Consumer Confidence Report Guidance and Preparation Manual



Georgia Water Resources Branch Georgia Environmental Protection Division Georgia Department of Natural Resources

Prepared by:

The Georgia Water and Pollution Control Association





Revised: January 2002

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To: All Georgia Community Water Systems

Re: Consumer Confidence Report and Certification Form Submission Deadlines and Revised CCR Guidance and Preparation Manual

Effective September 19, 1998 all Georgia Community Water Systems(CWS) have been directed to provide an annual Consumer Confidence Report (CCR) to their customers and to GA EPD no later than July 1st of each year <u>on an ongoing basis</u>.

Over 1,600 Georgia Community Water Systems are affected by this regulation and over 248 million people will receive a CCR every year in the United States. The CCR contains information which will enable the public to make educated health related decisions concerning the consumption of their drinking water. The CCR may also include community related information from which consumers may gain additional insight into their water system operation. In both respects, the CCR is an excellent opportunity for all Georgia water systems to strengthen their customer base relationship.

Note: A duplicate copy of this report must be received by the Georgia Environmental Protection Division Drinking Water Program offices by the same deadline as your customers (July 1st of each year).

Note: <u>A *CCR Certification Form* must also be received by the GA EPD offices no later than October 1st of each year</u>. The address for submitting <u>both</u> your CCR and CCR Certification Form to the GA EPD is:

ATTN: Consumer Confidence Reports GA EPD Drinking Water Program Suite 1362 205 Jesse Hill Jr. Street SE Atlanta, GA 30334

Deadlines for CCR and Certification Form Submittal to GA EPD Offices

Deadline for Community Water System CCR Submittal to GA EPD offices (one hard-copy): July 1st of each year (received by)

Deadline for Consumer Delivery of CCR (public delivery or notice of availability provided to customers): July 1st of each year (received by)

Deadline for *CCR Certification Form* **Submittal to GA EPD offices**: October 1st of each year (received by)

For technical information on how to prepare your CCR and comply with this regulation, please contact the Georgia Water and Pollution Control Association at 770-618-8692, extension #15. GW&PCA has been contracted by the Georgia Environmental Protection Division (EPD) to provide technical assistance relative to the CCR.

If your water system has failed to maintain proper laboratory information, a duplicate copy may be obtained by sending a <u>written request</u> to the GA EPD address provided above.

<u>Special Note</u>: Failure to maintain proper chemical monitoring data for 10 years and microbiological monitoring for 5 years is a violation of the GA Rules for Safe Drinking Water and may result in a notice of violation being issued. It is imperative that water systems maintain current and accurate laboratory reports of their drinking water quality for regulatory and public purposes.

Table of Contents

v
Consumer Confidence Report Background
 Origin of the Safe Drinking Water Act Which Water Systems Are Required to Complete a CCR ? Key Dates for CCR Reporting and Certification General Overview of Information Required In a CCR Other Information Allowed in a CCR
Preparing to Present and Distribute Your CCR./Where Do I Start?
A. Formulating a Plan and Making Decisions
CCR Regulation Requirements
 6. Required Water System or Utility Information

	F. Special Requirements for Cryptosporidium and Radon	17
	G. Reporting of Voluntary Monitoring Efforts	17
	H. Compliance with Additional Drinking Water Regulations	18
	I. Required Education and Health Information	19
	J. Special Reporting for Nitrate, Arsenic, and Lead	20
	K. Trihalomethane Health Affects	22
<u>Chapter IV</u>	Proper Distribution of Your CCR to Customers	23 23
	B. CCR Certification	24
<u>Chapter V</u>	Additional Resources Available for Your CCR	25
<u>Chapter VI</u>	Tips and Tactics for a Great CCR	27

Appendices Index

Appendix A	Table of Regulated Contaminants with Required Health Effects Language	30
Appendix B	GA EPD Consumer Confidence Report EPD Certification Form	46
Appendix C	Sample CCR	47
Appendix D	GA EPD Written Consumer Confidence Report Template	49
Appendix E	Specific Guidance for Reporting Values of Detected Contaminants	52
Appendix F	Example Statement for Source Water Assessment Program	54
Appendix G	Mailing Waiver for CWS Serving <10,000 Consumers	55

Introduction

The Consumer Confidence Report (CCR) is required by [40 CFR part 141 Subpart O] as published by the Federal Environmental Protection Agency (EPA) on August 19, 1998. The information presented here, while based on the actual CCR Federal Code, does <u>not</u> serve as a replacement for the actual rule. Readers who perceive any discrepancies between this information and the official rule should always consult the actual published Federal Code. EPA and the Georgia Environmental Protection Division's Water Resources Branch (EPD) reserve the right to administer variations of this regulation on a case by case basis and as specific conditions warrant.

This manual has been developed in conjunction with the Georgia Water and Pollution Control Association (GW&PCA). It is a comprehensive guidance manual for use by all Georgia Community Water Systems (CWS) in constructing and distributing their CCR. Material is presented herein that details mandated language and information needed for compliance with the rule as well as development of a more holistic communications program for your organization. Additional information sources available on the construction of your CCR are listed in the appendices of this document.

Effective September 19, 1998 all CWS nationwide are directed to provide an annual Consumer Confidence Report or "Water Quality Report" to their customers no later than July 1st of each year. The CCR is, in essence, a public disclosure of information currently gathered by water systems for public safety compliance. **There are no additional monitoring procedures or parameters which need to be acquired in order to comply with this rule**. The CCR must, however, contain very specific information which will enable the public to make educated health related decisions concerning the consumption of their drinking water. The report is intended to be accurately and easily read by the average water customer. Intricate technical details are not necessary in the CCR as the customer should be able to obtain the information from the report in a timely manner.

Modifications to the rule are possible in the future. As additional parameters are added to the National Primary Drinking Water Regulations (NPDWR), these will in turn be included as reported constituents required for inclusion into the CCR. EPD will inform systems of any additional requirements added to the CCR rule as necessary.

The CCR is an excellent opportunity for community water systems to initiate or expand communication efforts with their customers. Information presented in a CCR has a potential to go far beyond simple "required health language" necessary for an informed public. Water purveyors throughout the State have the opportunity to educate and inform their customers on many issues such as local water protection, future operation upgrades, and community involvement, among others. The CCR is simply a public outreach tool developed to address this historically disregarded aspect of what has become the modern marketplace.

This manual follows a progression of general to more specific CCR information. Background is presented on the actual rule followed by a detailed examination of requirements necessary in a CWS's report. The appendices include a listing of regulated and unregulated contaminants, sample CCRs from which several design ideas and formats can be viewed, and the Georgia Environmental Protection Division CCR Certification Form.

Chapter I

Consumer Confidence Report Background

A. Origin of the Safe Drinking Water Act

The Safe Drinking Water Act (SDWA) was initially signed into law on December 16, 1974. Since that time numerous changes have occurred in the Act as new information has come forth and public needs have changed. The most recent modification to the SDWA occurred in 1996. At that time, President Clinton signed Amendments providing several additional avenues for public participation and information exchange with drinking water suppliers. One such avenue for this exchange is the Consumer Confidence Report (CCR). Several other avenues for increased public participation are included in the recently amended SDWA. Timely public notification of violations and participation in source water assessment planning are other areas that citizens are afforded additional input into their water system operations.

B. Which Water Systems Are Required to Complete a CCR ?

All new and existing Community Water Systems (CWS) that serve 25 or more residents on a year-round basis <u>or</u> have 15 or more service connections must prepare and distribute a CCR annually on an ongoing basis.

Examples of such systems include private communities, cities, municipalities, and mobile home parks. Also, any CWS that provides water to another CWS ("wholesaler") is responsible for providing all monitoring data and appropriate information necessary to complete a CCR to the ultimate retail distributor of that product. These "wholesaler" organizations are required to provide the "raw" data necessary for a CCR development unless other contractual arrangements are made. While the CCR regulation does not require the wholesaler to create a completed report for a retailer, it is in the best interest of both organizations that the CCR construction be a cooperative effort. An accurate and efficient communication of drinking water quality will be best achieved with a mutual CCR production in these situations. In some cases it would be entirely appropriate for the retailer to actually use the wholesaler's CCR with only minor modifications if it is the sole source of water for the retailer. Situations that are viewed as being unique or vague should contact EPD for more information if clarification is necessary.

C. When Must A Water System Distribute the CCR and Certification?

Key Dates for CCR Reporting							
Date CCR became effective	September 19, 1998						
"Raw data" must be delivered from wholesalers to retail distributors	April 1, Annually						
CCR must be delivered or made available to customers and an identical copy submitted to GA EPD Drinking Water Section offices	July 1, Annually						
CCR Certification Form delivered to GA EPD offices	October 1, Annually						

All CCRs should be delivered or made available (as appropriate) to your water customers and GA <u>EPD offices</u> no later than **July 1st annually**. Data from wholesalers to retailers is due no later than **April 1st** thus providing 3 months for CCR development by the ultimate water distributor or retailer. CCR Certification Forms that describe the delivery methods utilized and attest to the correctness of the data must also be received by EPD no later than **October 1st annually**.

For New Community Systems Only

For new CWS's, the CCR is due no later than July 1st after the first full **calendar year** in operation. For example: A CWS that began water service on June 15, 2001 would not incur a **full** calendar year of service until December 31, 2002. Subsequently, the first CCR would not be due until July 1, 2003 and annually thereafter.

D. General Overview of Information Required In a CCR

- □ Water System or Utility Information:
 - ~ Name and phone number of primary contact regarding the CCR
 - ~ Information for non-English speaking populations (if necessary)
 - ~ Information on public participation opportunities within the water system

Source Water Information:

- ~ Physical location, common name, and type of raw water source (location maps are encouraged but <u>not required</u>)
- ~ Systems are NOT required to list specific location points for wells, entry points,
- or treatment facilities if this may compromise the safety of the water
- ~ Availability of any source water assessments performed within last 5 years
- ~ Known source water susceptibility information (if any)

- **Required Definitions:**
 - ~ MCL, MCLG, MRDL, MRDLG, Variances, Exemptions, Action Level, Treatment Technique, or any other abbreviations used in the report

Level of Detected Contaminants Found in Finished Water:

- ~ Numerical values of detected **finished water quality parameters** (National Primary Drinking Water Standards)
- ~ Likely sources of any parameters which are detected above the minimum detection level
- ~ Health effects language relative to any parameters exceeding an MCL value
- ~ Information on *Cryptosporidium*, radon, and other contaminants, if applicable

Information on Compliance with Any Other Drinking Water Regulations:

~ Explanation of any violations relating to record keeping, reporting, treatment techniques, special permit conditions, variance or exemption violations, and Administrative Law Orders

 \sim Explanation of the nature of any such violations and any potential health effects associated with the violation

- ~ A description of the steps taken to prevent any violation from reoccurring
- □ Information on Any Variances or Exemptions:
 - ~ A description of the conditions which the system is operating under an exemption
- □ Verbatim Educational Information:
 - ~ Health effects language related to any detects of nitrate, arsenic, or lead at \geq 50% of the MCL or action level.
 - ~ *Cryptosporidium* notice for vulnerable populations
 - ~ Explanation of general contaminant presence in drinking water
- (A detailed explanation of each requirement is presented later in this manual)

E. Other Information Allowed In a CCR

As mentioned in the introduction, this manual describes both the mandatory requirements of the CCR as well as optional information that water organizations may want to include. CWS's are encouraged to tailor their report to local circumstances and conditions. Additional information can be included in the CCR provided it does not detract from the core intent of the rule. The citizenry may indeed benefit from information on a proposed upgrade to your treatment facility or distribution system. The public may also be interested in a new billing practice or pay rate structure. Other information that is appropriate for inclusion in a CCR would include local educational efforts on behalf of your utility, community outreach programs, local fund raising achievements, security measures or watershed protection programs such as *Keep American Beautiful or Adopt-a-Stream*.

CCR designers are encouraged to make a clear and concise initial statement attesting to the quality of their drinking water when applicable. If your organization met all of the appropriate testing protocols in the previous year, your CCR should represent this fact <u>first</u> and <u>foremost</u>. The goal of your CCR is a quick and accurate information exchange. The customer which only spends a few moments with your report should realize this aspect of your information at a minimum. A good example of an introductory statement in a CCR is :

Example Introduction Statement: The City of Whitefish Water Works is pleased to report that your community's drinking water met or exceeded all safety and quality standards set by the State of Georgia and EPA during the previous year. This 2001 Water Quality Report provides our customers with detailed accounts of all the monitoring and testing results gathered from water quality testing during the previous year. Our employees are committed to providing you with safe, dependable tap water on a year round basis and are proud to provide the enclosed information.

On the other hand, if your organization has issued a public notice in the past year notifying your customers of a potential hazard associated with the drinking water, an example introduction could be:

Example Introduction Statement: The City of Whitefish Water Works conducted over 360 tests for 92 potential contaminants in our drinking water during the previous year. Only four of those parameters were detected and only one was found at a level higher than EPA allows. As our public notice stated at the time, our water only temporarily exceeded drinking water standards for this parameter. For more information on this occurrence, see the additional information provided in this report. Whitefish Water Works is committed to providing a safe and dependable water source on a year round basis. Your operators are diligent in their efforts to not only meet but exceed federal and state guidance.

The CCR should not be viewed as an all inclusive communication strategy. It takes time and effort to develop and maintain a quality relationship with the public. Subsequent sections in this manual will provide additional ideas on how to foster and maintain a broader communication program with the public along with the CCR.

