

2015 Annual Drinking Water Quality Report

Princeton Water District

Princeton, Maine
PWSID ME0092388

We're pleased to present to you our Annual Drinking Water Quality Report, also known as the Consumer Confidence Report. This report, a requirement of the 1996 amendments to the Safe Drinking Water Act, is designed to inform you about the quality water and services 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.

WATER SOURCE

Our water source consists of a drilled groundwater well located on premises. The well is treated with hypochlorination to remove potential microbiological contaminants. Princeton Water District maintains 40 combined service connections that serve approximately 115 people.

SOURCE WATER ASSESSMENT

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 public water suppliers, town offices, and the DWP. For more information about the SWAP, please contact the DWP at telephone 207-287-2070.

If you have any questions about this report or concerning your water system, please contact Wendy Goodwin at telephone number 207-796-2744 or at mailing address P.O. Box 408, Princeton, Maine 04668. We want our valued customers to be informed about their water system. If you want to learn more, please contact us about the time and place of regularly scheduled meetings.

WATER QUALITY

Princeton Water District routinely monitors for contaminants in your drinking water according to Federal and State laws. The following table shows any detection resulting from our monitoring for the period of January 1st to December 31st, 2015.

In 2014, due to efforts to protect the water supply, 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): herbicides, carbamate pesticides, toxaphene/chlordane/PCB and 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. The state of Maine Drinking Water Program grants a waiver only upon a finding that "it will not result in an unreasonable risk to health."

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. All sources of drinking water are subject to potential contamination by substances that are naturally occurring or man-made. Contaminants that may be present in source water include:

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

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

Pesticides and herbicides may come from a variety of sources such as agriculture, urban storm water runoff, and residential uses.

Organic chemical contaminants, including synthetic and volatile organic chemicals, are by-products of industrial processes and petroleum production, and can also come from gas stations, urban storm water runoff, and septic systems. **Radioactive contaminants** 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, U.S. Environmental Protection Agency (EPA) prescribes regulations which limit the amount of certain contaminants in water provided by public water systems. U.S. Food and Drug Administration (FDA) regulations establish limits for contaminants in bottled water which must provide the same protection for public health.

The table below lists all of the drinking water contaminants that were detected throughout water quality monitoring and testing. The presence of contaminants in the water does not necessarily indicate that the water poses a health risk.

The Princeton Water District had no violations in 2015

TEST RESULTS						
Unless otherwise noted, testing was done in 2015.						
Contaminant	Violation Y/N	Level Detected	Unit Measurement	MCLG	MCL	Likely Source of Contamination
Microbiological Contaminants						
Total Coliform Bacteria	N	0 positive	Highest monthly # of positive samples	0 positive	1 positive	Naturally present in the environment.
Radionuclides						
Uranium-238 (5/28/14)	N	1.4	ppb	0	30	Erosion of natural deposits.
Inorganic Contaminants						
Antimony, Total (4/29/15)	N	4.9	ppb	6	6	Discharge from petroleum refineries, fire retardants, ceramics, electronics, and solder.
Arsenic** (3/24/15)	N	11 ppb - highest 4 ppb - RAA	ppb	0	10	Erosion of natural deposits. Runoff from orchards, glass and electronics production wastes.
Barium (5/28/14)	N	0.066	ppm	2	2	Discharge of drilling wastes. Discharge from metal refineries. Erosion of natural deposits.
Chromium (5/28/14)	N	2	ppb	100	100	Discharge from steel and pulp mills. Erosion of natural deposits.
Fluoride (5/28/14)	N	0.1	ppm	4	4	Erosion of natural deposits. Water additive that promotes strong teeth. Discharge from fertilizer and aluminum factories.
Copper * (1/1/15-12/31/15)	N	0.43	ppm	1.3	AL=1.3	Corrosion of household plumbing systems.
Lead * (1/1/15-12/31/15)	N	11	ppb	0	AL=15	Corrosion of household plumbing systems.
Nitrate (3/24/15)	N	0.05	ppm	10	10	Runoff from fertilizer use. Leaching from septic tanks, sewage. Erosion of natural deposits.
* = Reported results are the 90 th percentile value (the value that 90% of all samples are less than).						
Disinfection By-Products						
TTHM [Total Trihalomethanes] (7/10/14)	N	4.9	ppb	0	80	By-product of drinking water chlorination.

Note: The state allows us to monitor for some contaminants less than once per year because the concentrations of these contaminants do not change frequently. Not all contaminants are tested for every year due to monitoring waivers and therefore we must use the most recent round of sampling. Some of our data is more than one year old, however, is limited to no older than 5 years.

Definitions:

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

system must follow.

Maximum Contaminant Level (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 (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 Disinfection 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 Disinfection 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.

Not Applicable (N/A) - Does not apply

Running Annual Average (RAA) - The average of all monthly or quarterly samples for the last year at all sample locations.

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

Variations, Exemptions, and Waivers - State or EPA permission not to meet an MCL, a treatment technique or test for a given contaminant under certain conditions.

Units:

Nephelometric Turbidity Unit (NTU) - nephelometric turbidity unit is a measure of the clarity of water. Turbidity in excess of 5 NTU is just noticeable to the average person.

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.

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.

Picocuries per liter (pCi/L) - A measure of the radioactivity in water.

Notes:

Antimony: 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: The U.S. EPA adopted the new MCL standard of 10 ppb, in October 2001. Water systems must meet this new standard by January 2006.

****Arsenic:** While your drinking water meets the previous EPA standard of 50 ppb for arsenic, it does contain low levels of arsenic. EPA's newly adopted standard of 10 ppb 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.

Barium: Some people who drink water containing barium in excess of the MCL over many years could experience an increase in their blood pressure.

Total Coliform Bacteria: Reported as the highest monthly number of positive samples, for water systems that take less than 40 samples per month.

Fluoride: For those systems that fluoridate, fluoride levels must be maintained between 0.5 to 1.2 ppm. The optimum level is 0.7ppm.

Lead/Copper: Action levels (AL) are measured at consumer's tap. 90% of the tests must be equal to or below the action level; therefore, the listed results above have been calculated and are listed as the 90th percentile.

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 care provider.

Gross Alpha: Action level over 5pCi/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.

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. The U.S.EPA is proposing setting federal standards for Radon in public drinking water.

TTHM/HAA5: Total Trihalomethanes (TTHM) and Haloacetic Acids (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.

Uranium: The U.S. EPA adopted the new MCL standard of 30 ug/L(ppb), in December 2000. Water systems must meet this new standard after December 2003.

IMPORTANT INFORMATION

Since our system chlorinates its water, we are required to report our annual average for chlorine residual.

Chlorine Residual was found to be **0.27 ppm**, with a range of 0.11 ppm to 0.49 ppm.

As you can see by the table, our system had no violations. We're proud that your drinking water meets all Federal and State requirements.

All 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 at 1-800-426-4791.

For most people, the health benefits of drinking plenty of water outweigh any possible health risk from these contaminants. However, 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/Center of Disease Control (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 (800-426-4791).

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. We are 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 thirty (30) seconds to two (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 <http://www.epa.gov/safewater/lead>.

We, at Princeton Water District, work hard to provide top quality water to every tap. We ask that all our customers help us protect and preserve our drinking water resources, which are the heart of our community, our way of life, and our children's future. Please contact us with any questions. Thank you for working together for safe drinking water.