

Annual Drinking Water Quality Report ***Hatton, North Dakota*** ***2012***

We're pleased to present to you this year's *Annual Drinking Water Quality Report*. This report is designed to inform you about the safe clean water we deliver to you every day. Our constant goal is to provide you with a safe and dependable supply of drinking water. We want you to understand the efforts we make to continually improve the water treatment process and protect our water resources. We are committed to ensuring the quality of your water. The city of Hatton purchases its water from Grand Forks-Traill Water District. Grand Forks-Traill Water District utilizes the Elk Valley Aquifer for municipal water.

Grand Forks -Traill Water District is involved in the North Dakota Wellhead Protection Program. Information on this program can be obtained at our office during normal business hours. The North Dakota Department of Health has completed a Source Water Assessment for Grand Forks -Traill Water District. Information on this program is available at our office during normal business hours. Our public water system, in cooperation with the North Dakota Department of Health, has completed the delineation and contaminant/land use inventory elements of the North Dakota Source Water Protection Program. Based on the information from these elements, the North Dakota Department of Health has determined that our source water is "moderately susceptible" to potential contaminants. No significant sources of contamination have been identified.

The community of Hatton is pleased to report that our drinking water is safe and meets federal and state requirements.

This report shows our water quality and what it means.

If you have any questions about this report or concerning your water utility, please contact Jackie Buckwitz, Hatton City Auditor, at (701) 543-3243. We want our valued customers to be informed about their water utility. If you want to learn more, please attend any of our regularly scheduled meetings. They are held on the first Monday of each month at 7:00 PM in the Hatton City Hall located at 405 Railroad Avenue. If you are aware of non-English speaking individuals who need help with the appropriate language translation, please call Jackie Buckwitz at the number listed above.

Hatton would appreciate it if large volume water customers would please post copies of the *Annual Drinking Water Quality Report* in conspicuous locations or distribute them to tenants, residents, patients, students, and/or employees, so individuals who consume the water, but do not receive a water bill, can learn about our water system.

Hatton routinely monitors for contaminants in your drinking water according to Federal and State laws. The following tables show the results of our monitoring for the period of January 1st to December 31st, 2012. As authorized and approved by EPA, the state has reduced monitoring requirements for certain contaminants to less often than once per year because the concentrations of these contaminants are not expected to vary significantly from year to year. Some of our data [e.g., for inorganic contaminants], though representative, is more than one year old.

The sources of drinking water (both tap 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:

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 stormwater, industrial or domestic wastewater discharges, oil production, mining or farming.

Pesticides and herbicides, which 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, the Environmental Protection Agency (EPA) prescribes regulations which limit the amount of certain contaminants in water provided by public water systems. The Food and Drug Administration (FDA) regulations establish limits for contaminants in bottled water which must provide the same protection for public health.

In the tables on page 3, you will find many terms and abbreviations you might not be familiar with. To help you better understand these terms we've provided the following definitions:

Not Applicable- (N/A)

Parts per million (ppm) or Milligrams per liter (mg/l) - one part per million corresponds to one minute in two years or a single penny in \$10,000.

Parts per billion (ppb) or Micrograms per liter (µg/l)- one part per billion corresponds to one minute in 2,000 years, or a single penny in \$10,000,000.

Picocuries per liter (pCi/l) - picocuries per liter is a measure of the radioactivity in water

Action Level (AL)- The concentration of a contaminant which, if exceeded, triggers treatment or other requirements which a water system must follow.

Treatment Technique (TT) - A treatment technique is a required process intended to reduce the level of a contaminant in drinking water.

Maximum Contaminant Level - The “Maximum Allowed” (*MCL*) is 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 - The “Goal” (*MCLG*) is 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 Goal (MRDLG) The level of a drinking water disinfectant below which there are no known or expected risk to health. MRDLGs do not reflect the benefits of the use of disinfectants to control microbial contaminants.

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 microbial contaminants.