Chapter II

Preparing to Present and Distribute Your CCR / Where Do I Start?

A. Formulating a Plan and Making Decisions Up-Front

In order to construct your CCR in a timely and accurate manner, it is a good idea to formulate a structured approach to the project and gather the information you will need before starting. The following material presents ideas on how to plan for the construction and ultimate distribution of your CCR. A well-planned approach will help your system meet all of the CCR requirements while at the same time providing a positive public impression to your customers.

- A. The first task to accomplish in constructing a CCR is a complete understanding of what the **regulation requires** of your CWS. This will entail utilizing one if not several of the resources listed in the appendices of this manual. A complete comprehension of the CCR rule will diminish the time spent in all stages of your CCR project.
- B. Develop the **goals** for your water system. Is your report going to meet the minimum requirements of the regulation only, or does your system wish to include pictures and graphics to increase the public reception of your CCR? These goals will help with the next key task of budgeting for your CCR.
- C. Determining a **budget** may be difficult with the initial CCR. However, as your system becomes more experienced with developing the report, you will gain additional insight into what premium paper, multiple colors, and graphics will add to the cost of your publication. A moderate approach to colors and detailed graphics has been shown to have a positive impact on your public. Negative impacts can be expected from going "overboard" with a very expensive report that includes too much extraneous information. You are encouraged to keep the report simple yet professional.
- D. One of your initial undertakings should be the collection of all "raw data" to include in your CCR. This will entail a records search of all laboratory data received on your <u>finished water</u> <u>samples</u> taken during the calendar year in which you are reporting. Remember, some water quality parameters, which are required in the CCR, may not be tested for on an annual basis; therefore, your records search may have to go beyond the previous year. Note also that information over five years old may not be included in the report at all.
- E. Several other decisions relate to the actual **publication** and **distribution** of your CCR must be made. The following items should at least be addressed as they apply to your CWS:
 - i. Determine if you will use the skills of a graphic designer, mail house, or printer service for your project. Professional services can add to the appearance of an report but the are not ultimately necessary in order to comply with the CCR requirements.

- ii. Give consideration to using one of the Internet based CCR templates. If your system is not required to individually mail or deliver copies of the CCR to each customer, consider using the "fill in the blank" form included in the appendices of this manual.
- iii. Determine if your CCR will be formatted as a "bill stuffer" or mailed separately. An individual mailing may not be required of your water system. Check the minimum requirements before making this decision. You may certainly mail or deliver copies even if you are not required to do so by the regulation.
- iv. If your CCR is mailed separately, determine if your mailing will be first class or rural route. Address the positive and negatives aspects of both methods before making a decision. A rural route mailing will likely reach many people not directly served by your water system; however, this method will reach the "other" populations consuming water services but not receiving a water bill directly.
- v. If you mail your CCR directly to listed "customers" in your database, determine how you will reach the other water "consumers" in your area. This can be accomplished by hand carrying copies to apartment complexes, community buildings, etc.
- vi. Determine how you will duplicate your CCR in quantity if needed (in-house photocopy or professional printing).
- vii. Determine the number of CCRs that will be printed and allow extras for distribution at community events or by request from your customers. Copies are often distributed at open house events and public tours of municipal facilities.
- viii. Determine if you will mail all of your CCRs at one time or incrementally. In either case, all copies must reach the customer "in hand"by the appropriate deadline date.
- ix. Select individuals to proofread your CCR for accuracy and ease of understanding. The general public should be able to adequately ascertain the overall quality of tap water and services you provided during the previous year.

Chapter III

CCR Regulation Requirements

THE FOLLOWING INFORMATION IS <u>REQUIRED</u> TO BE PRESENTED IN <u>EVERY</u> COMMUNITY WATER SYSTEM CCR IN AN ACCURATE AND EASILY UNDERSTOOD MANNER. NOTE: SOME INFORMATION IS REQUIRED VERBATIM WITH NO MODIFICATIONS ALLOWED

A. <u>Required Water System or Utility Information</u>

- Identify the name of your Community Water System (CWS) and include a primary CCR contact for your organization. Include a phone number for this contact person and select an individual who can answer questions about the report and provide any additional information to the public. This person should be well informed about any source water assessments that have been performed in the watershed, as well as items of local interest that are included in the CCR. If the Customer Service or Billing Department of your system will be fielding calls from the public, make certain these individuals can direct callers to the appropriate employee.
- Make note of all opportunities in which the public has the option of participating in the decision making process at your organization as it relates to drinking water quality. Routinely scheduled committee or board meetings are an example of such occasions. If no schedule exists of these meetings, provide the public a means of acquiring the information as to when these meetings do occur.
- If your organization determines that the community served has a large portion of non-English speaking customers, your CCR must include either a statement expressing the importance of this report in the appropriate language or a telephone number and address where non-English speaking residents may contact your system to receive a translated CCR or receive information in this language.
- An example of such a statement would be:
 - English "This report contains very important information about your drinking water. Translate it, or speak with someone who understands it."
 - Spanish "Este informe contiene information muy importante. Traduscalo o hable con un amigo quien lo entienda bien".

B. <u>Required Source Water Information</u>

- ➢ Information on the source of water delivered through the distribution system should include the common name used in identifying this source (i.e. Upper Floridian Aquifer, Yellow River, etc.) Location maps are encouraged to provide customers with a complete understanding of source waters in your area, however, they are not required by regulation.
- The type of water source should also be identified, such as groundwater, surface water, or a mixture of the two (blended). If any or all of the finished water is provided from another supplier (wholesaler), the raw water source identified should be that of the supplier. While the CCR emphasizes almost exclusively finished water information, this material provides the public with a greater understanding of the "watershed principle." It is recommended that an easy to view graphic or map identify the location of the raw water source relative to the area served. In any respect, the common name must still be printed on a graphic representation of the source.
- All Georgia CWS'S will have a Source Water Assessment (SWA) completed by December 2003. If the assessment has been finalized for your system and has identified any significant sources of contamination, the CCR must provide a summary of the system's susceptibility based on this information. The CCR does <u>not</u> require specific disclosure of responsible parties noted in such a study. If completed, the system must also notify customers in the CCR that an assessment is publicly available and where to obtain a copy. If a SWA has not been completed for your system, see <u>Appendix F</u> for an example explanation statement.

C. <u>Required Definitions</u>

Each CCR must include the following <u>verbatim definitions</u> that customers will need to understand the information presented in the report. No modifications are allowed for these terms. They must be presented word for word with no changes permitted.

- **Maximum Contaminant Level (MCL)**: "The highest level of a contaminant that is allowed in drinking water. MCLs are set as close to the MCLGs as feasible using the best available treatment technology."
- **Maximum Contaminant Level Goal (MCLG)**: "The level of a contaminant in drinking water below which there is no known or expected risk to health. MCLGs allow for a margin of safety."
- **Maximum Residual Disinfectant Level (MRDL)**: "The highest level of a disinfectant allowed in drinking water. There is convincing evidence that addition of a disinfectant is necessary for control of microbiological contaminants."
- **Maximum Residual Disinfectant Level Goal (MRDLG)**: "The level of a drinking water disinfectant below which there is no known or expected risk to health. MRDLGs do not reflect the benefits of the use of disinfectants to control

microbial contaminants."

<u>If</u> your CCR contains information on a detected contaminant regulated by an action level or a treatment technique, the following verbatim definitions must be included.

- **Treatment Technique (TT)**: "A required process intended to reduce the level of a contaminant in drinking water."
 - **Action Level (AL)**: "The concentration of a contaminant which, if exceeded, triggers treatment or other requirements which a water system must follow."

<u>If</u> your system operated under any variances or exemptions during the year described in the CCR, the following verbatim definitions must be included. This is not to be confused with a monitoring waiver which is discussed below.

Variances and Exemptions: "State or EPA permission not to meet an MCL or a treatment technique under certain conditions."

D. <u>Required Detected Contaminants Table</u>

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This is the key technical portion of the CCR and often the most confusing for preparers. Here, CWSs will present to their customers information on all regulated contaminants covered under their drinking water permit. In general, this will include all parameters mandatory within the National Primary Drinking Water Regulation; however, each system should carefully review their individual permit for any additional reporting requirements, variances, or exemptions. Very specific guidance is given relating to the format in which this material is presented. The reason for such strict reporting guidelines is for the sake of comparison and clarity. Over 55,000 CWSs nationwide will be presenting this material on an annual basis and over 1,600 in Georgia. By ensuring a standardized format, accurate comparisons of finished water quality can be made between reports from many different organizations.

i. What Parameters Do I Include and Where Do I Obtain These Results?

The actual numerical value of each parameter that is reported in the CCR is the identical value which you report to EPD for finished drinking water compliance, whether it be a single maximum value, an average, <u>or</u> a range of values. A parameter result **must** be included in the table if it is detected at or above the minimum detection limit (MDL). Contaminants that are detected above the minimum detection level but below the MCL are <u>still required to be included in this table</u>. Contaminants that are not detected above the minimum detection value are not required to be included in the report. Many CWSs contract with the EPD State Drinking Water Laboratory for finished water quality analyses. These reports commonly represent the results of Inorganic Compounds as "less than" a numerical value (< ##) in many cases. If your laboratory report indicates a (<) symbol in the result column, this is considered by EPD as a below detection limit (BDL) amount and is <u>not required for reporting in the CCR</u>.

Special Laboratory Note For GA EPD Contracted Services: If your laboratory result displays "Surr QC Std" adjacent to a value, this analysis should NOT be included in your CCR as this is not a detected parameter in your finished drinking water. This is merely a laboratory quality control result and is used for verification of your analytical results.

The main detected contaminants table must <u>only</u> contain information and results associated with the following three classifications of contaminants:

1.) Regulated contaminants (parameters that are subject to a MCL, MRDL, treatment technique, or action level).

2.) Unregulated contaminants for which EPA or EPD requires monitoring under [40 CFR 141.40] (No MCL, action level, or treatment technique has been set).

3.) Disinfection by-products and finished water microbial contaminants (except *Cryptosporidium* and *Radon*) that must be monitored under the Information Collection Rule 40 CFR 141.142 and 141. 143 (ICR)

Special Note for ICR Data: This information must be reported for <u>only</u> 5 years from the date of the last sample or until the detected contaminant becomes regulated and subject to regular monitoring requirements, whichever comes first. This program is normally associated with the larger water systems in Georgia and only applies to specific cooperating utilities.

- ii. <u>Where Do I Obtain the Correct Data Needed For My Report?</u> The results needed for completing the CCR are normally taken from the laboratory monitoring reports issued by the GA EPD for your water system. If your water system does not contract with GA EPD for laboratory services, the results used for your water systems official compliance monitoring should be used. These reports include the Lead and Copper sampling program, monthly microbiological sampling, Volatile Organic Compounds (VOC's), Inorganic Compounds (IOC's), radiological sampling, and others. Please see *CCR Program Summary* (page iii) in this document for information on how to obtain duplicate copies of your lab results from GA EPD.
- iii. Location of Other Monitoring Results
 Reporting of any additional voluntary monitoring that your system performed <u>must be</u> presented in a different section of the report. If you decide to report on any secondary MCL parameters, these too should be presented outside of the main detected contaminants table. It is recommended that you organize any additional tables according to contaminant type, such as a separate table for microbial, inorganic, or sampling site information. NOTE: If you choose to list all of the contaminants for which your system monitored, but were not detected above the minimum detection limit, this must also be done <u>outside</u> the main detected contaminants table. It is ultimately up to each CWS to make a judgment on whether to list all of the non-detected contaminants in their CCR. At a minimum, systems are encouraged to

include narrative that describes the full extent of monitoring performed under current drinking water regulations to ensure the safety of community drinking water supplies.

iv. Information on Laboratory Monitoring Waivers

Many smaller systems operate under **monitoring waivers** and sample for certain drinking water parameters less than once per year. These systems must report information on contaminants detected in the most recent testing period. The CCR must also contain a brief statement explaining that the data presented is from the most recent testing performed and is in accordance with regulations. A statement could read:

"As authorized by Georgia EPD, our system has reduced monitoring requirements for certain contaminants to less often than once per year because the concentration of these contaminants are not expected to vary significantly from year to year. Some of our data though representative, is more than one year old."

E. <u>Construction Guidelines For the Detected Contaminants Table</u>

Several guidelines have been established to provide uniform structure and direction in creating the Detected Contaminants Table. These will allow the public to easily understand and follow the somewhat technical information presented here.

