PWSID ME0090540

FARMINGTON VILLAGE CORP WATER DEPT

2019 Consumer Confidence Report

Water System Conta	act Name:		
Address:			
Telephone #:	Fax#:	Email:	
	Report Covering Calendar Year: Scheduled Meeting(s):	Jan 1 - Dec 31, 2019	
Source Water Inf Description of Water S			
Water Treatment & F	iltration Information:		

Source Water Assessment:

General Information

The sources of drinking water include rivers, lakes, ponds, and wells. As water travels over the surface of the land or through the ground, it dissolves naturally occurring minerals and radioactive material and can pick up substances resulting from human or animal activity. The Maine Drinking Water Program (DWP) has evaluated all public water supplies as part of the Source Water Assessment Program (SWAP). The assessments included geology, hydrology, land uses, water testing information, and the extent of land ownership or protection by local ordinance to see how likely our drinking water source is to being contaminated by human activities in the future. Assessment results are available at town offices and public water systems.

Definitions:

Maximum Contaminant Level (MCL): The highest level of a contaminant that is allowed in drinking water.

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

Running Annual Average (RAA): A 12 month rolling average of all monthly or quarterly samples at all locations. Calculation of the RAA may contain data from the previous year.

Locational Running Annual Average (LRAA): A 12 month rolling average of all monthly or quarterly samples at specific sampling locations. Calculation of the RAA may contain data from the previous year.

Action Level (AL): The concentration of a contaminant that, if exceeded, triggers treatment or other requirements that 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 microbial 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.

Units:

ppm = parts per million or milligrams per liter (mg/L). pCi/L = picocuries per liter (a measure of radioactivity). pos = positive samples. pCi/L = picocuries per liter (a measure of radioactivity). pos = positive samples. pci/L = picocuries per liter (a measure of radioactivity).

Water Test Results

Contaminant	Date	Results	MCL	MCLG	Possible Sources of Contamination
Microbiological COLIFORM (TCR) (1)	Dec 2019	1 pos	1 pos/mo or 5%	0 pos	Naturally present in the environment.
Inorganics					
BARIUM	3/26/2018	0.01 ppm	2 ppm	2 ppm	Discharge of drilling wastes. Discharge from metal refineries. Erosion of natural deposits.
NITRATE (5)	4/10/2019	0.18 ppm	10 ppm	10 ppm	Runoff from fertilizer use. Leaching from septic tanks, sewage. Erosion of natural deposits.
Lead/Copper					
COPPER 90TH% VALUE (4)	1/1/2015 - 12/31/2017	0.659 ppm	AL = 1.3 ppm	1.3 ppm	Corrosion of household plumbing systems.
LEAD 90TH% VALUE (4)	1/1/2015 - 12/31/2017	8.5 ppb	AL = 15 ppb	0 ppb	Corrosion of household plumbing systems.

Chlorine Residual (Add chlorine residual information)

CHLORINE RESIDUAL Range (____- ppm) MRDL=4 ppm MRDLG= By-product of drinking water chlorination. 4 ppm

Notes

- 1) Total Coliform Bacteria: Reported as the highest monthly number of positive samples, for water systems that take less than 40 samples per month.
- 2) E. Coli: E. coli are bacteria whose presence indicates that the water may be contaminated with human or animal wastes. Human pathogens in these wastes can cause short-term effects, such as diarrhea, cramps, nausea, headaches, or other symptoms. They may pose a greater health risk for infants, young children, the elderly, and people with severely-compromised immune systems.
- 3) Fluoride: For those systems that fluoridate, fluoride levels must be maintained between 0.5 to 1.2 ppm. The optimum level is 0.7 ppm.
- 4) Lead/Copper: Action levels (AL) are measured at consumer's tap. 90% of the tests must be equal to or below the action level.
- 5) 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 advice from your health provider.
- 6) Arsenic: While your drinking water may meet EPA's standard for Arsenic, if it contains between 5 to 10 ppb you should know that the standard balances the current understanding of arsenic's possible health effects against the costs of removing it 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. Quarterly compliance is based on running annual average.
- 7) Gross Alpha: Action level over 5 pCi/L requires testing for Radium 226 and 228. Action level over 15 pCi/L requires testing for Uranium. Compliance is based on Gross Alpha results minus Uranium results = Net Gross Alpha.
- 8) Radon: The State of Maine adopted a Maximum Exposure Guideline (MEG) for Radon in drinking water at 4000 pCi/L, effective 1/1/07. If Radon exceeds the MEG in water, treatment is recommended. It is also advisable to test indoor air for Radon.
- 9) TTHM/HAA5: Total Trihalomethanes and Haloacetic Acids (TTHM and HAA5) are formed as a by-product of drinking water chlorination. This chemical reaction occurs when chlorine combines with naturally occurring organic matter in water. Compliance is based on running annual average.