TEST RESULTS FOR GRAND-FORKS - TRAILL WATER DISTRICT								
Contaminant	MCLG	MCL	Level Detected	Unit Measurement	Range	Date (year)	Violation Yes/No Other Info	Likely Source of Contamination
Disinfection Byproducts								
Copper 90 th Percentile	1.3	AI=1.3	0.0847	ppm	N/A	2011	No	Corrosion of household plumbing systems; erosion of natural deposits; leaching from wood preservatives
Lead 90 th Percentile	15	A=L	No Detect	ppb	N/A	2011	No	Corrosion of household plumbing systems, erosion of natural deposits
Inorganic Contaminants								
Barium	2	2	0.014	ppm	N/A	2008	No	Discharge of drilling wastes; discharge from metal refineries; erosion of natural deposits
Fluoride	4	4	1.41	ppm	N/A	2008	No	Erosion of natural deposits; water additive which promotes strong teeth; discharge from fertilizer and aluminum factories
Nitrate-Nitrite	10	10	0.28	ppm	N/A	2012	No	Runoff from fertilizer use; leaching from septic tanks, sewage; erosion of natural deposits
Disinfectants								
Chlorine	MRDL G=4	MRDL= 4.0	0.5	ppm	0.3 to 0.8	2012	No	Water additive used to control microbes
Radioactive Contaminants								
Gross Alpha, Includng Rn & U	15	15	0.53	pCi/l	N/A	2009	No	Erosion of natural deposits
Radium Combined (226, 228)		5	0.108	pCi/l	N/A	2009	No	Erosion of natural deposits
Uranium, Combined		30	0.198	ppb	N/A	2009	No	Erosion of natural deposits

Hatton City of – ND4900465

<u>Contaminant</u>	<u>MCLG</u>	<u>MCL</u>	<u>Level Detected</u>	<u>Unit Measurement</u>	<u>Range</u>	<u>Date (year)</u>	<u>Violation Yes/No Other Info</u>	<u>Likely Source of Contamination</u>
Lead/Copper								
1. Copper	1.3	AL=1.3	0.19 90 th % Value	ppm	N/A	2011	No*	Corrosion of household plumbing systems; erosion of natural deposits; leaching from wood preservatives
2. Lead	15	AL=15	1.95 90 th % Value	ppb	N/A	2011	No*	Corrosion of household plumbing systems, erosion of natural deposits
Disinfectants								
Chlorine	MRDL = 4	MRDL = 4	0.4	ppm	0.3 to 0.5	2012	No	Water additive used to control microbes

* No sites exceeded the copper or lead action levels in 2011.

EPA requires monitoring of over 80 drinking water contaminants. Those contaminants listed in the table on pages 3&4 are the only contaminants detected in your drinking water.

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 the water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the Environmental Protection Agency's Safe Drinking Water Hotline (1-800-426-4791).

MCL's are set at very stringent levels. To understand the possible health effects described for many regulated contaminants, a person would have to drink 2 liters of water every day at the MCL level for a lifetime to have a one-in-a-million chance of having the described health effect.

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 microbiological contaminants are available from the Safe Drinking Water Hotline (1-800-426-4791).

If present, elevated levels of lead can cause serious health problems, especially for pregnant woman and young children. Lead in drinking water is primarily from materials and components associated with service lines and home plumbing. The City of Hatton is responsible for providing high quality drinking water, but cannot control the variety of materials used in plumbing components. **Use water from the cold tap for drinking and cooking. When your water has**

been sitting for several hours, you can minimize the potential for lead exposure by flushing your tap for 30 seconds to 2 minutes before using water for drinking or cooking. If you are concerned about lead in your drinking water, you may wish to have your water tested. Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available from the Safe Drinking Water Hotline or at <http://www.epa.gov/safewater/lead>.

Please call Jackie Buckwitz, Hatton City Auditor, at (701) 543-3243 if you have questions concerning your city's water system.

The city of Hatton works diligently to provide top quality water to every tap. We ask that all our customers help us protect our water sources, which are the heart of our community, our way of life, and our children's future.

Mayor of Hatton

Stuart Letcher

Hatton Council Members

Kim Ostlie

Bernie Johnson

Ruth Lemley

Richard Gensrich

Scott A Phipps

Tom Gressman

Hatton City Auditor

Jackie Buckwitz

Water and Wastewater Superintendent

Arik Solheim

Annual Drinking Water Quality Report
Grand Forks – Traill Water District
2012

We're pleased to present to you this year's *Annual Drinking Water Quality Report*. This report is designed to inform you about the safe clean water we deliver to you every day. Our constant goal is to provide you with a safe and dependable supply of drinking water. We want you to understand the efforts we make to continually improve the water treatment process and protect our water resources. We are committed to ensuring the quality of your water. Grand Forks – Traill Water District utilizes the Elk Valley Aquifer, drawn from 15 drilled wells. Grand Forks – Traill Water District's wells are located near the City of Larimore.