- i. <u>Units of Measurement in the Tables</u>: Any **detected parameter** found in your water system should be expressed in the **same** units as the corresponding MCL and MCLG for easy and direct comparison. The best method to accomplish an **easy** comparison of these values is by <u>expressing the MCL for each parameter as a number greater than 1.0</u>. For example, most contaminants are expressed in laboratory reports as mg/l, which is equivalent to the measure parts per million (ppm). It is more effective to compare an arsenic MCL level of 10 parts per billion (ppb) with a detected arsenic value of 0.95 ppb (See example below). This will mean your actual detected contaminant level (if any) could still be less than 1.0. However, as long as your MCL is > than 1.0, the comparison will be clearer to understand for your customers. Included in this guidance is <u>Appendix A</u> which shows the conversion factor necessary to express each possible MCL reported in your CCR as a number greater than 1.0.
- ii. <u>Abbreviations</u>: Remember also that the definition of any abbreviated notations used in your detected contaminants table, such as ppb, or ppm, should be included immediately following their use. An analogy such as the following, will aid your public in understanding what levels of measurement are actually being used in your CCR and what they actually equate to.
 - Example: *Parts per Billion (ppb): One part per billion is equivalent to one minute in 2,000 years or one penny in 10 million dollars.*

(Or): *Parts per Million (ppm): One part per million is equivalent to one minute in 2 years or one penny in 10 thousand dollars.*

Required Parameter Units For Easy Comparison (Example)

Inorganic Contaminant	MCL	MCLG	My Own Water System	Range of Detection	Violation
Arsenic (ppb)	10.0	10.0	0.95	nd - 2.2	NO

NOTE: ug/l = ppb =parts per billion

Difficult Parameter Unit Comparison

Inorganic Contaminant	MCL	MCLG	Great Water System	Range of Detection	Violation
Arsenic (ppm)	0.010	0.010	0.0095	nd - 0.0022	NO

NOTE: mg/l = ppm = parts per million

- iii. <u>Time Period of Data to Include</u>: Typically, the data presented in your CCR should be from the previous calendar year. If your system is operating under a laboratory monitoring waiver or your permit indicates sampling of any reported parameter at a frequency of less than once a year, your CCR should indicate this situation.
- iv. <u>NOTE FOR SMALL SYSTEMS</u>: If your water system monitors for a specific parameter only once every four years and the 2000 sample presented a detection of this parameter, your CCR should report that detected value in <u>each</u> subsequent CCR report until a current sample is taken. Remember that a sample result is representative of your water until another sample is taken. Many smaller water systems in Georgia operate under a reduced monitoring schedule and will necessarily report analyses that are over one year old.
- v. <u>Age of Data Results</u>. Data that is over <u>5</u> years old should not be reported in your CCR. This includes any voluntary or Information Collection Rule(ICR) monitoring efforts. In the case of ICR monitoring, a detected parameter should be reported for 5 years from the date it was taken or until the contaminant becomes regulated, whichever comes first. If your report does contain detected contaminant information that is not from the previous year, the table must indicate the date on which the sample was taken. The report should also include a narrative statement explaining that your system's sampling protocol follows regulated direction from the EPD. A sample statement is included in Section D iii.
- vi. <u>Progression Within the Detected Contaminants Table</u>. A good example of what the columns in your detected contaminants table should look like is included below. The first column should be the identification of the contaminant to be reported

(*Parameter*). This is followed by an abbreviation of the units used to describe the detected amount (*ppm/ppb*). Following this, columns should be designated to state the MCL, the MCLG, and the actual detected value of each contaminant found for your water system. If your detected parameter is regulated by a treatment technique and not an actual numerical value (such as turbidity), place "TT" in place of an MCL value in the table. If the parameter is regulated by an action level (such as Copper), then note the specific action level here as well. The range of detections found for each parameter should also be included in the table. Your results should all be in the <u>same units</u> for an equal comparison of values across the entire row. If any detected value constitutes a violation of drinking water regulation, a column indicating this should follow along with a description of the typical source of that contaminant. Regardless of the violation status of your parameter, <u>every detected value</u> is required to note the typical source of that contaminant.

Violation Notice: If a parameter is in violation of drinking water regulations, specific health affects language is <u>mandatory</u> and must be included in your CCR. <u>Appendix A</u> contains specific health affects language unique for each drinking water parameter. This information is mandatory for violations only and must be verbatim.

"Sample Detected Inorganic Contaminants Table"									
Parameter	MCL	MCLG	Cherrytown Water System	Range of detections	Sample Date	Violation	Typical Source of Contaminant		
Barium (ppm)	2.0	2.0	0.7	0.7	1997	NO	discharge of drilling waste and metal refineries		
Fluoride (ppm)	4.0	4.0	0.9	nd-0.9	1998	NO	water additive which promotes strong teeth		
Nitrate (ppm)	10.0	10.0	6.2	0.4-7.0	1998	NO	runoff from fertilizer use		

"Sample Detected Organic Contaminants Table"									
Parameter	MCL	MCLG	Cherrytown Water System	Range of detections	Sample Date	Violation	Typical Source of Contaminant		
Total Trihalomethanes (TTHMS/ppb)	100	n/a	73	25-135	1998	NO	by-product of drinking water chlorination process		

vii. <u>Values of Each Parameter to Include in the CCR.</u> As stated previously, the value reported in your CCR for a particular parameter should be <u>identical</u> to the value used in standard compliance reporting to GA EPD.

If compliance with the MCL is determined annually or less frequently such as chemical or inorganic contaminants, the CCR should report the highest detected value at any sampling point used <u>and the full range</u> of these detected values.

If compliance is determined by a running annual average of all samples taken from a

single sampling point include the highest average associated with your reporting time period and again, the range of detections. Refer to <u>Appendix E</u> for example scenarios on determining which value of a parameter to include in your CCR.

<u>Running Averages</u>. If compliance is determined by a running annual average of samples taken at all sampling points, indicate the highest average and the full range of ALL detected levels found over the year sampled. A example of such a reporting scenario would be total trihalomethanes (TTHM's).

Lead and Copper. Your CCR should note the **90th percentile value** received from the most recent round of sampling performed <u>if</u> it is a numerical value greater than zero. No other values or ranges pertaining to lead or copper are necessary in the report. The CCR should also report the number of sites that exceed the action level if any were found. It is **not** necessary to include any parametric data as it relates to lead and copper and will likely confuse your reader if added. Refer to *Scenario V* of <u>Appendix</u> <u>E</u> for a specific example of lead and copper reporting.

NOTE FOR SMALL SYSTEMS: It is very rare for <u>all sample sites</u> to report a detected Lead and/or Copper value of 0.0 ppb. This will almost assure that **a 90th percentile value** is needed in your CCR report. Only if <u>all sample sites</u> in the distribution system return a value of 0.0 for Lead and Copper will this information not be necessary in your CCR.

<u>Total Coliforms.</u> (Scenario I.) [For systems that collect less than 40 samples per month for total coliform compliance] Your CCR should note the highest <u>number</u> of positive samples collected in any one month.

<u>Total Coliforms</u>. (Scenario II.) [For systems that collect more than 40 samples per month for total coliform compliance] Your CCR should note the highest percentage of positive samples collected in any one month.

<u>Fecal Coliforms and E. coli</u>. Your CCR should include the number of positive samples taken for the reported year.

<u>Fluoride Sampling</u>: If your system adds fluoride to the finished water, report an annual average of the monthly fluoride monitoring results. (monthly fluoride results divided by 12). Also report the highest and lowest monthly average as your full range of detected values.

<u>Radiological Parameters</u>. If your water system detects beta particles in the finished tap water <u>at or below</u> 50 pCi/l, the CCR should report the actual detected amount as pCi/l. For ease of comparison, note "50" in the MCL column instead of the actual MCL of 4 mrem/year and include the following verbatim footnote. "*EPA considers 50 pCi/l to be the level of concern for beta particles*". If your system detects beta particles <u>above</u> 50 pCi/l you must determine the actual dose exposure level in the units mrem/year. This will entail determining the actual radioactive constituents present in

the finished water. Both the detected level and MCL must be reported as mrem/year in this scenario. Of course if your results indicated a value of 0.0 or "below detected level" then no radiological value would be include in your CCR.

<u>Turbidity</u>. (Scenario I.) If your system reports turbidity measurements as an MCL (you must install filtration but have not), include the highest monthly average for the CCR reporting period pursuant to 40 CFR 141.73.

<u>Turbidity</u> (Scenario II.) If your system reports turbidity as a treatment technique (your system has met all the criteria for avoiding filtration), include the highest turbidity level found in any given month (Pursuant to 40 CFR 141.71). If your system falls under Scenario II, you must also clearly explain the reasons for measuring turbidity. An example statement could be:

"Turbidity is a measure of the cloudiness of water. We monitor turbidity because it is a good indicator of water quality and the effectiveness of disinfectants."

<u>Turbidity</u> (Scenario III.) If your system reports turbidity as a treatment technique (your system <u>does</u> filter and uses turbidity as an indicator of filtration performance), include the highest single turbidity measurement that occurred over the CCR reporting period **and** the lowest monthly percentage of samples meeting the turbidity limits specified in 40 CFR 141.73 for the relevant filtration technology. Starting with the year 2003 CCR, turbidity should be reported based on the revised requirements specified in 40 CFR 141.173. Here again you must explain why you measure turbidity within your sampling protocol. Refer to (*Appendix E - Scenario VI*) for a specific example of turbidity reporting. An example explanation statement could be:

"Turbidity is a measure of the cloudiness of water. We monitor turbidity because it is a good indicator of the effectiveness of our filtration system."

- viii. <u>Sources Identified for ANY and ALL Detected Contaminants</u>. For <u>any</u> detected parameter noted in your table, the CCR must contain the likely source of that contaminant to the best of your knowledge. Typical sources for contaminants are listed in <u>Appendix A</u> of this document if your system is not certain or decides not to specifically identify an individual company or organization. The CCR does not require specific disclosure of responsible parties identified by a water system as a contaminant source.
- ix. <u>Clearly Identify any Exceedence of MCL, TT, MRDL's or AL.</u> Your CCR must present a clear indication of any drinking water limit violations. This could include a larger font, bold type, or asterisks adjacent to the notation. If a parameter is in violation of regulations, specific health affects language is <u>mandatory</u> and must be included in your CCR. <u>Appendix A</u> contains specific language unique for each drinking water parameter. This educational information is mandatory for violations only and must be verbatim. An explanation that describes the nature of the violation to include the length of occurrence and the actions your system took to remedy the

violation <u>must closely follow the table</u>. This explanation must also detail the actions your system has taken to prevent any additional occurrences.

x. <u>Multiple and Separate Distribution Systems</u>. If your water system distributes finished tap water from two or more sources that are **entirely** separate (from intake through treatment and to final tap), then your Detected Contaminants Table will necessarily have an additional column for <u>each</u> source. This holds true even in the case of significant distance between water sources and distribution areas. If no master valve or separate system is in place to <u>absolutely</u> distinguish between these sources, then your detected contaminants table will have one column for the detected parameters in your finished water. If multiple treatment and distribution systems are in place, it is advised that a written description or map of each area served be included in your CCR. This holds true in the case of a wholesale product serving part of your system area also. If no valve or easily distinguishable division is present between these sources, then your CCR will have one column in the Detected Contaminants Table. In any other scenario, your system is classified as a "blended water source" and no distinguishing should occur between these sources in your tables.

xi. <u>Unregulated or Additional Parameter Monitoring</u>.

If your water system has detected any "unregulated contaminants" for which Federal or State rules require monitoring, you should include the entire range and average value obtained during the CCR monitoring period. This sampling could be required by [40 CFR 141.40] for example. If these results indicate a potential public health concern, systems are encouraged to include health effects language addressing this occurrence. The Safe Drinking Water Hotline can provide additional information on health concern language at (800-426-4791) or information can be found at EPA's Internet site: <u>www.epa.gov/safewater/hfacts.html</u> For any additional monitoring results which your system includes in the CCR, it is recommended that an explanation be included that describes the purpose of such monitoring. An example statement could be the following.

"High Plains Water Utility monitors for unregulated parameters in order to assist EPA in determining where certain contaminants occur and whether additional regulations may be necessary."

"Sample Unregulated Contaminants Table"								
Parameter MCL MCLG			Anytown Water System	Range of detections	Sample Date	Violation		
Terbacil (ppm)	not regulated	not regulated	0.50	0.0-3.5	2001	MCL determination currently pending		

More information on the <u>revised Unregulated Contaminant Monitoring Rule</u> is presented at the end of <u>Appendix A</u> in this manual.

F. Special Reporting Requirements for Cryptosporidium and Radon

When addressing *Cryptosporidium (Crypto)*, it is important to remember that it is the only parameter for which source water monitoring results <u>must</u> be presented in the CCR if information is available. A narrative account of the findings should be presented in place of a numerical value. All other potential contaminants presented in the CCR are finished water parameters. If your CWS has conducted testing of *Crypto* either by voluntary monitoring or under the ICR and this testing indicates that *Crypto* is present in the source <u>or</u> finished water, your CCR <u>must</u> include the following:

1.) A summary of the monitoring results. Presenting actual numerical values for *Crypto* is optional. A narrative account of the sampling efforts is acceptable.

2.) An explanation of the significance of the results. This must include information addressing any public health concerns associated with these results, if any are present.

Crypto information may not be presented in the Detected Contaminants Table, but can be included elsewhere in the CCR.

If **radon** testing has been performed by your water system and these efforts have indicated the presence of radon in <u>finished</u> water, your CCR should include the following:

1.) The actual numerical monitoring results reported from laboratory analyses.

2.) An explanation of the significance of the results. This must include information addressing any public health concerns associated with these results if any are present.

If your CWS monitored for *Cryptosporidium* and/or radon and laboratory analyses did not detect these parameters, it is not necessary to discuss the monitoring efforts or any analytical results.

G. <u>Reporting Of Any Voluntary Monitoring Efforts (Other Contaminants)</u>

There are additional finished water parameters for which a CWS may monitor beyond the regulated minimum requirements. If these monitoring efforts have indicated the presence of other contaminants in your finished tap water <u>and</u> these results indicate a public health concern, it is strongly recommended to include the results in your CCR. It is ultimately up to each individual water system to decide the appropriateness of including this information in a CCR. It is, however, recommended that a system <u>only</u> report additional monitoring results if there is evidence of a public health concern. In order for your CWS to determine if any additional analytical results do indicate a health concern, call EPA's Safe Drinking Water Hotline at (800-426-4791) for more information. In general, EPA considers any parameter level detected above a proposed MCL or health advisory level to indicate a possible public health concern. If your additional monitoring does indicate such a situation, your CCR should include the following.

