been in the past, any pits, ponds, or lagoons located on the property in connection with waste treatment or waste disposal? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

7. Is there currently any, or has there been in the past, stained soil on the property? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

8. Are there currently, or have there been in the past, any registered or unregistered storage tanks (above or underground) located on the property? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

9. Are there currently, or have there been in the past, any vent pipes, fill pipes, or access ways indicating a fill pipe protruding from the ground on the property or adjacent to any structure located on the property? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

## Phase One ESA Questionnaire

10. Is there currently, or have there been in the past, evidence of leaks, spills or staining by substances other than water, or foul odours, associated with any flooring, drains, walls, ceilings, or exposed grounds on the property? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

11. If the property is served by a private well or non-public water system, is there evidence or do you have prior knowledge that contaminants have been identified in the well or system that exceed guidelines applicable to the water system? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

12. If the property served by a private well or non-public water system, have there been in the past, any well designated as contaminated by any government environmental/health agency? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

13. Are you aware of any environmental liens or governmental notification relating to past or recurrent violations of environmental laws with respect to the property or any facility located on the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

14. Are you aware of current or past existence of hazardous substances or petroleum products with respect to the property or any facility located on the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

15. Are you aware of any current or past existence of environmental violations with respect to the property or any facility located on the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

16. Are you aware of any environmental site assessment of the property or facility that indicated the presence of hazardous substances or petroleum products on, or contamination of, the property or recommended further assessment of the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

17. Are you aware of any past, threatened, or pending lawsuits or administrative proceedings concerning a release or threatened release of any hazardous substance or petroleum products involving the property by any owner or occupant of the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

18. Does the property discharge wastewater (not including sanitary waste or storm water) onto or adjacent to the property and/or into a storm water system? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

19. Are you aware of any hazardous substances or petroleum products, unidentified waste materials, tires, automotive or industrial batteries, or any other waste materials that have been dumped above grade, buried and/or burned on the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

20. Is there, or has there been in the past, a transformer, capacitor, or any hydraulic equipment for which there are any records indicating the presence of PCBs? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

21. Are there currently any site operating records available for the property? (please provide documents if obtainable):

SITE OPERATING RECORD	YES	NO	N/A
Regulatory Permits and Records			✓
Material Safety Data Sheets			✓
Underground Utility Drawings			✓
Chemical Inventory and Storage			✓
Storage Tanks			✓
Environmental Monitoring Data			✓
Waste Management Records			✓
Process, Production and Maintenance Documents			✓
Spills and Discharges			✓
Emergency Response and Contingency Plans			✓
Environmental Audit Reports			✓
Facility Site Plans			✓

Phase One ESA Questionnaire

---

Date: 27 Jan 2025

Signature of Assessor:-----

Name of Assessor:-----

Signature of Interviewee: James Kong Poy

Name of Interviewee: JAMES KONG POY

### PHASE ONE ESA QUESTIONNAIRE

Site Address: 78 Agnes St. Mississauga	
Project #:	
Owner: Phamathie Meghan	Occupant:
Interviewee:	Relation to Site: owner
Property and Building Description and Size:	

1. Has the property or an adjacent property(s) currently or previously been used for an industrial or commercial use? If yes, please specify activities and time frames.

Interviewee			Observed During Site Visit	
<input checked="" type="radio"/> Yes	<input type="radio"/> No	<input type="radio"/> Unknown	Yes	No

NOTES: Daycare use

2. Are there or have there been in the past, any damaged or discarded automotive or industrial batteries, pesticides, paints, or other chemicals in the aggregate, stored on or used at the property or on any of the adjacent properties? If yes, please specify location.

Interviewee			Observed During Site Visit	
<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Unknown	Yes	No

NOTES:

3. Are there currently, or have there been in the past, any industrial containers of chemicals located on the property or on any of the adjacent properties? If yes, please specify location.