Grand Forks-Traill Water District is participating in the North Dakota Wellhead Protection Program. Relevant information on the Wellhead Protection plan is available during normal business hours at our Thompson office. The North Dakota Department of Health has prepared a Source Water Assessment for Grand Forks-Traill Water District. Information on these programs is available to the public during normal business hours at the above listed water system. Our public water system, in cooperation with the North Dakota Department of Health, has completed the delineation and contaminant/land use inventory elements of the North Dakota Source Water Protection Program. Based on the information from these elements, the North Dakota Department of Health has determined that our source water is "moderately susceptible" to potential contaminants. No significant sources of contamination have been identified.

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This report shows our water quality and what it means.

If you have any questions about this report or concerning your water utility, please contact Neil Breidenbach, manager of Grand Forks –Traill Water District, at (701) 599-2963. We want our valued customers to be informed about their water utility. If you want to learn more, please attend any of our regularly scheduled meetings. They are held on the second Tuesday of each month at 7:00 PM in the water office at Thompson. If you are aware of non-English speaking individuals who need help with the appropriate language translation, please call Neil at the number listed above.

Grand Forks - Traill Water District would appreciate it if large volume water customers would please post copies of the Annual Drinking Water Quality Report in conspicuous locations or distribute them to tenants, residents, patients, students, and/or employees, so individuals who consume the water, but do not receive a water bill can learn about our water system.

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TEST RESULTS FOR GRAND-FORKS TRAIL WATER DISTRICT								
<u>Contaminant</u>	<u>MCLG</u>	<u>MCL</u>	<u>Level Detected</u>	<u>Unit Measurement</u>	<u>Range</u>	<u>Date (year)</u>	<u>Violation Yes/No</u> <u>Other Info</u>	<u>Likely Source of Contamination</u>
Inorganic Contaminants								
1. Copper	1.3	AL=1.3	0.0847 90 th % Value	ppm	N/A	2011	No*	Corrosion of household plumbing systems; erosion of natural deposits; leaching from wood preservatives
2. Lead	0	AL=15	0 90 th % Value	ppb	N/A	2011	No*	Corrosion of household plumbing systems, erosion of natural deposits
3. Barium	2	2	0.014	ppm	N/A	2008	No	Discharge of drilling wastes; discharge from metal refineries; erosion of natural deposits
4. Fluoride	4	4	1.41	ppm	N/A	2008	No	Erosion of natural deposits; water additive which promotes strong teeth; discharge from fertilizer and aluminum factories
5. Nitrate-Nitrite	10	10	0.28	ppm	N/A	2012	No	Runoff from fertilizer use; leaching from septic tanks, sewage; erosion of natural deposits
Disinfectants								
6. Chlorine	MRDL=4	MRDL=4.0	0.5	ppm	0.3 to 0.8	2012	No	Water additive used to control microbes
Radioactive Contaminants								
7. Gross Alpha, Inclng RA, Exclng RN & U	15	15	0.53	PCI/L	N/A	2009		Erosion of natural deposits
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9. Uranium, Combined	30		0.198	ppb	N/A	2009		Erosion of natural deposits

* No sites exceeded the lead or copper action levels in 2012.

EPA requires monitoring of over 80 drinking water contaminants. Those contaminants listed in the table above, are the only contaminants detected in your drinking water.

As you can see by the table on page 3, our system had no violations. We're proud that your drinking water meets or exceeds all Federal and State requirements. We have learned through our monitoring and testing that some contaminants have been detected. The EPA has determined that your water IS SAFE at these levels.

Unregulated contaminants are those for which the EPA has not established drinking water standards. The purpose of unregulated contaminant monitoring is to assist the EPA in determining the occurrence of unregulated contaminants in drinking water and whether future regulation is warranted.

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 the water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the Environmental Protection Agency's Safe Drinking Water Hotline (1-800-426-4791).

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Please call Neil Breidenbach, manager of Grand Forks – Traill Water District at (701) 599-2963 if you have questions concerning your drinking water.

Grand Forks – Traill Water District Board Members

Jeff Sobolik – President James West – Vice President David Bjorge - Sec. Tres.
Gary Vaagene, Andy Krogstad, Kory Sondreal, Gene Rosholt, Jim Schmaltz, Jon Gregoire,

Grand Forks – Traill Water District Employees

Neil Breidenbach, Manager
Randy Thompson, Mike Thompson, Joe Mutcher, Shari Hagen, Shelby Breiland



MEMORANDUM

TO: Community Water Systems (CWSs)

FROM: Drinking Water Program (DWP)
Division of Municipal Facilities

RE: 2012 Drinking Water Consumer Confidence Report (CCR)

DATE: February 25, 2013

The CCR Rule requires all community water systems to issue annual drinking water quality reports to their customers. Reports issued under the CCR rule will give consumers information on their drinking water and opportunities to get involved in protecting their source(s) of drinking water.