1.) The numerical results of the monitoring.

2.) An explanation of the significance of the results. This must include information addressing any public health concerns associated with these results and any proposed regulations.

H. Compliance with Additional Drinking Water Regulations

In addition to reporting any violations associated with the National Primary Drinking Water Regulation Maximum Contaminant Levels, your CCR must include a separate section reporting rule violations of the following type. As with an MCL violation, these scenarios require a narrative explanation of the occurrence, any associated adverse health effects associated with the violation, and steps taken by the CWS to correct the situation in clearly understandable language.

1.) Monitoring and reporting of compliance data. If your CWS did not take a sample on time and you received a violation, the report should indicate "health effects unknown". If your CWS took the samples on time and accurately, but failed to mail the results to EPD on time, there is no need to discuss any potential health effects.

2.) Record keeping of compliance and laboratory data.

3.) Violation of any terms associated with a variance, exemption, administrative order, or judicial order under which your CWS may be operating. If your system was operating under one of these scenarios during the CCR reporting period, you should include an explanation of the variance or exemption, the date it was issued, the reason it was granted, when it is up for renewal, and an explanation of action taken to correct the situation.

4.) Violations of treatment techniques include three different scenarios.

(Scenario I) Filtration and disinfection, or commonly known as Surface Water Treatment Rule requirements. A violation of microbiological limits is included in this scenario. If the situation is one of failure to install proper disinfection or filtration equipment, or there was a mechanical failure of such equipment, your CCR should include the following statement:

"Inadequately treated water may contain disease-causing organisms. These organisms include bacteria, viruses, and parasites, which can cause symptoms such as nausea, cramps, diarrhea, and associated headaches."

(Scenario II) Lead and copper corrosion control requirements can include several situations. If a violation is indicated for failure to meet corrosion control treatment, source water treatment, or lead service line requirements, the health effects language below must be included verbatim.

"Infants and children who drink water containing lead in excess of the action level could experience delays in their physical or mental development. Children could show slight deficits in attention span or learning abilities. Adults who drink this water over many years could develop kidney problems or high blood pressure." (Scenario III) Acrylamide and Epichlorohydrin treatment technique violations must include the following health effects language verbatim:

For Acrylamide:

"Some people who drink water containing high levels of Acrylamide over a long period of time could have problems with their nervous system or blood, and may have an increased risk of getting cancer."

For Epichlorohydrin:

"Some people who drink water containing high levels of epichlorohydrin over a long period of time could experience stomach problems, and may have an increased risk of getting cancer.

I. Required Education and Health Information

The following information is included in <u>all Consumer Confidence Reports</u> in order to provide the public with more information on contaminants which may reasonably be expected in both bottled water and treated potable water systems. It is not recommended CWS'S make direct comparisons between bottled water and tap water. Note that some of the following statements must be presented verbatim, while others have latitude for interpretation.

Explanation of Contaminants and Health Risks Found in Drinking Water: Your CCR <u>must</u> include the following statements verbatim with **no exceptions or modifications**.

1.) "Drinking water, including bottled water, may reasonably be expected to contain at least small amounts of some contaminants. The presence of contaminants does not necessarily indicate that water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the EPA's Safe Drinking Water Hotline (1-800-426-4791)."

Explanation of the Vulnerability of Some Populations to Contaminants: Your CCR must include the following statement verbatim with **no exceptions or modifications**.

2.) "Some people may be more vulnerable to contaminants in drinking water than the general population. Immuno-compromised persons such as persons with cancer undergoing chemotherapy, persons who have undergone organ transplants, people with HIV/AIDS or other immune system disorders, some elderly, and infants can be particularly at risk from infections. These people should seek advice about drinking water from their health care providers." EPA/CDC guidelines on appropriate means to lessen the risk of infection by Cryptosporidium and other microbial contaminants are available from the Safe Drinking Water Hotline (1-800-426-4791)."

<u>Basic Watershed Principles</u>: The following information informs the public of basic water quality principles which can ultimately affect the quality of drinking water in a community. **Your CWS can develop replacement language that is unique to your locale provided it conveys a similar message and is acceptable to GA EPD.** "The sources of drinking water (both tap water and bottled water) include rivers, lakes, streams, ponds, reservoirs, springs, and wells. As water travels over the surface of the land or through the ground, it dissolves naturally-occurring minerals and, in some cases, radioactive material, and can pick up substances resulting from the presence of animals or from human activity.

Contaminants that may be present in source water include the following:

- Microbial contaminants, such as viruses and bacteria that may come from sewage treatment plants, septic systems, agricultural livestock operations, and wildlife.
- Inorganic contaminants such as salts and metals, which can be naturally occurring or result from urban storm runoff, industrial or domestic wastewater discharges, oil and gas production, mining, or farming.
- Pesticides and herbicides, which may come from a variety of sources such as agriculture, urban stormwater runoff, and residential uses.
- Organic chemical contaminants, including synthetic and volatile organic chemicals, which are by-products of industrial processes and petroleum production, and can also come from gas stations, urban stormwater runoff, and septic systems.
- Radioactive contaminants, which can be naturally occurring or be the result of oil and gas production and mining activities.

In order to ensure that tap water is safe to drink, EPA prescribes regulations that limit the amount of certain contaminants in water provided by public water systems. Food and Drug Administration regulations establish limits for contaminants in bottled water which must provide the same protection for public health."

J. Special Reporting and Information Requirements for Nitrate, Arsenic, and Lead Note: Changes in Arsenic Reporting Effective 2002

EPA is granted the authority to require additional health information under the Safe Drinking Water Act. The Administrator has utilized this authority by including the following information regarding Nitrate, Lead, Arsenic, and Trihalomethanes. Note that certain portions of the following language must be included in your CCR based on finding these contaminants at specific levels. The required levels and the specific language for inclusion into your CCR (if appropriate) is as follows.

If the analysis of your *finished* tap water indicates:

1.) Nitrate at levels above 5mg/L (or ppm) but below 10 mg/L, then your CCR must include the following statement.

"Nitrate in drinking water at levels above 10 ppm is a health risk for infants of less than six months of age. High nitrate levels in drinking water can cause blue baby syndrome. Nitrate levels may rise quickly for short periods of time because of rainfall or agricultural activity. If you are caring for an infant, you should ask for advice from your health care provider." 2.) If **Arsenic** is detected above 10 i g/L (or ppb) but below 50 i g/L (or ppb), then your CCR must include the following statement.

"Some people who drink water containing arsenic in excess of the MCL over many years could experience skin damage or problems with their circulatory system, and may have an increased risk of getting cancer."

a.) If **Arsenic** is detected above 5 i g/L (ppb) and up to and including 10 i g/L (ppb), must include and informational statement similar to the following. A water system may only modify the Arsenic educational statement with GA EPD's express approval.

"While your drinking water meets EPA's standard for Arsenic, it does contain low levels of Arsenic. EPA's standard balances the current understanding of Arsenic's possible health affects against the cost of removing Arsenic from drinking water. EPA continues to research the health effects of low levels of Arsenic, which is a mineral known to cause cancer in humans at high concentrations and is linked to other health effects such as skin damage and circulatory problems."

3.) If **Lead** is detected above 15 i g/L (ppb) (the action level) in more than 5%, but up to and including 10% of the sites sampled, then your CCR **must include the following statement.**

NOTE FOR SMALL SYSTEMS: The following educational statement is <u>not required</u> for CWS that sample <20 lead sites per round. Appropriate language **is required** if a water system incurs a violation of the lead MCL(15 ppb). This health language is noted in (*Appendix A*) and must be included verbatim with no modifications.

"Infants and young children are typically more vulnerable to lead in drinking water than the general population. It is possible that lead levels at your home may be higher than that at other homes in the community as a result of materials used in your home's plumbing. If you are concerned about elevated levels of lead in your home's water, you may wish to have your water tested and flush your tap for 30 seconds to 2 minutes before using tap water. Additional information is available from the Safe Drinking Water Hotline (800-426-4791)."

If the language recommended above does not properly describe your CWS operations, it may be modified only with the express permission of GA EPD.

K. <u>Trihalomethane/Disinfection Byproduct Reporting and Require Health</u> <u>Affects Language</u>

The newly revised MCL for TTHMS included modification of the CCR rule and requires systems that exceed the revised MCL of 80 ppb for TTHMS, but are below the current MCL of 100 ppb, to include health affects language in their CCRs.

Community water systems that detect TTHMS above 0.080 mg/l (80 ppb) but below the current MCL of 100 ppb <u>as an annual average</u> must include the following statement verbatim with no exceptions or modifications:

"Some people who drink water containing trihalomethanes in excess of the MCL over many years may experience problems with their liver, kidneys, or central nervous systems, and may have an increased risk of getting cancer."

Special Notes on Future Disinfection Byproducts Rule Modifications

~ Due to promulgation of the Stage 1 Disinfection Byproducts Rule, all surface water systems and groundwater systems under the direct influence of surface water serving <u>more than 10,000</u> <u>population</u> must test for and report THMs as of January 1, 2002.

~ The THMs (chloroform, bromoform, bromodichloromethane and chlorodibromomethane) that are listed on your VOC laboratory report DO NOT need to be included in your CCR.

~ As of January 1, 2004, all surface water systems and groundwater systems under the direct influence of surface water serving less than 10,000 population must test for and report THMs.

~ The THMs (chloroform, bromoform, bromodichloromethane and chlorodibromomethane) that are listed on your VOC laboratory report DO NOT need to be included in your CCR.

~ As of January 1, 2004, ALL GROUNDWATER SYSTEMS REGARDLESS OF SIZE must test for and report on THMs if they disinfect their finished water.

The THMs (chloroform, bromoform, bromodichloromethane and chlorodibromomethane) that are listed on your VOC laboratory report DO NOT need to be included in your CCR.

Chapter IV

Proper Distribution of Your CCR to Customers

All Georgia Community Water Systems that have 15 or more service connections or 25 or more people served on a "full time basis" must develop an annual CCR and make it available upon request.

The specific distribution requirements of your CCR are dictated by the number of water **"consumers"** served by your water system. Water consumers are defined here as the **"population served**" by your water system, not the number of connected meters or houses. The latest U.S. Census information can be used in making this determination of consumers served, or an approximation can be calculated. The number of metered accounts on your water system can be multiplied by 2.4 to estimate the number of <u>consumers</u> served by your water system if no census information is available.

If your CWS serves less than 500 "consumers", you must at a minimum notify customers of the availability of the CCR through a mailed, delivered, or posted notice. This notice should state at least once a year that a complete CCR can be obtained upon request. Examples of such notifications are individual door hangers, leaflets, or newsletters. An individual CCR mailing or delivery can still be performed but is not required for this size system.

If your CWS serves between 500 and 10,000 "consumers", Georgia Governor Roy Barnes has approved a special mailing variance. These systems have been granted a waiver for the individual mailing option. They are not required to directly mail an individual CCR to each customer; however, if your system chooses this option, you must pursue <u>all</u> of the following avenues to reach your water customers. A copy of this waiver is included as <u>Appendix F</u> in this document. If you do not individually mail your CCR to the system, you must:

- Publish the fully completed CCR in one or more local newspapers on one day for one occurrence.
- ➢ Inform customers by notification (newspaper or separate notice) that individual reports will <u>not</u> be mailed but are available upon request.

For CWS's that serve more than 10,000 consumers, one copy of the CCR must be directly delivered to <u>each</u> of its water system customers. Customers are defined as the listed accounts on file that receive a bill for water services in a community. For systems serving over 10,000 consumers, it is also necessary to make a "good faith effort" to reach other water consumers who do not directly receive a water bill. Examples of such cases would include apartment complexes, modular home developments, renters, or dormitories. A listing of appropriate method(s) to convey the CCR information to this portion of your community includes but is not limited to the following (Georgia CWS's must use at least three):

- posting your CCR on the Internet
- issuing press releases to local media outlets indicating the CCR is available
- mailing the report to all postal patrons in your community (rural route)
- delivering door hanger reports by meter readers
- advertising the availability of your CCR on TV, radio, and newspaper
- publishing the report in a local newspaper
- posting the report in public places such as libraries, churches, schools, etc.
- delivering a quantity of reports to single billed customers such as apartments, etc.
- delivering the report to community organization or civic clubs

Georgia CWS's serving more than 100,000 consumers are required to post their report on the Internet. All other systems are encouraged to post their reports on the Internet as well, but are not required to do so. If your individual system does not have an Internet site, many local governments and community organizations can provide this resource for you to utilize. EPA will provide links to CWS Internet sites of which it is aware at <u>www.epa.gov/safewater/</u>.

Your CCR must be kept on file at your facility for <u>at least three years</u> and made available to the public upon request. GA EPD inspectors have included the CCR on routine checklists for regulatory compliance.

NOTE: In addition to the public mailing or notification, it is a requirement that <u>all</u> CWS's, regardless of size, <u>send a final copy of the CCR to the GA EPD offices by the July 1st deadline (received by)</u> <u>each year.</u>

B. <u>CCR Certification Requirements</u>

In addition, a CCR Certification Form must also be sent to the GA EPD offices <u>no later than</u> <u>October 1st (received by) each year</u>. This certification statement will attest to the accuracy and distribution of your report. A sample certification statement and the appropriate address is included in (Appendix B) of this guidance manual.