Interviewee			Observed During Site Visit	
<input type="radio"/> Yes	<input checked="" type="radio"/> No	<input type="radio"/> Unknown	Yes	No

NOTES:

Phase One ESA Questionnaire

4. Are you aware or do you have any prior knowledge that fill material has been brought onto the property that originated from an unknown origin or contaminated site? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

5. Has the property or any of the adjacent properties been used for the any of the following industries/activities/storage/related activities, either currently or historically (please mark where applicable):

AREA OF CONCERN	YES	NO	COMMENT
Chemicals		✓	
Electrical Equipment		✓	
Metal Smelting and/or Processing		✓	
Mining		✓	
Milling		✓	
Petroleum and Natural Gas			
Drilling/Production/Processing/Retailing and/or Distribution (Including Gasoline Station)		✓	
Transportation		✓	
Junkyard, waste disposal/landfill/waste treatment and/or Processing, Recycling		✓	
Wood, Pulp and Paper Products		✓	
Appliance Equipment and/or Engine Repair/Reconditioning/Salvage		✓	
Ash Deposit from boilers and/or other Thermal Facilities		✓	
Asphalt Tar Manufacturing		✓	
Coal Gasification			
Medical/Chemical/Radiological and/or Biological Labs		✓	
Rifle and/or Pistol Firing Ranges		✓	
Road Salt Storage Facilities		✓	
Dry Cleaning Facilities		✓	
Commercial Printing Facilities and/or Photo Developing Laboratory		✓	
Site which have been or are likely to have been contaminated by substances migrating from other properties.		✓	

Phase One ESA Questionnaire

6. Are there currently, or have there been in the past, any pits, ponds, or lagoons located on the property in connection with waste treatment or waste disposal? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

7. Is there currently any, or has there been in the past, stained soil on the property? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

8. Are there currently, or have there been in the past, any registered or unregistered storage tanks (above or underground) located on the property? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

9. Are there currently, or have there been in the past, any vent pipes, fill pipes, or access ways indicating a fill pipe protruding from the ground on the property or adjacent to any structure located on the property? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

Phase One ESA Questionnaire

10. Is there currently, or have there been in the past, evidence of leaks, spills or staining by substances other than water, or foul odours, associated with any flooring, drains, walls, ceilings, or exposed grounds on the property? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

11. If the property is served by a private well or non-public water system, is there evidence or do you have prior knowledge that contaminants have been identified in the well or system that exceed guidelines applicable to the water system? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

12. If the property served by a private well or non-public water system, have there been in the past, any well designated as contaminated by any government environmental/health agency? If yes, please specify location.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

13. Are you aware of any environmental liens or governmental notification relating to past or recurrent violations of environmental laws with respect to the property or any facility located on the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

Phase One ESA Questionnaire

14. Are you aware of current or past existence of hazardous substances or petroleum products with respect to the property or any facility located on the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

15. Are you aware of any current or past existence of environmental violations with respect to the property or any facility located on the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

16. Are you aware of any environmental site assessment of the property or facility that indicated the presence of hazardous substances or petroleum products on, or contamination of, the property or recommended further assessment of the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

17. Are you aware of any past, threatened, or pending lawsuits or administrative proceedings concerning a release or threatened release of any hazardous substance or petroleum products involving the property by any owner or occupant of the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

Phase One ESA Questionnaire

18. Does the property discharge wastewater (not including sanitary waste or storm water) onto or adjacent to the property and/or into a storm water system? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

19. Are you aware of any hazardous substances or petroleum products, unidentified waste materials, tires, automotive or industrial batteries, or any other waste materials that have been dumped above grade, buried and/or burned on the property? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

20. Is there, or has there been in the past, a transformer, capacitor, or any hydraulic equipment for which there are any records indicating the presence of PCBs? If yes, please specify.

Interviewee			Observed During Site Visit	
Yes	No	Unknown	Yes	No

NOTES:

21. Are there currently any site operating records available for the property? (please provide documents if obtainable): *property is lease to a daycare, owner have no record*

SITE OPERATING RECORD	YES	NO	N/A
Regulatory Permits and Records			
Material Safety Data Sheets			
Underground Utility Drawings			
Chemical Inventory and Storage			
Storage Tanks			
Environmental Monitoring Data			
Waste Management Records			
Process, Production and Maintenance Documents			
Spills and Discharges			
Emergency Response and Contingency Plans			
Environmental Audit Reports			
Facility Site Plans			