Enclosed with this supplemental update package are attachments with the latest results, violations, and health information needed to complete your 2012 CCR.

The booklet, Preparing Your Drinking Water Consumer Confidence Report, which includes frequently asked questions and helpful examples can be found at the EPA website:
http://www.epa.gov/safewater/ccr/pdfs/guide_ccr_forwatersuppliers.pdf

Also, please note the enclosed information regarding the EPA web-based program called **CCRiWriter** that allows water systems to enter data and generate a CCR specific to their system. However, if you use this program, please double check the CCRiWriter report with the checklist below to ensure that you have included all of the necessary information.

- **The 2012 CCR is to be delivered or made available to customers by July 1, 2013.**
- **A copy of your system's report must be forwarded to this office by the same date.**

THE FOLLOWING CHECKLIST WILL ASSIST YOU IN PROVIDING THE REQUIRED INFORMATION IN YOUR 2012 CCR:

1. IMPORTANT DELIVERY DATES

- Information to consecutive systems** on or before **April 1, 2013**
 - CCR to consumers and DWP** on or before **July 1, 2013**
 - Certification Form to DWP** on or before **October 1, 2013**
- (See Attachment 1 for the Certification Forms for the 2012 CCR.)

2. REQUIRED INFORMATION ABOUT THE WATER SYSTEM

- Name and telephone number of a contact person.
- Statement about how non-English speaking customers can obtain a translated copy.
- Dates and times of regularly scheduled meetings. If no such meetings occur, the name and phone number of a contact person will suffice.
- Statement asking large volume water users to distribute copies of the CCR to those consumers who do not receive a water bill. (e.g. tenants, students, employees, etc.)

3. SOURCE OF WATER

- Type of water (ground water, surface water, or a combination of the two) and the commonly-used name and location of water sources*.
- A Wellhead Protection Program or Source Water Assessment Program report has been sent to each system; therefore, a brief summary of the CWSs susceptibility to contaminants should be included in the CCR, as well as information that a copy of the report is available for review, where customers might review the report, and from whom consumers may request a copy.**

In the letter sent to each system by the Department there is a paragraph that indicates the risk...such as 'highly susceptible' or, 'not susceptible'. If you cannot find the information in your files, please contact us for assistance

The following paragraph can be used to insert the information into the CCR:

“Our public water system, in cooperation with the North Dakota Department of Health, has completed the delineation and contaminant/land use inventory elements of the North Dakota Source Water Protection Program. Based on the information from these elements, the North Dakota Department of Health has determined that our source water is _____ susceptible to potential contaminants.”

*Once again, please make special note of the enclosed document which discusses Sensitive Data in Consumer Confidence Reports and Source Water Assessments. It contains information to assist public water systems in protecting drinking water supplies. As the memorandum indicates, **community water systems are required to fully inform citizens about the source and quality of their drinking water; however, events since September 11, 2001 also require that disclosure of public information does not threaten the security of water systems.** This guidance will indicate which information must be included in the CCR and in which format it may most safely be provided.

4. DEFINITIONS

Applicable definitions, may include:

- Maximum Contaminant Level (MCL)
- Maximum Contaminant Level Goal (MCLG)
- Treatment Technique (TT)
- Action Level (AL)
- Maximum Residual Disinfectant Level Goal (MRDLG)
- Maximum Residual Disinfectant Level (MRDL)
- If a CWS operates under a variance or exemption, those definitions must be included.

5. TABLE OF DETECTED CONTAMINANTS

- The table must display the highest contaminant level used to determine compliance and the ranges of detected levels where applicable. For ease of comparison, place the MCLG, MCL, and level detected in this order in the table.
- A description of the likely or known source of each contaminant must also be included in the table.**

The MCLs, MCLGs, and Likely Sources of all regulated contaminants can be found in Attachment 2.

The most recent sample results for your system are in Attachment 3. If you would like to use results other than those listed, please contact the DWP.