Chapter V

Additional Resources for Your CCR

Numerous other resources are available to provide additional insight and information concerning the CCR. The information gathered from the private independent sources listed below should not be construed as official recommendations or positions taken by EPA, GA EPD, or GW&PCA. These sources can however, provide additional perspectives and guidance as it relates to a water system communication strategy. These sources can also provide media items such as Internet-based templates and public service items to include in your CCR distribution program.

EPA (U.S. Environmental Protection Agency)

- The following information is provided at EPA's Office of Ground Water and Drinking Water home page (http://www.epa.gov/safewater/ccr1.html) and can be obtained via the Internet:

- Copies of the Consumer Confidence Report Federal Register Code. (40 CFR Part 141 and 142. National Primary Drinking Water Regulation: Consumer Confidence Reports; Final Rule). This is the official EPA code available for download from EPA.

- *Preparing Your Drinking Water Consumer Confidence Report "Guidance for water suppliers"* EPA document #EPA 816-R-01-03. Office of Water This document is another CCR guidance and preparation manual available for download from EPA.

Special comments and regulatory update notices relating to the CCR.

Public service announcement materials: EPA has released a series of radio and print advertisements that water suppliers and others may use to encourage consumers to take advantage of consumer confidence reports and other information about their drinking water. This material is available for preview on the Internet and hard copies are available by contacting the Safe Drinking Water Hotline.

CCRWriter software has been developed to help water suppliers create their own CCR electronically. *CCRWriter* (version 1.5) is available at the time of this publication and is available for download.

Translation statements have been posted in numerous languages at this site.

The updated and current (Appendix A) to the CCR rule is posted at this location.

■ GA EPD (Georgia Environmental Protection Division)

- EPD's homepage (www.dnr.state.ga.us/dnr/environ) provides current information concerning the GA CCR program to include special notices and download capabilities of this guidance document.

GW&PCA (Georgia Water and Pollution Control Association)

- The Association's web site (www.gwpca.org) has additional information on CCR training available at GW&PCA Seminars and Conferences. Sample CCRs from other water systems across the nation can also be viewed at this Internet location. The Association has staff personnel dedicated to providing assistance to Community Water Systems in the construction of their CCR. For assistance or more information, call GW&PCA at (770) 618-8690.

A *CCR Update Page* (www.gwpca.org/ccr/update1.html) is also available at this site with the latest available technical information and downloads of this document. This site also includes information on the top ten CCR questions and common mistakes found in Georgia reports.

■ **AWWA** (American Water Works Association)

- The American Water Works Association is a national organization which provides technical support and training for water utilities across the United States. This organization provides the following support for CCR construction and compliance:

~ Internet template. <u>www.ccrbuilder.com</u> is an Internet-based template designed to prompt water systems for appropriate information in order to facilitate a CCR construction. The site currently has a fee of \$75 per year or \$220 for a three year subscription.

~ CCR Guidance Manual. AWWA has developed a guidance manual *"Preparing Consumer Confidence Reports"* to aid in constructing a CCR and integrating the report into a general communication plan.

~ CCR video and public service announcements. AWWA has developed a 20minute video and 60-second public service announcement to communicate the basics about the CCR to community groups and the public. This material can be obtained from the AWWA bookstore at (800) 927-7337.

Chapter VI

Tips and Tactics For A Great Consumer Confidence Report!

This chapter will present recommendations from several different organizations and agencies that have performed research into CCR marketing and public acceptance. The following material does not imply an endorsement by EPA or GA EPD. Other recommendations are included from water utilities that have previous experience in developing and marketing their own CCR.

- Make reference to your report as a "water quality report" and not a "consumer confidence report."
- ♦ Keep your CCR simple and concise. The objective is to get the key information of your report across as quickly and efficiently as possible. A good rule of thumb to consider is the 5/15 rule. Your average customer will spend, on average five seconds to determine whether to read the report or dismiss it, and another fifteen seconds interpreting the information.
- Utilize graphics and photos only if relevant. If you do use photographs, try and incorporate your own employees into the report. The public is interested in seeing real people performing actual water quality tasks in their community.
- Strive to make your CCR understandable to the average customer. Have several individuals outside of the water industry review your report and provide feedback on its clarity.
- Initiate your report with an opening statement summarizing the core aspects of the contents. This should include a description of the results as they relate to the federal and state standards.
- Endeavor to present your CCR professionally but without an inordinate amount of extras. Your customers will be receptive to neatly presented graphics and colors; however, glossy booklets and large foldout maps could be viewed as a waste of water system resources.
- Utilize a combination of narrative text and tables. Tables can break up lengthy rows of text and convey technical information in a concise and easy-to-follow format.
- Refrain from using very small text in your tables and definitions. This can be construed by your customers as misleading or avoiding potentially negative information.
- Advertise your report in advance. Make note of the report availability on your bill or include a statement as a "bill stuffer." Utilize public service announcements or radio

spots to announce the arrival of your report.

- Post your CCR on the CWS Home Page even if your organization is not required to do so. An increasing number of individuals are obtaining information from the Internet. This also gives potential residents in your community an easy avenue in which to learn more about the quality of your water.
- Provide a location map clearly identifying the source of your raw water. Many customers are interested in the proximity of your treatment works in relation to well known landmarks in your community.
- You may decide to include a description of the treatment process used by your CWS. A graphical representation can be a very useful method in providing an easy-tounderstand description.
- Include information on parameters of particular interest in your community. Provided this material is not overly lengthy, contaminants on which you receive repeated inquiries may be included in the CCR if appropriate.
- Educate not only the specific person noted on your CCR for more information, but all of your "customer contact" employees. Meter readers, surveyors, and any other employees who have the opportunity to speak with the public should be informed of what the CCR is and who to seek for more information.
- Remember that the CCR is only part of an effective communications plan for a water system. Previous perceptions of your water system and its current customer base relationship will play a large part in determining how the public reacts to your CCR. A broader strategy of community involvement and communication exchange with your system will only strengthen the effectiveness of your CCR.
- Request feedback on your CCR from customers and employees. This will enable you to improve the effectiveness and clarity of subsequent CCRs in the future.
- Set a good environmental example by using recycled paper for printing your report.
- Water systems are no longer required to provide the specific location of their water intakes, wells, treatment plants, etc. if they feel this information would compromise the safety of their system.

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APPENDIX A - REGULATED CONTAMINANTS AND REQUIRED HEALTH AFFECTS LANGUAGE

Table Key:

AL: Action Level	mrem/year: millirems per year (a measure of	ppb : parts per billion, or micrograms per
MCL: Maximum Contaminant Level	radiation absorbed by the body)	liter (µg/l)
MCLG: Maximum Contaminant Level	N/A: Not Applicable	ppt : parts per trillion, or nanograms per
Goal	NTU: Nephelometric Turbidity Units (a	liter
MFL: million fibers per liter	measure of water clarity)	ppq : parts per quadrillion, or picograms per
MRDL: Maximum Residual Disinfectant	pCi/l : picocuries per liter (a measure of	liter
Level	radioactivity)	TT: Treatment Technique
MRDLG: Maximum Residual Disinfectant	ppm : parts per million, or milligrams per liter	
Level Goal	(mg/l)	

Contaminant (units)	Traditional MCL in mg/L	To convert for CCR, multiply by	MCL in CCR units	MCLG	Major Sources in Drinking Water	Health Effects Language
Total Coliform Bacteria	MCL: (for sy than or equal the MCL = % tested as post MCL: (for sy 40 samples p positive mon	vstems that colle to 40 samples p 65 of monthly sa itive vstems that colle per month) the M thly sample	ct greater per month) amples ct less than ICL = 1	0	Naturally present in the environment	Coliforms are bacteria that are naturally present in the environment and are used as an indicator that other, potentially harmful, bacteria may be present. Coliforms were found in more samples than allowed and this was a warning of potential problems.

Contaminant (units)	Traditional MCL in mg/L	To convert for CCR, multiply by	MCL in CCR units	MCLG	Major Sources in Drinking Water	Health Effects Language
Fecal coliform and <i>E. coli</i>	0	-	0	0	Human and animal fecal waste	Fecal coliforms and <i>E. coli</i> are bacteria whose presence indicates that the water may be contaminated with human or animal wastes. Microbes in these wastes can cause short-term effects, such as diarrhea, cramps, nausea, headaches, or other symptoms. They may pose a special health risk for infants, young children, some of the elderly, and people with severely compromised immune systems.
Total organic carbon (ppm)	TT	_	TT	n/a	Naturally present in the environment	Total organic carbon (TOC) has no health effects. However, total organic carbon provides a medium for the formation of disinfection byproducts. These byproducts include trihalomethanes (THMs) and haloacetic acids (HAAs). Drinking_water containing these byproducts in excess of the MCL may lead to adverse health effects, liver or kidney problems, or nervous system effects, and may lead to an increased risk of getting cancer.
Turbidity (NTU)	TT	_	TT	n/a	Soil runoff	Turbidity has no health effects. However, turbidity can interfere with disinfection and provide a medium for microbial growth. Turbidity may indicate the presence of disease- causing organisms. These organisms include bacteria, viruses, and parasites that can cause symptoms such as nausea, cramps, diarrhea and associated headaches.

Contaminant (units)	Traditional MCL in mg/L	To convert for CCR, multiply by	MCL in CCR units	MCLG	Major Sources in Drinking Water	Health Effects Language					
Radioactive Conta	Radioactive Contaminants										
Beta/photon emitters (mrem/yr)	4 mrem/yr	-	4	0	Decay of natural and man- made deposits	Certain minerals are radioactive and may emit forms of radiation known as photons and beta radiation. Some people who drink water containing beta particle and photon radioactivity in excess of the MCL over many years may have an increased risk of getting cancer.					
Alpha emitters (pCi/l)	15 pCi/l	-	15	0	Erosion of natural deposits	Certain minerals are radioactive and may emit a form of radiation known as alpha radiation. Some people who drink water containing alpha emitters in excess of the MCL over many years may have an increased risk of getting cancer.					
Combined radium (pCi/l)	5 pCi/l	-	5	0	Erosion of natural deposits	Some people who drink water containing radium 226 or 228 in excess of the MCL over many years may have an increased risk of getting cancer.					
Uranium (pCi/L) ** effective Dec 8, 2003	30µg/1	-	30	0	Erosion of natural deposits	Some people who drink water containing uranium in excess of the MCL over many years may have an increased risk of getting cancer and kidney toxicity.					
Inorganic Contam	inants (IOC'	s)									
Antimony (ppb)	.006	1000	6	6	Discharge from petroleum refineries; fire retardants; ceramics; electronics; solder	Some people who drink water containing antimony well in excess of the MCL over many years could experience increases in blood cholesterol and decreases in blood sugar.					

Contaminant (units)	Traditional MCL in mg/L	To convert for CCR, multiply by	MCL in CCR units	MCLG	Major Sources in Drinking Water	Health Effects Language
Arsenic (ppb)	0.01 ¹	1000	10 ¹	0 ¹	Erosion of natural deposits; Runoff from orchards; Runoff from glass and electronics production wastes	Some people who drink water containing arsenic in excess of the MCL over many years could experience skin damage or problems with their circulatory system, and may have an increased risk of getting cancer.
Asbestos (MFL)	7 MFL	-	7	7	Decay of asbestos cement water mains; Erosion of natural deposits	Some people who drink water containing asbestos in excess of the MCL over many years may have an increased risk of developing benign intestinal polyps.
Barium (ppm)	2	_	2	2	Discharge of drilling wastes; Discharge from metal refineries; Erosion of natural deposits	Some people who drink water containing barium in excess of the MCL over many years could experience an increase in their blood pressure.
Beryllium (ppb)	.004	1000	4	4	Discharge from metal refineries and coal-burning factories; Discharge from electrical, aerospace, and defense industries	Some people who drink water containing beryllium well in excess of the MCL over many years could develop intestinal lesions.
Cadmium (ppb)	.005	1000	5	5	Corrosion of galvanized pipes; Erosion of natural deposits; Discharge from metal refineries; Runoff from waste batteries and paints	Some people who drink water containing cadmium in excess of the MCL over many years could experience kidney damage.
Chromium (ppb)	.1	1000	100	100	Discharge from steel and pulp mills; Erosion of natural deposits	Some people who use water containing chromium well in excess of the MCL over many years could experience allergic dermatitis.

¹These arsenic values are effective January 23, 2006. Until then, the MCL is 0.05mg/l and there is no MCLG.

Contaminant (units)	Traditional MCL in mg/L	To convert for CCR, multiply by	MCL in CCR units	MCLG	Major Sources in Drinking Water	Health Effects Language
Copper (ppm)	AL=1.3	-	AL=1.3	1.3	Corrosion of household plumbing systems; Erosion of natural deposits; Leaching from wood preservatives	Copper is an essential nutrient, but some people who drink water containing copper in excess of the action level over a relatively short amount of time could experience gastrointestinal distress. Some people who drink water containing copper in excess of the action level over many years could suffer liver or kidney damage. People with Wilson's Disease should consult their personal doctor.
Cyanide (ppb)	.2	1000	200	200	Discharge from steel/metal factories; Discharge from plastic and fertilizer factories	Some people who drink water containing cyanide well in excess of the MCL over many years could experience nerve damage or problems with their thyroid.
Fluoride (ppm)	4	-	4	4	Erosion of natural deposits; Water additive which promotes strong teeth; Discharge from fertilizer and aluminum factories	Some people who drink water containing fluoride in excess of the MCL over many years could get bone disease, including pain and tenderness of the bones. Fluoride in drinking water at half the MCL or more may cause mottling of children's teeth, usually in children less than nine years old. Mottling, also known as dental fluorosis, may include brown staining and/or pitting of the teeth, and occurs only in developing teeth before they erupt from the gums.
Lead (ppb)	AL=.015	1000	AL=15	0	Corrosion of household plumbing systems; Erosion of natural deposits	Infants and children who drink water containing lead in excess of the action level could experience delays in their physical or mental development. Children could show slight deficits in attention span and learning abilities. Adults who drink this water over many years could develop kidney problems or high blood pressure.

