



Developer and Owner – WWOTC

**Online Course – Instructor Led
Chlorination and Disinfection Refresher**

November 26-27, 2024 (8:30 – 12:30 AST)

Course Objective / Description

This course is prepared as a chlorination and disinfection refresher for skilled water and wastewater utility operators and will cover the properties of chlorine, the reason for chlorination, as well as the safe handling of gas chlorine, dry calcium hypochlorite and liquid sodium hypochlorite.

What will be covered:

- The history of chlorination
- Why disinfect drinking water
- Waterborne microorganisms
- Drinking water disinfection using chlorine
- Breakpoint chlorination
- Factors that affect disinfection
- Commercial forms of chlorine
- Terms used in chlorination
- Other forms of disinfection
- Dosage calculations

Lesson	Description	Contact Hours
	Introduction/Overview of Objectives	0.5
Lesson 1	History of Chlorination	0.5
Lesson 2	Why Disinfect Drinking Water	0.5
Lesson 3	Waterborne Microorganisms	0.5
	Break	
Lesson 4	Drinking Water Disinfection Using Chlorine	0.75
Lesson 5	Breakpoint Chlorination	1.0
	Lunch	
Lesson 6	Factors that Affect Disinfection	0.5
Lesson 7	Commercial Forms of Chlorine	0.5
Lesson 8	Terms used in Chlorination	0.5

Lesson	Description	Contact Hours
	Break	
Lesson 9	Other Forms of Disinfection	0.5
Lesson 10	Calculations	0.75
	Review of Materials and then Exam	0.5
	Total Instruction/Contact Time:	7.0

CEU: 0.7

Chlorination and Disinfection Refresher

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Name: _____

Company: _____

Company Mailing Address _____

City, Province: _____ Postal Code: _____

Phone: _____ Email: _____

ACWWA Membership #: _____ WEF Membership #: _____

If no membership number is listed, you will be invoiced as a non-member. See pricing below.

Fee for ACWWA or WEF Members & Employees of UTILITY Members

Course: \$380.00 + \$57.00 HST (15%) = \$437.00

Fee for Non – Members

Course: \$400.00 + \$60.00 HST (15%) = \$460.00

Invoices will be sent to the address listed above.

PO number to be included on the invoice _____

Payment can be made by Visa, Master Card or cheque.

Card Holder's Name _____

Credit Card Number _____ Expiry _____

Signature _____

Email address for credit card receipt _____

Cheques should be made payable to:

ACWWA

PO Box 28141 · Dartmouth, NS · B2W 6E2

Phone 902-434-6002 Fax 902-435-7796