Specific reporting points to remember:

- Turbidity for Surface Water Systems and CWSs that purchase surface water:
 - Lowest monthly percentage of samples meeting turbidity limits.
 - Highest single measurement.
 - Statement about why turbidity is measured.
- Lead/Copper:
 - 90th percentile value from most recent sampling.
 - Number of sampling sites that exceed the action level.
- Fecal coliform, E. coli and any Fecal Indicators(enterococci or coliphage):
Total number of positives in 2012.
- Unregulated contaminants:
 - Only report results for samples taken in 2012.
 - Statement explaining why unregulated contaminants are sampled. (If no UCMRs are detected, they need not be listed individually as undetected. In this case the system may include an additional statement that UCMR sampling occurred during the past year, that none of the contaminants were detected, and should indicate how to obtain results of the sampling.)

If a system has more than one entry point, extra columns could be added to the table. Separate reports could also be produced.

6. CRYPTOSPORIDIUM OR OTHER CONTAMINANTS

- If your system has done any testing for cryptosporidium or other constituents and the results indicated a presence, information about the monitoring and results must be included outside of the detected contaminants table(s).

7. REQUIRED HEALTH STATEMENTS

- EPA requires the inclusion of four informational statements in every CCR. The exact wording for these statements can be found in Attachment 4.

8. EDUCATIONAL LANGUAGE FOR ARSENIC and NITRATE

- IF your results page indicates the addition of educational language for any of the above contaminants, the exact wording to be used can be found in Attachment 5. **This wording only needs to be included if the results pages indicate that it is necessary.**

9. VIOLATIONS OR ACTION LEVEL EXCEEDANCES

- If your CWS incurred a violation or AL exceedance in 2012, the CCR must include an explanation of the violation or exceedance, the health effects language for that contaminant, and steps taken by the CWS to correct the violation or exceedance.
 - The health effects language for each contaminant can be found in Attachment 2.
 - All 2012 violations and AL exceedances are in Attachment 3.

10. INFORMATION IF A SYSTEM IS OPERATING UNDER A VARIANCE OR EXEMPTION

- If your CWS is operating under a variance or exemption, the CCR must include:
 - A section that explains that the system is operating under a variance or exemption, and the reasons it was issued.
 - The date that it was issued and when it is up for renewal.
 - A status report on what the system is doing to remedy the problem.
 - A notice of any opportunity for public input in the review or renewal of the variance or exemption.

Please contact LeeAnn Tillotson 701.328.5293 if you have any questions or if you need assistance completing your 2012 CCR.

Consumer Confidence Reports

Safe Drinking Water Act Chemical/Radiological Detected Results from 2008-2012

Important! Please read the following explanation first.

The following is a summary of the chemical/radiological analytes and result values that are required for your Consumer Confidence Report (CCR). The summary is divided into several sections (i.e. Inorganic Chemicals, Radiological Chemicals, etc.). Each section includes the chemical name, collection date, result, and units as required in the CCR along with other values (i.e., MCLG, Range of Detections, etc.). Refer to the footnotes at the bottom for the definitions of the specific headings and an explanation of the various units.

GRAND FORKS-TRAILL WATER DISTRICT - ND1801062

Lead/Copper ***

	Date	# Samples	Action Level(AL)	90th Percentile	Samples Exceed AL	Units
✓ COPPER 90TH PERCENTILE	8/10/2011	20	1.3	0.0847		ppm
✓ LEAD 90TH PERCENTILE	8/10/2011	20	15	No Detect	0	ppb

*** Be sure to include the required Educational Language found in attachment 4 of your 2012 CCR guidance packet.

	Date	MCL	MCLG	High Comp.	Units	Range
Inorganic Contaminants						
✓ BARIUM	2/20/2008	2	2	0.014	ppm	N/A
✓ FLUORIDE	2/20/2008	4	4	1.41	ppm	N/A
✓ NITRATE-NITRITE	2/13/2012	10	10	0.28	ppm	N/A
Radioactive Contaminants						
✓ GROSS ALPHA, INCLDNG RA, EXCLDNG RN & U	6/23/2009	15	15	0.53	pCi/l	N/A
✓ RADIUM, COMBINED (226, 228)	6/23/2009	5		0.108	pCi/l	N/A
✓ URANIUM, COMBINED	6/23/2009	30		0.198	ppb	N/A
Disinfectants						
✓ CHLORINE	11/30/2012	MRDL=4.0	MRDL=4	0.5	ppm	0.3 to 0.8

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

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

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

Highest Compliance Level: The highest level of that contaminant used to determine compliance with a National Primary Drinking Water Regulation.

Range of Detections: The lowest to the highest result value recorded during the required monitoring timeframe for systems with multiple entry points.