Contaminant (units)	Traditional MCL in mg/L	To convert for CCR, multiply by	MCL in CCR units	MCLG	Major Sources in Drinking Water	Health Effects Language
Mercury [inorganic] (ppb)	.002	1000	2	2	Erosion of natural deposits; Discharge from refineries and factories; Runoff from landfills; Runoff from cropland	Some people who drink water containing inorganic mercury well in excess of the MCL over many years could experience kidney damage.
Nitrate (ppm)	10	-	10	10	Runoff from fertilizer use; Leaching from septic tanks, sewage; Erosion of natural deposits	Infants below the age of six months who drink water containing nitrate in excess of the MCL could become seriously ill and, if untreated, may die. Symptoms include shortness of breath and blue baby syndrome.
Nitrite (ppm)	1	-	1	1	Runoff from fertilizer use; Leaching from septic tanks, sewage; Erosion of natural deposits	Infants below the age of six months who drink water containing nitrite in excess of the MCL could become seriously ill and, if untreated, may die. Symptoms include shortness of breath and blue baby syndrome.
Selenium (ppb)	.05	1000	50	50	Discharge from petroleum and metal refineries; Erosion of natural deposits; Discharge from mines	Selenium is an essential nutrient. However, some people who drink water containing selenium in excess of the MCL over many years could experience hair or fingernail losses, numbness in fingers or toes, or problems with their circulation.
Thallium (ppb)	.002	1000	2	0.5	Leaching from ore- processing sites; Discharge from electronics, glass, and drug factories	Some people who drink water containing thallium in excess of the MCL over many years could experience hair loss, changes in their blood, or problems with their kidneys, intestines, or liver.
Synthetic Organic	c Contaminan	ts including P	esticides an	d Herbic	ides (SOC's)	
2,4-D (ppb)	.07	1000	70	70	Runoff from herbicide used on row crops	Some people who drink water containing the weed killer 2,4-D well in excess of the MCL over many years could experience problems with their kidneys, liver, or adrenal glands.

Contaminant (units)	Traditional MCL in mg/L	To convert for CCR, multiply by	MCL in CCR units	MCLG	Major Sources in Drinking Water	Health Effects Language
2,4,5-TP [Silvex](ppb)	.05	1000	50	50	Residue of banned herbicide	Some people who drink water containing silvex in excess of the MCL over many years could experience liver problems.
Acrylamide	TT	-	TT	0	Added to water during sewage/ wastewater treatment	Some people who drink water containing high levels of acrylamide over a long period of time could have problems with their nervous system or blood, and may have an increased risk of getting cancer.
Alachlor (ppb)	.002	1000	2	0	Runoff from herbicide used on row crops	Some people who drink water containing alachlor in excess of the MCL over many years could have problems with their eyes, liver, kidneys, or spleen, or experience anemia, and may have an increased risk of getting cancer.
Atrazine (ppb)	.003	1000	3	3	Runoff from herbicide used on row crops	Some people who drink water containing atrazine well in excess of the MCL over many years could experience problems with their cardiovascular system or reproductive difficulties.
Benzo(a)pyrene [PAH] (nanograms/l)	.0002	1,000,000	200	0	Leaching from linings of water storage tanks and distribution lines	Some people who drink water containing benzo(a)pyrene in excess of the MCL over many years may experience reproductive difficulties and may have an increased risk of getting cancer.
Carbofuran (ppb)	.04	1000	40	40	Leaching of soil fumigant used on rice and alfalfa	Some people who drink water containing carbofuran in excess of the MCL over many years could experience problems with their blood, or nervous or reproductive systems.
Chlordane (ppb)	.002	1000	2	0	Residue of banned termiticide	Some people who drink water containing chlordane in excess of the MCL over many years could experience problems with their liver or nervous system, and may have an increased risk of getting cancer.

Contaminant (units)	Traditional MCL in mg/L	To convert for CCR, multiply by	MCL in CCR units	MCLG	Major Sources in Drinking Water	Health Effects Language
Dalapon (ppb)	.2	1000	200	200	Runoff from herbicide used on rights of way	Some people who drink water containing dalapon well in excess of the MCL over many years could experience minor kidney changes.
Di(2-ethylhexyl) adipate (ppb)	.4	1000	400	400	Discharge from chemical factories	Some people who drink water containing di (2- ethylhexyl) adipate well in excess of the MCL over many years could experience general toxic effects or reproductive difficulties.
Di(2-ethylhexyl) phthalate (ppb)	.006	1000	6	0	Discharge from rubber and chemical factories	Some people who drink water containing di (2- ethylhexyl) phthalate in excess of the MCL over many years may have problems with their liver, or experience reproductive difficulties, and may have an increased risk of getting cancer.
Dibromochloropro pane (ppt)	.0002	1,000,000	200	0	Runoff/leaching from soil fumigant used on soybeans, cotton, pineapples, and orchards	Some people who drink water containing DBCP in excess of the MCL over many years could experience reproductive difficulties and may have an increased risk of getting cancer.
Dinoseb (ppb)	.007	1000	7	7	Runoff from herbicide used on soybeans and vegetables	Some people who drink water containing dinoseb well in excess of the MCL over many years could experience reproductive difficulties.
Diquat (ppb)	.02	1000	20	20	Runoff from herbicide use	Some people who drink water containing diquat in excess of the MCL over many years could get cataracts.
Dioxin [2,3,7,8- TCDD] (ppq)	.00000003	1,000,000,00	30	0	Emissions from waste incineration and other combustion; Discharge from chemical factories	Some people who drink water containing dioxin in excess of the MCL over many years could experience reproductive difficulties and may have an increased risk of getting cancer.

Contaminant (units)	Traditional MCL in mg/L	To convert for CCR, multiply by	MCL in CCR units	MCLG	Major Sources in Drinking Water	Health Effects Language
Endothall (ppb)	.1	1000	100	100	Runoff from herbicide use	Some people who drink water containing endothall in excess of the MCL over many years could experience problems with their stomach or intestines.
Endrin (ppb)	.002	1000	2	2	Residue of banned insecticide	Some people who drink water containing endrin in excess of the MCL over many years could experience liver problems.
Epichlorohydrin	TT	-	TT	0	Discharge from industrial chemical factories; An impurity of some water treatment chemicals	Some people who drink water containing high levels of epichlorohydrin over a long period of time could experience stomach problems, and may have an increased risk of getting cancer.
Ethylene dibromide (ppt)	.00005	1,000,000	50	0	Discharge from petroleum refineries	Some people who drink water containing ethylene dibromide in excess of the MCL over many years could experience problems with their liver, stomach, reproductive system, or kidneys, and may have an increased risk of getting cancer.
Glyphosate (ppb)	.7	1000	700	700	Runoff from herbicide use	Some people who drink water containing glyphosate in excess of the MCL over many years could experience problems with their kidneys or reproductive difficulties.
Heptachlor (ppt)	.0004	1,000,000	400	0	Residue of banned pesticide	Some people who drink water containing heptachlor in excess of the MCL over many years could experience liver damage and may have an increased risk of getting cancer.
Heptachlor epoxide (ppt)	.0002	1,000,000	200	0	Breakdown of heptachlor	Some people who drink water containing heptachlor epoxide in excess of the MCL over many years could experience liver damage, and may have an increased risk of getting cancer.

Contaminant (units)	Traditional MCL in mg/L	To convert for CCR, multiply by	MCL in CCR units	MCLG	Major Sources in Drinking Water	Health Effects Language
Hexachlorobenzen e (ppb)	.001	1000	1	0	Discharge from metal refineries and agricultural chemical factories	Some people who drink water containing hexachlorobenzene in excess of the MCL over many years could experience problems with their liver or kidneys, or adverse reproductive effects, and may have an increased risk of getting cancer.
Hexachlorocyclop entadiene (ppb)	.05	1000	50	50	Discharge from chemical factories	Some people who drink water containing hexachlorocyclopentadiene well in excess of the MCL over many years could experience problems with their kidneys or stomach.
Lindane (ppt)	.0002	1,000,000	200	200	Runoff/leaching from insecticide used on cattle, lumber, gardens	Some people who drink water containing lindane in excess of the MCL over many years could experience problems with their kidneys or liver.
Methoxychlor (ppb)	.04	1000	40	40	Runoff/leaching from insecticide used on fruits, vegetables, alfalfa, livestock	Some people who drink water containing methoxychlor in excess of the MCL over many years could experience reproductive difficulties.
Oxamyl [Vydate] (ppb)	.2	1000	200	200	Runoff/leaching from insecticide used on apples, potatoes and tomatoes	Some people who drink water containing oxamyl in excess of the MCL over many years could experience slight nervous system effects.
PCBs [Polychlorinated biphenyls] (ppt)	.0005	1,000,000	500	0	Runoff from landfills; Discharge of waste chemicals	Some people who drink water containing PCBs in excess of the MCL over many years could experience changes in their skin, problems with their thymus gland, immune deficiencies, or reproductive or nervous system difficulties, and may have an increased risk of getting cancer.
Pentachlorophenol (ppb)	.001	1000	1	0	Discharge from wood preserving factories	Some people who drink water containing pentachlorophenol in excess of the MCL over many years could experience problems with their liver or kidneys, and may have an increased risk of getting cancer.

Contaminant (units)	Traditional MCL in mg/L	To convert for CCR, multiply by	MCL in CCR units	MCLG	Major Sources in Drinking Water	Health Effects Language
Picloram (ppb)	.5	1000	500	500	Herbicide runoff	Some people who drink water containing picloram in excess of the MCL over many years could experience problems with their liver.
Simazine (ppb)	.004	1000	4	4	Herbicide runoff	Some people who drink water containing simazine in excess of the MCL over many years could experience problems with their blood.
Toxaphene (ppb)	.003	1000	3	0	Runoff/leaching from insecticide used on cotton and cattle	Some people who drink water containing toxaphene in excess of the MCL over many years could have problems with their kidneys, liver, or thyroid, and may have an increased risk of getting cancer.
Volatile Organic (Contaminants	(VOC's)				
Benzene (ppb)	.005	1000	5	0	Discharge from factories; Leaching from gas storage tanks and landfills	Some people who drink water containing benzene in excess of the MCL over many years could experience anemia or a decrease in blood platelets, and may have an increased risk of getting cancer.
Bromate (ppb)	.010	1000	10	0	By-product of drinking water chlorination	Some people who drink water containing bromate in excess of the MCL over many years may have an increased risk of getting cancer.
Carbon tetrachloride (ppb)	.005	1000	5	0	Discharge from chemical plants and other industrial activities	Some people who drink water containing carbon tetrachloride in excess of the MCL over many years could experience problems with their liver and may have an increased risk of getting cancer.
Chloramines (ppm)	MRDL = 4	-	MRDL = 4	$\begin{array}{l} \text{MRDL} \\ \text{G} = 4 \end{array}$	Water additive used to control microbes	Some people who use water containing chloramines well in excess of the MRDL could experience irritating effects to their eyes and nose. Some people who drink water containing chloramines well in excess of the MRDL could experience stomach discomfort or anemia.

Contaminant (units)	Traditional MCL in mg/L	To convert for CCR, multiply by	MCL in CCR units	MCLG	Major Sources in Drinking Water	Health Effects Language
Chlorine (ppm)	MRDL = 4	-	MRDL = 4	$\begin{array}{c} \text{MRDL} \\ \text{G} = 4 \end{array}$	Water additive used to control microbes	Some people who use water containing chlorine well in excess of the MRDL could experience irritating effects to their eyes and nose. Some people who drink water containing chlorine well in excess of the MRDL could experience stomach discomfort.
Chlorite (ppm)	1	-	1	0.8	By-product of drinking water chlorination	Some infants and young children who drink water containing chlorite in excess of the MCL could experience nervous system effects. Similar effects may occur in fetuses of pregnant women who drink water containing chlorite in excess of the MCL. Some people may experience anemia.
Chloride dioxide (ppb)	MRDL = .8	1000	MRDL = 800	MRDL G = 800	Water additive used to control microbes	Some infants and young children who drink water containing chlorine dioxide in excess of the MRDL could experience nervous system effects. Similar effects may occur in fetuses of pregnant women who drink water containing chlorine dioxide in excess of the MRDL. Some people may experience anemia.
Chlorobenzene (ppb)	.1	1000	100	100	Discharge from chemical and agricultural chemical factories	Some people who drink water containing chlorobenzene in excess of the MCL over many years could experience problems with their liver or kidneys.
o- Dichlorobenzene (ppb)	.6	1000	600	600	Discharge from industrial chemical factories	Some people who drink water containing o- dichlorobenzene well in excess of the MCL over many years could experience problems with their liver, kidneys, or circulatory systems.