All other regulated drinking water contaminants were below detection levels.

Secondary Contaminants (You are not required to list detects for secondary contaminants, but this information, particularly sodium levels, might be useful to your customers. The decision to supply this information in your CCR is up to you.)

IRON	0.29 ppm	3/26/2018
CHLORIDE	26 ppm	3/26/2018
MAGNESIUM	1.8 ppm	3/26/2018
SODIUM	16 ppm	3/26/2018
SULFATE	9 ppm	3/26/2018
NICKEL	0.00062 ppm	3/26/2018
MANGANESE	0.04 ppm	3/26/2018
ZINC	0.0091 ppm	3/26/2018

Health Information

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. 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 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 runoff, and septic systems.

Radioactive Contaminants, which can be naturally-occurring or be the result of oil and gas production and mining activities.

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) or at the following link:

https://www.epa.gov/ccr/forms/contact-us-about-consumer-confidence-reports

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. Farmington Village Corp Water Dept is responsible for providing high quality drinking water, but cannot control the variety of materials used in plumbing components. 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 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 the following link:

http://www.epa.gov/safewater/lead

Violations

No Violations in 2019

Waiver Information (to be included in the CCR for systems that were granted a waiver)

In 2017, our system was granted a 'Synthetic Organics Waiver.' This is a three year exemption from the monitoring/reporting requirements for the following industrial chemical(s): TOXAPHENE/CHLORDANE/PCB, HERBICIDES, CARBAMATE PESTICIDES, SEMIVOLATILE ORGANICS. This waiver was granted due to the absence of these potential sources of contamination within a half mile radius of the water source(s).

Maine Drinking Water Program Consumer Confidence Report Certification Form

WSID#: <u>WIE0090340</u>	
Name of Public Water System: FARMINGTON VILLA	AGE CORP WATER DEPT
 Instructions: Distribute copies of your Consumer Confidence water system by JULY 1ST. Use the checklist below to check off which met select AT LEAST ONE option from EACH of 	e Report (CCR) to all users served by your public hods you use to distribute your CCR- you MUST f the two columns below. and submit with a copy of the CCR distributed to
CHECK ALL APPLICABLE DISTRIBUTION ME	ETHODS (at least 1 option from each column):
Direct Delivery Method to each customer	Good Faith Effort to reach non-bill paying or other consumers
☐ Mail paper copy	☐ Mailing the CCR to postal patrons within the service area (attach zip codes used).
☐ Hand Deliver ☐ Mail notice that CCR is available on website via a direct URL (attach copy of notice i.e. bill)	Delivery of multiple copies to single bill addresses serving several persons such as: apartments, businesses, and large private
WWW	employers. Please list/attach copy. Posting on Internet at URL
☐ Email direct URL	www
www	☐ Posting the CCR in public places (attach a list of locations).
☐ Email CCR as a file attachment	☐ Publication of CCR in local newspaper (attach copy).
☐ Email CCR in message ☐ Publication of CCR in local newspaper	Advertising availability of the CCR in news media (attach copy of announcement).
(attach copy). Approval needed.	Delivery to community organizations (attach a list).
☐ Notify customers of availability of paper copy (only systems less than 500 people)	☐ Availability of paper copy
Certification of Distribution and Accuracy of C I certify that the information in the attached/enclosed C in the Fillable CCR provided by the Drinking Water Pr by the methods noted above.	CCR contains all data and required language found
Name of licensed designated operator:	,
Signature:	Date:

Email CCR form and attachments to your Public Water System Inspector or mail to: Maine Drinking Water Program, 11 State House Station, Augusta, ME 04333-0011

Date distribution completed: ___

^{**}Your CCR must be available in paper copy to any consumer who requests it.