Abbreviations: ppb - parts per billion or micrograms per liter; ppm - parts per million or milligrams per liter; ppt - parts per trillion or nanograms per liter; ppq - parts per quadrillion or picograms per liter; NA - not applicable; ND - none detected; pCi/L - picocuries per liter (a measure of radioactivity), umho/cm = micromhos per centimeter (a measure of conductivity), obsvns = observations/field at 100 Power, IDSE = Initial Distribution System Evaluation

ATTACHMENT 4

Required Health Statements

(all four statements to be included word for word in every CCR)

(1 of 4)

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 effects can be obtained by calling the EPA's Safe Drinking Water Hotline (800-426-4791).

(2 of 4)

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:

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 stormwater 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 which limit the amount of certain contaminants in water provided by public water systems. Food and Drug Administration (FDA) regulations establish limits for contaminants in bottled water which must provide the same protection for public health.

Continued next page.....

Required Health Statements- continued from previous page

(3 of 4)

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/Centers for Disease Control and Prevention (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).

(4 of 4)

Note to PWS: This fourth statement is fairly new to the CCR instructions. Due to the short-term revisions to the Lead/Copper Rule, the following language is to be included in every CCR regardless of whether the system detected lead in any of its samples.

If present, elevated levels of lead can cause serious health problems, especially for pregnant women and young children. Lead in drinking water is primarily from materials and components associated with service lines and home plumbing. (Name of Utility) is responsible for providing high quality drinking water, but cannot control the variety of materials used in plumbing components. **Use water from the cold tap for drinking and cooking. When your water has been sitting for several hours, you can minimize the potential for lead exposure by flushing your tap for 30 seconds to 2 minutes before using water for drinking or cooking.** If you are concerned about lead in your drinking water, you may wish to have your water tested. Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available from the Safe Drinking Water Hotline or at <http://www.epa.gov/safewater/lead>.

ATTACHMENT 2

MCLs
MCLGs
Likely Sources
Health Effects Language

Appendix A to Subpart O of Part 141—Regulated Contaminants

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
Microbiological contaminants:						
Total Coliform Bacteria	MCL: (systems that collect ≥ 40 samples/month) 5% of monthly samples are positive; (systems that collect < 40 samples/month) 1 positive monthly sample		MCL: (systems that collect ≥ 40 samples/month) 5% of monthly samples are positive; (systems that collect < 40 samples/month) 1 positive monthly sample	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.
Fecal coliform and E. coli	0		0	0	Human and animal fecal waste	Fecal coliforms and E. coli 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.
Fecal Indicators (enterococci or coliphage)	TT		TT	N/A	Human and animal fecal waste	Fecal indicators are microbes whose presence indicates that the water may be contaminated with human or animal wastes. Microbes in these wastes can cause short-term health 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.

Inorganic contaminants:									
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.		
Arsenic (ppb)	0.010	1000		10	10	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		
Bromate (ppb)	.010	1000		10	0	By-product of drinking water disinfection	Some people who drink water of containing bromate in excess of the MCL over many years may have an increased risk of getting cancer.		
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.		
Chloramines (ppm)	MRDL=4			MRDL=4	4	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.		

Fluoride (ppm)	4	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.
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	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	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.

Carbofuran (ppb)	.04	1000	40	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	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.
Dalapon (ppb)	.2	1000	200	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	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 toxic effects such as weight loss, liver enlargement or possible reproductive difficulties.
Di(2-ethylhexyl) phthalate (ppb)	.006	1000	6	0	0	Discharge from rubber and chemical factories	Some people who drink water containing di(2-ethylhexyl) phthalate well 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.
Dibromochloropropane (ppt)	.0002	1,000,000	200	0	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 problems and may have an increased risk of getting cancer.
Dinoseb (ppb)	.007	1000	7	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	20	Runoff from herbicide use	Some people who drink water containing diquat in excess of the MCL over many years could get cataracts.

Hexachlorobenzene (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.
Hexachlorocyclopentadiene (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.
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.

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.
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.
Tetrachloroethylene (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.

Key

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

(65 FR 26024, May 4, 2000, as amended at 65 FR 76749, Dec 7, 2000; 66 FR 7064, Jan 22, 2001; 67 FR 70855, Nov. 27, 2002; 67 FR 73011, Dec. 9, 2002; 68 FR 14506, Mar.25, 2003; 71 FR 65652, Nov 8, 2006)

ATTACHMENT 3

Most Recent Sample Results
Violations
Action Level Exceedances

Consumer Confidence Reports

Safe Drinking Water Act Chemical/Radiological Detected Results from 2008-2012

Important! Please read the following explanation first.