Contaminant (units)	Traditional MCL in mg/L	To convert for CCR, multiply by	MCL in CCR units	MCLG	Major Sources in Drinking Water	Health Effects Language
p- Dichlorobenzene (ppb)	.075	1000	75	75	Discharge from industrial chemical factories	Some people who drink water containing p- dichlorobenzene in excess of the MCL over many years could experience anemia, damage to their liver, kidneys, or spleen, or changes in their blood.
1,2- Dichloroethane (ppb)	.005	1000	5	0	Discharge from industrial chemical factories	Some people who drink water containing 1,2- dichloroethane in excess of the MCL over many years may have an increased risk of getting cancer.
1,1- Dichloroethylene (ppb)	.007	1000	7	7	Discharge from industrial chemical factories	Some people who drink water containing 1,1- dichloroethylene in excess of the MCL over many years could experience problems with their liver.
cis-1,2- Dichloroethylene (ppb)	.07	1000	70	70	Discharge from industrial chemical factories	Some people who drink water containing cis- 1,2-dichloroethylene in excess of the MCL over many years could experience problems with their liver.
trans-1,2- Dichloroethylene (ppb)	.1	1000	100	100	Discharge from industrial chemical factories	Some people who drink water containing trans- 1,2-dichloroethylene well in excess of the MCL over many years could experience problems with their liver.
Dichloromethane (ppb)	.005	1000	5	0	Discharge from pharmaceutical and chemical factories	Some people who drink water containing dichloromethane in excess of the MCL over many years could have liver problems and may have an increased risk of getting cancer.
1,2- Dichloropropane (ppb)	.005	1000	5	0	Discharge from industrial chemical factories	Some people who drink water containing 1,2- dichloropropane in excess of the MCL over many years may have an increased risk of getting cancer.

Contaminant (units)	Traditional MCL in mg/L	To convert for CCR, multiply by	MCL in CCR units	MCLG	Major Sources in Drinking Water	Health Effects Language
Ethylbenzene (ppb)	.7	1000	700	700	Discharge from petroleum refineries	Some people who drink water containing ethylbenzene well in excess of the MCL over many years could experience problems with their liver or kidneys.
Haloacetic Acids (HAA) (ppb)	.060	1000	60	n/a	By-product of drinking water disinfection	Some people who drink water containing haloacetic acids in excess of the MCL over many years may have an increased risk of getting cancer.
Styrene (ppb)	.1	1000	100	100	Discharge from rubber and plastic factories; Leaching from landfills	Some people who drink water containing styrene well in excess of the MCL over many years could have problems with their liver, kidneys, or circulatory system.
Tetrachloroethylen e (ppb)	.005	1000	5	0	Discharge from factories and dry cleaners	Some people who drink water containing tetrachloroethylene in excess of the MCL over many years could have problems with their liver, and may have an increased risk of getting cancer.
1,2,4- Trichlorobenzene (ppb)	.07	1000	70	70	Discharge from textile- finishing factories	Some people who drink water containing 1,2,4- trichlorobenzene well in excess of the MCL over many years could experience changes in their adrenal glands.
1,1,1- Trichloroethane (ppb)	.2	1000	200	200	Discharge from metal degreasing sites and other factories	Some people who drink water containing 1,1,1- trichloroethane in excess of the MCL over many years could experience problems with their liver, nervous system, or circulatory system.
1,1,2- Trichloroethane (ppb)	.005	1000	5	3	Discharge from industrial chemical factories	Some people who drink water containing 1,1,2- trichloroethane well in excess of the MCL over many years could have problems with their liver, kidneys, or immune systems.

Contaminant (units)	Traditional MCL in mg/L	To convert for CCR, multiply by	MCL in CCR units	MCLG	Major Sources in Drinking Water	Health Effects Language
Trichloroethylene (ppb)	.005	1000	5	0	Discharge from metal degreasing sites and other factories	Some people who drink water containing trichloroethylene in excess of the MCL over many years could experience problems with their liver and may have an increased risk of getting cancer.
TTHMs [Total trihalomethanes] (ppb)	0.10/.080	1000	100/80	n/a	By-product of drinking water chlorination	Some people who drink water containing trihalomethanes in excess of the MCL over many years may experience problems with their liver, kidneys, or central nervous systems, and may have an increased risk of getting cancer.
Toluene (ppm)	1	-	1	1	Discharge from petroleum factories	Some people who drink water containing toluene well in excess of the MCL over many years could have problems with their nervous system, kidneys, or liver.
Vinyl Chloride (ppb)	.002	1000	2	0	Leaching from PVC piping; Discharge from plastics factories	Some people who drink water containing vinyl chloride in excess of the MCL over many years may have an increased risk of getting cancer.
Xylenes (ppm)	10	_	10	10	Discharge from petroleum factories; Discharge from chemical factories	Some people who drink water containing xylenes in excess of the MCL over many years could experience damage to their nervous system.

Important Information on Unregulated Contaminants

Data generated by the monitoring of unregulated contaminants provides a basis on which to evaluate and prioritize parameters listed on the Drinking Water Candidate List. This information ensures that future decisions on drinking water standards are based on sound science. The current Unregulated Contaminants Monitoring List (UCML) has 36 parameters; however, the regulation only requires monitoring of the twelve contaminants contained on List 1, beginning in 2001. The CCR must contain information on the monitoring results of the required contaminants (twelve parameters). These results must be provided as the average of all samples taken and the full range of detections. The following is a list of the twelve contaminants required for monitoring as of 2001. The EPA website http://www.epa.gov/safewater/ucmr.html has more information on this regulation and the latest list of monitoring requirements.

Unregulated Assessment Monitoring List (Current as of 2001)

2,4 - dinitrotoluene	DCPA di-acid degradate	Molinate	Terbacil
2,6 - dinitrotoluene	4,4' - DDE	MTBE	Acetochlor
DCPA mono-acid degradate	ЕРТС	Nitrobenzene	Perchlorate

Appendix B - GA EPD Consumer Confidence Report Certification Form

Community Water System Name:_____ GA Water System I.D. Number: (GA) - Report Year

The Community Water System identified above does hereby confirm that a Consumer Confidence Report has been distributed to its customers (or appropriate notices of availability have been provided). The system further certifies that the information contained in the report is accurate and consistent with the compliance monitoring data previously submitted for the same time period to the Georgia Environmental Protection Division.

Certified and attested to by the following person:

Name:	Title:
Signature:	
Phone #:	Date:

Please mark and/or fill out all items which apply to your CCR program or means of distribution.

FOR ALL CWS's: Indicate the method(s) used for CCR notification and/or distribution in the list below

<u>Note</u>: For all systems serving **more than 10,000** persons, a "good faith effort" must be made to your "other" water system consumers by <u>three</u> of the following methods (mark all methods utilized

_____ Rural route mailing to all consumers within the service area (attach list of zip codes used)

- _____ Advertised availability of CCR to local news media (attach announcement used)
- _____ Published CCR in local newspaper (attach physical copy of newspaper publication)
- _____ Posted CCR notice of availability in prominent public locations (list of location(s) utilized)
- _____ Delivered multiple copies to single bill locations (apartments, communities, businesses, etc.)
- _____ Directly delivered individual CCR copies to each residence in community.
- _____ Directly mailed individual CCR copies to each customer receiving a water bill.
- _____ Other direct delivery methods were utilized such as:______

For CWS's serving more than 100,000 persons or other Internet accessible systems:

_____ CCR is posted on a publicly accessible Internet site at the following address: www.

<u>ALL CWS's Indicate the number of "consumers served"</u> <u>or "population served" by your CWS in the list below</u>

- **£500** consumers served by water system
- _____ 501 9,999 consumers served by water system
- _____ **10,000 99,999** consumers served by water system
- **3100,000** consumers served by water system

Send completed CCR Cert. Form to:

ATTN: Consumer Confidence Report GA EPD 205 Jesse Hill Jr. Street SE Suite 1362 Atlanta, GA 30334

Appendix C - Sample CCR

Any Town Water Quality Report -2001

Last year, **Georgia Town Water Works** conducted over 1,000 laboratory tests for more than 80 drinking water parameters. We are proud to inform you that the City of Georgia Town did not have any violations of water quality parameters during 1998. Included in this report is information about where your water comes from, what it contains, and how it compares to standards set by regulatory agencies. Your water department is committed to providing our community with clean, safe, and reliable drinking water for all of us. For more information about your water or this report please call John Doe at 555-1111.

Your water comes from four municipal *groundwater* wells approximately 500 feet deep. This water source is commonly called the *Upper Floridian Aquifer* and provides ample volumes of water for our community. These wells are located north of Highway 42 at the county line withing property owned by the City. This property is protected from activities which could potentially cause contamination of this water source. We perform treatment at each of these wells to include removal of contaminants and chorine disinfection. Our community is currently undergoing a source water assessment which will provide more information about or water source. We will provide information on how to obtain a copy of that report when it is available.

Your Water Board meets the first Thursday of each month at 5:00 p.m. in the Board Room at City Hall. Your participation or comments are welcome at these meetings.

Drinking water, including bottled water, may reasonably be expected to contain at least small amounts of some contaminants. The presence of contaminants does not necessarily indicate that water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the EPA's Safe Drinking Water Hotline (800) 426-4791.

Some people may be more vulnerable to contaminants in drinking water than the general population. Immunocompromised persons such as persons with cancer undergoing chemotherapy, persons who have undergone organ transplants, people with HIV/AIDS or other immune system disorders, some elderly, and infants can be particularly at risk from infections. These people should seek advice about drinking water from their health care providers. EPA/CDC guidelines on appropriate means to lessen the risk of infection by Cryptosporidium and other microbial contaminants are available from the Safe Drinking Water Hotline (800) 426-4791. The sources of drinking water (both tap water and bottled water) include rivers, lakes, streams, ponds, reservoirs, springs, and wells. As water travels over the surface of the land or through the ground, it dissolves naturally-occurring minerals and, in some cases, radioactive material, and can pick up substances resulting from the presence of animals or from human activity.

Contaminants that may be present in source water before we treat it include:

◆*Microbial contaminants*, such as viruses and bacteria which may come from sewage treatment plants, septic systems, agricultural livestock operations, and wildlife

◆*Inorganic contaminants* such as salts and metals, which can be naturally occurring or result from urban storm runoff, industrial or domestic wastewater discharges, oil and gas production, mining, or farming.

◆ *Pesticides and herbicides*, which may come from a variety of sources such as agriculture, urban stormwater runoff, and residential uses.

♦ Organic chemical contaminants, including synthetic and volatile organic chemicals, which are by-products of industrial processes and petroleum production, and can also come from gas stations, urban stormwater runoff, and septic systems.

 \blacklozenge *Radioactive contaminants*, which can be naturally occurring or be the result of oil and gas production and mining activities.

In order to ensure that tap water is safe to drink, EPA prescribes regulations which limit the amount of certain contaminants in water provided by public water systems. Food and Drug Administration regulations establish limits for contaminants in bottled water which must provide the same protection for public health."

Your water system in an active participant in the community. Our employees are involved in many civic organizations and are pleased to offer information and speakers to the community on water protection, water treatment, as well as provide tours of our facilities.

Our distribution system continues to grow. Over 275 miles of water lines were installed in 1998. **Any Town Water Works** is currently researching several options to supplement our current water sources to ensure safe and reliable sources in the future.

WATER QUALITY DATA

The table below lists all the drinking water contaminants that we detected during the 1998 calendar year. The presence of these contaminants in the water does not necessarily indicate that the water poses a health risk. Unless otherwise noted, the data presented in this table is from testing done January 1-December 31, 1998. EPD requires us to monitor for certain contaminants less than once per year because the concentrations of these contaminants are not expected to vary significantly from year to year. Some of the data, though representative of the water quality, is more than one year old.

Terms & Abbreviations:

Maximum Contaminant Level Goal (MCLG): the level of a contaminant in drinking water below which there is no known or expected risk to health. MCLGs allow for a margin of safety.

Maximum Contaminant Level (MCL): the highest level of a contaminant that is allowed in drinking water. MCLs are set as close to the MCLGs as feasible using the best available treatment technology.

Action Level (AL): the concentration of a contaminant which, when exceeded, triggers treatment or other requirements which a water system must follow.

Maximum Residual Disinfectant Level (MRDL): "The highest level of a disinfectant allowed in drinking water. There is convincing evidence that addition of a disinfectant is necessary for control of microbiological contaminants."

Maximum Residual Disinfectant Level Goal (MRDLG): "The level of a drinking water disinfectant below which there is no known or expected risk to health. MRDLGs do not reflect the benefits of the use of disinfectants to control microbial contaminants."

n/a: not applicable · **nd:** not detectable at testing limit · **ppb:** parts per billion or micrograms per liter · **ppm:** parts per million or milligrams per liter · **pCi/l:** picocuries per liter (a measure of radiation)

Inorganic Contaminants Table									
Parameter	MCL	MCLG	Georgia Town Water System	Range of detections	Sample Date	Violation	Typical Source of Contaminant		
Barium (ppm)	2.0	2.0	0.7	0.7	1997	NO	discharge of drilling waste and metal refineries		
Fluoride (ppm)	4.0	4.0	0.9	0.9	1998	NO	water additive which promotes strong teeth		
Nitrate (ppm)	10.0	10.0	6.2	0.4-7.0	1998	NO	runoff from fertilizer use		
Organic Contaminants Table									
Parameter	MCL	MCLG	Georgia Town Water System	Range of detections	Sample Date	Violation	Typical Source of Contaminant		
Atrazine (ppm)	3.0	3.0	3.56	nd-6.5	1998	YES	runoff from herbicide used on row crops		
Total Trihalomethane s (TTHMs)	100	n/a	89	45-95	1998	NO	by product of drinking water chlorination		
Radionuclides									
Beta/photon emitters (pci/L)	50*	0	14	n/a	1998	NO	erosion of natural deposits		
Lead AL MCLG Georgia Town # of sites found above the AL									

Lead (ppb)	15	0	4.25	1 site above the AL out of 20 sites sampled	corrosion of household plumbing systems

* The MCL for beta particles is 4mrem/year. EPA considers 50 pCi/l to be the level of concern for beta particles.