The following is a summary of the chemical/radiological analytes and result values that are required for your Consumer Confidence Report (CCR). The summary is divided into several sections (i.e. Inorganic Chemicals, Radiological Chemicals, etc.). Each section includes the chemical name, collection date, result, and units as required in the CCR along with other values (i.e., MCLG, Range of Detections, etc.). Refer to the footnotes at the bottom for the definitions of the specific headings and an explanation of the various units.

HATTON CITY OF - ND4900465

Lead/Copper ***

	Date	# Samples	Action Level(AL)	90th Percentile	Samples Exceed AL	Units
✓ COPPER 90TH PERCENTILE	9/17/2011	10	1.3	0.19		ppm
✗ LEAD 90TH PERCENTILE	9/17/2011	10	15	1.95	0	ppb

*** Be sure to include the required Educational Language found in attachment 4 of your 2012 CCR guidance packet.

	Date	MCL	MCLG	High Comp.	Units	Range
✓ CHLORINE	1/31/2012	MRDL=4.0	MRDL=4	0.4	ppm	0.3 to 0.5

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

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

(MRDLG) Maximum Residual Disinfectant Level Goal: 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.

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

Highest Compliance Level: The highest level of that contaminant used to determine compliance with a National Primacy Drinking Water Regulation.

Range of Detections: The lowest to the highest result value recorded during the required monitoring timeframe for systems with multiple entry points.

Abbreviations: ppb - parts per billion or micrograms per liter; ppm - parts per million or milligrams per liter; ppt - parts per trillion or nanograms per liter; ppq - parts per quadrillion or picograms per liter; NA - not applicable; ND - none detected; pCi/L - picocuries per liter (a measure of radioactivity), umho/cm = micromhos per centimeter (a measure of conductivity), obsvns = observations/field at 100 Power, IDSE = Initial Distribution System Evaluation

ATTACHMENT 4

Required Health Statements

(all four statements to be included word for word in every CCR)

(1 of 4)

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 effects can be obtained by calling the EPA's Safe Drinking Water Hotline (800-426-4791).

(2 of 4)

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:

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 stormwater 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 which limit the amount of certain contaminants in water provided by public water systems. Food and Drug Administration (FDA) regulations establish limits for contaminants in bottled water which must provide the same protection for public health.

Continued next page.....

Required Health Statements- continued from previous page

(3 of 4)

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/Centers for Disease Control and Prevention (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).

(4 of 4)

Note to PWS: This fourth statement is fairly new to the CCR instructions. Due to the short-term revisions to the Lead/Copper Rule, the following language is to be included in every CCR regardless of whether the system detected lead in any of its samples.

If present, elevated levels of lead can cause serious health problems, especially for pregnant women and young children. Lead in drinking water is primarily from materials and components associated with service lines and home plumbing. (Name of Utility) is responsible for providing high quality drinking water, but cannot control the variety of materials used in plumbing components. **Use water from the cold tap for drinking and cooking. When your water has been sitting for several hours, you can minimize the potential for lead exposure by flushing your tap for 30 seconds to 2 minutes before using water for drinking or cooking.** If you are concerned about lead in your drinking water, you may wish to have your water tested. Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available from the Safe Drinking Water Hotline or at <http://www.epa.gov/safewater/lead>.

ATTACHMENT 5

Educational Language for Arsenic and Nitrate

(to be included word for word when applicable)

Please refer to Sample Results page in Attachment 3 to determine whether or not this information is required for your system.

Arsenic:

At Arsenic Levels > 5 ug/L, but ≤ 10 ug/L use this Educational Language:

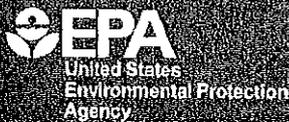
While your drinking water meets EPA's standard for arsenic, it does contain low levels of arsenic. EPA's standard balances the current understanding of arsenic's possible health effects against the costs of removing arsenic from drinking water. EPA continues to research the health effects of low levels 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.

At Arsenic Levels > 10 ug/L, use this Health Effects Language:

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.

Nitrate

Nitrate in drinking water at levels above 10 ppm is a health risk for infants of less than 6 months of age. Infants below the age of six months who drink water containing Nitrate in excess of 10 ppm water can become seriously ill and, if left untreated, may die. Symptoms include shortness of breath and "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 advice from your health care provider.



CCR*i*Writer

*The CCR*i*Writer is a new Internet-based tool that will help water systems create their annual Consumer Confidence Report (CCR) by answering required questions and filling in blanks.*

	The CCR <i>i</i> Writer is a web-based program that allows water system operators or designated personnel to enter data and generate a CCR.
How does it work?	After logging in, you will see a series of questions about your system's source water and detected contaminants. After you finish answering the questions, you may print or download the completed report.
Where can I get one?	CCR <i>i</i> Writer is a free service for water systems available at: www.ccriwriter.com
How quick is it?	CCR <i>i</i> Writer takes a short time to fill out if you have your contaminant monitoring results handy. Required information, such as definitions, are already included to save you time.
Is my information secure?	Yes. You will designate a user name and password which ensures you and only personnel you authorize are able to access or change a system's information.
What about new rules that are finalized?	CCR <i>i</i> Writer will add all new Federal requirements needed to prepare CCR reports, as needed, so you do not have to worry about new changes.
What if I need to make changes to the report?	The website allows you to edit information you entered or download the report to make changes as necessary (i.e., if your State has additional requirements).
What will I need to create my CCR?	Because the CCR <i>i</i> Writer is internet driven, you will need access to the internet and the monitoring results you report in your annual CCR.
What if I operate more than one water system?	You may use the CCR <i>i</i> Writer to create separate CCRs for as many systems as you need; there is no limit.
Can I use it year after year?	Yes! You can save reports under different names. Each report is stored and accessible by the user name and password you designate.
	At www.ccriwriter.com or contact Maura Browning at 202 564-2550 for more information.



UNITED STATES ENVIRONMENTAL PROTECTION AGENCY
WASHINGTON, D.C.

OFFICE OF
WATER

Dec 5 2001

MEMORANDUM

SUBJECT: Sensitive Data in Consumer Confidence Reports and Source Water Assessments

FROM: Cynthia C. Dougherty, Director /s/
Office of Ground Water and Drinking Water OW (4601M)

TO: Water Management Division Directors
Regions I - X

The Office of Ground Water and Drinking Water (OGWDW) encourages States and public water systems to protect drinking water supplies through all appropriate means. While the 1996 Amendments to the Safe Drinking Water Act (SDWA) require significant new efforts to fully inform citizens about the source, quality and potential threats to their drinking water, events since September 11 require that we ensure such disclosures of public information provide for the security of those same citizens. Some people have suggested that the statutory and regulatory provisions for Consumer Confidence Reports (CCR) and Source Water Assessments (SWA) may require the unnecessary release of information that could increase the vulnerability of drinking water supplies. We believe this is not the case and that existing requirements provide adequate flexibility to address the security needs of water systems. This memorandum clarifies how to strike the appropriate balance between providing near-term safeguards in the current emergency and long-term public understanding for participation in source water protection.

Consumer Confidence Reports

Water systems of all sizes currently have the flexibility to address security concerns. The CCR Rule at 40 CFR 141.155 requires only that a water system list the source and general location of its water supply. In guidance to States, EPA said that for surface waters, listing the water body where the intake was located "would be appropriate." For ground water, "the name of the principal aquifer would be appropriate." In addition, the need to provide a general location can be addressed in a broad way within the CCR, without disclosing exact locations of water sources. Therefore, we do not need a regulatory or policy change to address the issue of information that water systems believe may be sensitive at this time.

Latitude/Longitude Data Submission

In your discussion with the states, please reaffirm their response to the continuing requirement to report public water system latitude and longitude data as part of their inventory and compliance data reporting to EPA. You can let them know that since 1999 we have implemented a process to protect latitude and longitude data from misuse and will continue to do so. The Federal government role in ensuring the security of public water systems also demands that we have ready access to accurate and complete public water system intake, well (or wellfield) and treatment plant locational data.

Conclusion

It is fully possible to serve the dual purposes of adequately informing the public and ensuring the security of public water systems. EPA will continue to work closely with States and public water systems to coordinate how best to achieve these important public health protection objectives. I ask that you share this memorandum with your State Drinking Water, Watershed and Ground Water Program Administrators so that they understand our intent to protect public water systems and in the long-term continue to provide information to the public necessary to support their participation in water supply protection.

I appreciate your continued efforts in protecting the drinking water of the United States during these times of stress and look forward to your suggestions of further steps that we can take to do so. If you have further questions concerning this matter, please contact Clive Davies, Acting Chief, Protection Branch, concerning CCR at 202-260-1421/202-564-3938 or Joan Farrelly, Chief, Prevention Branch, concerning Source Water Assessments at 202-260-6672/202/564-3867.