About our Atrazine violation: During March, April and May, a surge in the use of atrazine-based herbicides by area farmers caused our water to exceed the MCL for atrazine. We sent a notice warning you of this problem when it occurred. We are working with the state and local farmers to ensure that this never happens again, and we are monitoring atrazine levels monthly. We regret exposing you to any potential risk. You should know that some people who drink water containing atrazine well in excess of the MCL over many years could experience problems with their cardiovascular system or reproductive difficulties. If you want more information about atrazine or the violation, please call us (***-****), Sample County's health department (***-****), or the state drinking water office (***-****).

About Nitrate: Nitrate in drinking water at levels above 10 ppm is a health risk for infants of less than six months of age. High nitrate levels in drinking water can cause blue baby syndrome. Nitrate levels may rise quickly for short periods of time because of rainfall or agricultural activity. If you are caring for an infant, you should ask for advice from your health care provider.

Is our water system meeting other rules that govern our operations? EPD and EPA require us to test our water on a regular basis to ensure its safety. In February and May of this year, we took the samples at the required time but failed to submit the results of this monitoring to EPD in a timely manner. We are reviewing our procedures to ensure that this paperwork will be submitted in a timely manner in the future.

Appendix D - Written Consumer Confidence Report Form for Georgia Community Water Systems

GA Community Water System Name:	GA Water System ID #:
Name & phone number of water system contact:	(#)
This report details information on our water system for	or the calendar year unless otherwise noted.
Summary Water System Information Introduction:	
<u>Raw Water Source Information</u> Common Name of Water Source:	_Type of Water Source:
Public Participation Opportunities: (community meet	ngs, board ,meetings, hearings, etc.)

Non-English Speaking Language: (if applicable)

Availability of Source Water Assessments and Contaminant Susceptibility:

General Water Quality Health Effects Language

"Some people may be more vulnerable to contaminants in drinking water than the general population. Immunocompromised persons such as persons with cancer undergoing chemotherapy, persons who have undergone organ transplants, people with HIV/AIDS or other immune system disorders, some elderly, and infants can be particularly at risk from infections. These people should seek advice about drinking water from their health care providers. EPA/CDC guidelines on appropriate means to lessen the risk of infection by Cryptosporidium and other microbial contaminants are available from the **Safe Drinking Water Hotline** (1-800-426-4791)"

"Drinking water, including bottled water, may reasonably be expected to contain at least small amounts of some contaminants. The presence of contaminants does not necessarily indicate that water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the **EPA's Safe Drinking Water Hotline (1-800-426-4791)**."

"The sources of drinking water (both tap water and bottled water) include rivers, lakes, streams, ponds, reservoirs, springs, and wells. As water travels over the surface of the land or through the ground, it dissolves naturally-occurring minerals and, in some cases, radioactive material, and can pick up substances resulting from the presence of animals or from human activity.

Contaminants that <u>may</u> be present in source water include the following:

- Microbial contaminants, such as viruses and bacteria which may come from sewage treatment plants, septic systems, agricultural livestock operations, and wildlife.
- Inorganic contaminants such as salts and metals, which can be naturally occurring or result from urban storm runoff, industrial or domestic wastewater discharges, oil and gas production, mining, or farming.
- Pesticides and herbicides, which may come form a variety of sources such as agriculture, urban

stormwater runoff, and residential uses.

- Organic chemical contaminants, including synthetic and volatile organic chemicals, which are by-products of industrial processes and petroleum production, and can also come from gas stations, urban stormwater runoff, and septic systems.
- Radioactive contaminants, which can be naturally occurring or be the result of oil and gas production and mining activities.

In order to ensure that tap water is safe to drink, EPA prescribes regulations which limit the amount of certain contaminants in water provided by public water systems. Food and Drug Administration regulations establish limits for contaminants in bottled water which must provide the same protection for public health."

"Detected Inorganic Contaminants Table"								
Parameter/units	MCL	MCLG	Water System Results	Range of detections	Sample Date	Violation No/Yes	Typical Source of Contaminant	

"Detected Organic Contaminants Table"							
Parameter/units	<u>MCL</u>	<u>MCLG</u>	Water System Results	Range of detections	Sample Date	Violation No/Yes	Typical Source of Contaminant

Other Monitoring Results								
Parameter/units	MCL or AL or TT	MCLG	Water System Results	Range of detections	Sample Date	Violation No/Yes	Typical Source of Contaminant	

Lead and Copper Monitoring Results							
Parameter/units	<u>Action</u> Level	MCLG	Water System Results	# of sample sites found above the Action Level	Violation No/Yes	Sample Date	Typical Source of Contaminant
Lead/							
Copper/							

Microbiological Monitoring Results								
Parameter/units (present or absent in sample)	<u>MCL</u>	MCLG	Water System Results	Sample Date	<u>Violation</u> <u>No/Yes</u>	Typical Source of Contaminant		
Total Coliform Bacteria								

Definition of Terms and Abbreviations Used in Report

<u>Maximum Contaminant Level (MCL)</u>: "The highest level of a contaminant that is allowed in drinking water. MCLs are set as close to the MCLGs as feasible using the best available treatment technology."

<u>Maximum Contaminant Level Goal (MCLG)</u>: "The level of a contaminant in drinking water below which there is no known or expected risk to health. MCLGs allow for a margin of safety."

<u>Action Level (AL)</u>: "The concentration of a contaminant which, if exceeded, triggers treatment or other requirements which a water system must follow."

<u>Treatment Technique (TT)</u>: "A required process intended to reduce the level of a contaminant in drinking water."

<u>Maximum Residual Disinfectant Level (MRDL</u>): "The highest level of a disinfectant allowed in drinking water. There is convincing evidence that addition of a disinfectant is necessary for control of microbiological contaminants."

<u>Maximum Residual Disinfectant Level Goal (MRDLG)</u>: "The level of a drinking water disinfectant below which there is no known or expected risk to health. MRDLGs do not reflect the benefits of the use of disinfectants to control microbial contaminants."

Other Definitions of Terms Used in this Report:

Health Effects Language and Background Information on any Violations Incurred During Report Period:

Information On Compliance With Any Other Regulations or Specific Operating Criteria:

Additional Community and Educational Information About Our Water System:

Important Dates For Consumer Confidence Report Submission:

Consumer Confidence Reports are due to Georgia EPD offices AND local water system customers <u>annually</u> no later than July 1st.

Consumer Confidence Report Certification Forms are due to EPD offices <u>annually</u> no later than October 1st.

ATTN: Consumer Confidence Reports GA EPD Drinking Water Program Suite 1362 205 Jesse Hill Jr., Street SE Atlanta, GA 30334

Appendix E - Specific Guidance for Reporting Values of Detected Contaminants

Scenario I: The parameter is sampled at <u>one site</u> on <u>one sampling date</u> for the reporting year:

Date Sampled:	Location:	<u>Result:</u>
June 19, 2001	tap 1	0.008

Report in your detected contaminants table: Highest detected level = .008

Report the range of your results: (No range)

Scenario II: The parameter is sampled at <u>multiple sites</u> on <u>one sampling date</u> for the reporting year.

Date Sampled: Lo	ocation: multiple locations	Result: multiple results		
May 1, 2001	tap 1	0.85		
	tap 2	n/d		
	tap 3	0.25		

Report in your detected contaminants table: Highest detected level = 0.85

Report the range of your results: (n/d - 0.85)

Scenario III: The parameter is sampled at multiple dates at one sampling location for the reporting year.

Dates Sampled :	Location:	Results: multiple results
1 st quarter 2001	tap 1	n/d
2 nd quarter 2001	tap 1	0.5
3 rd quarter 2001	tap 1	2.5
4 th quarter 2001	tap 1	1.2

Report in your detected contaminants table: The average value of all results = 1.05

Report the range of your results = (n/d - 2.5)

Scenario IV: The parameter is sampled at multiple dates and multiple locations for the reporting year.

Multiple Sites with Multiple Sample Dates								
total THM's	2 nd quarter2001	3 rd quarter2001	4 th quarter 2001	1 st quarter 2001	2 nd quarter 2001	3 rd quarter 2001	4 th quarter 2001	
tap 1				35	55	75	95	
tap 2				45	50	65	85	
tap 3				40	75	70	110	
tap 4				55	60	55	90	
quarterly average	110	50	65	45	60	66	95	
rolling annual avg.				67	55	59	66	

Report in your detected contaminants table: <u>Highest rolling annual average</u> = 67

A "rolling average" is the numerical average of the most recent sampling periods covering twelve months. In the example case above, the results averaged to obtain the reported value are 110, 50, 65, and 45.

Also report the <u>rolling</u> yearly range <u>from all of your individual results</u>: (35 - 110)

A "rolling range" in this case is the lowest and highest values reported for the most recent twelve month period.

Scenario V: (For Lead Only)

Systems should report the 90th percentile number associated with lead monitoring (if above 0.0). <u>Also</u> include the # of sample sites which were detected above the Action Level of 15

Lead Monitoring Example										
Date Sampled	Site 1	Site 2	Site 3	Site 4	Site 5	Site 6	Site 7	Site 8	Site 9	Site 10
Results	8	n/d	10	3	12	21	16	n/d	n/d	8

Report in your detected contaminants table : 90^{th} percentile value of results = 16

Report in your detected contaminants table: <u>number of sample sites above the action level (15)</u> = 2

Special Note: If your CWS samples ≥ 20 samples and more than 5% but less than 10% of the samples are above the action level (15), include the verbatim educational information provided by EPA.

Any parametric data associated with your lead collection should not be included in the CCR.

Scenario VI: (For Turbidity Only)

When turbidity is reported as an indicator of filtration performance, systems are required to report the highest single measurement of turbidity <u>and</u> the lowest monthly percentage of samples which met the requirements specified for that technology. In this scenario, it is best to present the data in two rows within your table as shown.

Turbidity Example								
parameter MCL MCLG		result	range	sample date	violation	typical source		
T = 5 NTU = percentage amples <0.5	0	1 NTU 96 %	n/a n/a	2001	no	soil runoff and erosion		
	MCL T = 5 NTU = percentage amples <0.5 NTU	MCL MCLG T = 5 NTU = percentage 0 amples <0.5 NTU	MCL MCLG result T = 5 NTU 1 NTU = percentage 0 96 % amples <0.5	MCLMCLGresultrangeT = 5 NTU1 NTUn/a= percentage096 %n/aamples <0.5	MCLMCLGresultrangesample dateT = 5 NTU1 NTUn/a2001= percentage096 %n/aamples <0.5	MCL MCLG result range sample date violation T = 5 NTU 1 NTU n/a 2001 no = percentage 0 96 % n/a 1000		

Appendix F - Sample Statement for Source Water Assessment Availability (if not currently available)

"Our water is taken from the Millstead River near Highway 21. The water is then piped to the water treatment plant just southeast of town. We restrict access on the river near this area to protect our water from contamination. We are also working with the GA EPD to identify any other types of pollution our water supply could be vulnerable to. We will report these findings to you in this report when completed. Please contact us for more information on this program."

Georgia Department of Natural Resources

205 Butler Street, S. E., East Floyd Tower, Atlanta, Georgia 30334 Lonice C. Barrett, Commissioner Harold F. Reheis, Director Environmental Protection Division

May 3, 1999

Memorandum

To: All community water Systems serving less than 10,000 persons

From: Harold F. Reheis, Director

Georgia Environmental Protection Division

Authority provided in Section 1414(c)(4)(C) of the Safe Drinking Water Act allows the Governor of the State of Georgia's designee to determine not to apply the mailing or other direct delivery requirements for CCRs to community water systems serving fewer than 10,000 persons.

A waiver is hereby granted to the community water systems that serve fewer than 10,000 persons provided such water systems:

- 1) Inform customers it will not be providing copies of the CCR by mail or other direct delivery method;
- 2) Publish the report annually in one or more local newspapers serving areas in which the system's customers are located; and
- 3) Make copies of the CCR available to the public upon request

Authority provided in Section 1414(c)(4)(D) of the Safe Drinking Water Act allows the Governor of the State of Georgia's designee to determine not to apply the requirements (1) and (2) listed above for CCRs to community water systems serving fewer than 500 persons, if the system provides notice once a year that the CCR is available upon request.

A waiver is hereby granted to the community water systems that serve fewer than 501 persons. Each water system must provide notice to customers of the availability of the report, at least once per year, by mail, door-to-door delivery, posting or any other means authorized by EPD.

All systems with mailing waivers are still required to:

- Complete a CCR in accordance with all content requirements;
- Provide a copy of the CCR to the EPD;
- Make copies of the CCR available to the public upon request; and
- Provide a certification by 1/19/2000 to the EPD of compliance with the regulation.

Harold F. Reheis, Director Georgia Environmental Protection Division Date

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