# **PWSID** ME0090730 JACKMAN UTILITY DISTRICT **2024 Consumer Confidence Report**

General Informatio			
Water System Contact	t Name:		
Address:			
Telephone #:	Fax#:	Email:	
Re	eport Covering Calendar Year:	Jan 1 - Dec 31, 2024	
Upcoming Regularly Sch	neduled Meeting(s):		
No scheduled meetin	ngs at this time. Please contact for n	nore information.	
Source Water Infor	rmation		
Description of Water Sou	urce: Surface Water Intakes: 1 (	(Big Wood Pond)	
Water Treatment & Filt	ration Information:		

#### Source Water Assessment:

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:**

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

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.

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.

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.

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.

Secondary Maximum Contaminant Level (SMCL): Non-mandatory water quality standards.

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

#### Units:

ppm = parts per million or milligrams per liter (mg/L). pCi/L = picocuries per liter (a measure of radioactivity). ppb = parts per billion or micrograms per liter (µg/L). ppt = parts per trillion or nanograms per liter (ng/L) MFL = million fibers per liter. pos = positive samples.

Water Test Results Contaminant	Date	Results	MCL	MCLG	Possible Sources of Contamination
Microbiological COLIFORM (TCR) (9)	2024	0 pos	1 pos/mo or 5%	0 pos	Naturally present in the environment.
Inorganics BARIUM	4/22/2024	0.0031 ppm	2 ppm	2 nnm	Discharge of drilling wastes. Discharge from metal
NITRATE (6)	4/22/2024	0.1 ppm	10 ppm		refineries. Erosion of natural deposits. Runoff from fertilizer use. Leaching from septic
Lead/Copper					tanks, sewage. Erosion of natural deposits.
COPPER 90TH% VALUE (5) 7.	/1/2024 - 12/31/202 Rai	nge (0.0066-0.098 ppm	AL = 1.3 ppm	1.3 ppm	Corrosion of household plumbing systems.
LEAD 90TH% VALUE (5) 7.	/1/2024 - 12/31/202	4 6.7 ppb Range (0-10 ppb)	AL = 15 ppb		Corrosion of household plumbing systems.
	ing sites exceeding t		1	tap sampling	data are available upon request
Disinfectants and	Disinfecti	on Byprodu	lcts		
MCS TOTAL HALOACETIC ACIDS (HAA5) (10)	LRAA(2024)	40 ppb Range (33-51 ppb)	60 ppb	0 ppb	By-product of drinking water chlorination.
TOTAL TRIHALOMETHANE (TTHM) (10)	LRAA(2024)	66 ppb Range (42-102 ppb)	80 ppb	0 ppb	By-product of drinking water chlorination.
Chlorine Residua	l (Add ch	lorine residu	ual inform	ation)	
CHLORINE RESIDUAL	Range (	ppm)	MRDL=4 ppm	MRDLG= 4 ppm	By-product of drinking water chlorination.
Turbidity (Add tu	rbidity in	formation, l	nighest mo	onthly	reading in 2024)
TURBIDITY		NTU	5 ntu	N/A	Soil runoff.
<ul> <li>Notes:</li> <li>1) 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.</li> <li>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.</li> <li>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.</li> <li>4) Gross Alpha: Action level over 5 pCi/L requires testing for Radium 226 and 228. Action level over 15 pCi/L requires testing for Oranium. Compliance is based on Gross Alpha results minus Uranium results = Net Gross Alpha.</li> <li>5) Lead/Copper: Action levels (AL) are measured at consumer's tap. 90% of the tests must be equal to or below the action level.</li> <li>6) 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.</li> <li>7) PFAS: The degree of risk depends on the level of chemicals and duration of exposure. Laboratory studies of animals exposed to high doses of PFAS have shown numerous</li></ul>					
diarrhea and associated headaches.					

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.)

SODIUM	9.9 ppm	4/22/2024
SULFATE	1 ppm	4/22/2024
MAGNESIUM	0.76 ppm	4/22/2024
MANGANESE	0.028 ppm	4/22/2024
ZINC	0.0021 ppm	4/22/2024
CHLORIDE	7 ppm	4/22/2024

## **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. 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) or at the following link:

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

## Lead and Copper

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. Your public water system is responsible for providing high quality drinking water and removing lead pipes, but cannot control the variety of materials used in plumbing components in your home. You share the responsibility for protecting yourself and your family from the lead in your home plumbing. You can take responsibility by identifying and removing lead materials within your home plumbing and taking steps to reduce your family's risk. Before drinking tap water, flush your pipes for several minutes by running your tap, taking a shower, doing laundry or a load of dishes. You can also use a filter certified by an American National Standards Institute accredited certifier to reduce lead in drinking water. If you are concerned about lead in your water and wish to have your water tested, contact your public water system. Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available at: <u>http://www.epa.gov/safewater/lead</u>

Our system completed a Lead Service Line Inventory as required by the Revised Lead and Copper Rule. It is publicly accessible at this location:

## Violations

No Violations in 2024

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

In 2022, 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).

Please share this information with anyone who drinks this water (or their guardians), especially those who may not have received this report directly (for example, people in apartments, nursing homes, schools, and businesses). You can do this by posting this report in a public place or distributing copies by hand, mail, email, or another method.

# **Maine Drinking Water Program Consumer Confidence Report Certification Form**

Water System Name: JACKMAN UTILITY DISTRICT **PWSID#:** ME0090730

### **INSTRUCTIONS:**

- 1. Distribute copies of your Consumer Confidence Report (CCR) to all users served by your public water system by JULY 1<sup>S1</sup>.
- 2. Use the checklist below to check off the methods you use to distribute your CCR. You MUST select AT LEAST ONE option from EACH of the two lists below.
- 3. Please complete the certification section below and submit it, along with a copy of the CCR you distributed to customers, to the Maine Drinking Water Program (DWP) by **OCTOBER 1**<sup>ST</sup>.

## Primary Method of Distribution - you MUST use at least one of these methods:

CHECK IF USED	Direct Delivery Method- to get report to each customer	ADDITIONAL INFO
	Mail hard copy	
	Hand deliver	
	Mail notice that CCR is available on website Note: MUST include a direct URL ( <u>CCR must</u>	Provide url:
	open when URL is clicked)	Attach copy of notice (i.e. bill)
	Email the direct URL $\implies$	Attach copy of email
	Email the CCR as a file attachment $\implies$	Attach copy of email
	Email CCR in message $\implies$	Attach copy of message

## AND

### Secondary Method of Distribution - you MUST use at least one of these methods:

CHECK IF USED	Good Faith Effort to reach non-bill-paying con	sumers	ADDITIONAL INFO
	Do a postal patron mailing with service area	$\implies$	Provide zip codes used in postal patron mailing
	Deliver multiple copies to single bill addresses servi several people- i.e. apartment buildings, businesses, large private employers		Provide list of businesses/ facilities receiving copies
	Posting on internet at URL	$\implies$	URL:
	Post the CCR in public places	$\implies$	Provide a list of where posted
	Publication of CCR in local newspaper	$\implies$	Provide copy of newspaper notice
	Advertising availability of CCR in news media	$\implies$	Provide copy of announcement
	Deliver to community organizations	$\implies$	Provide list of facilities
	Availability of paper copy	$\implies$	Provide method of sharing this info
	Population <500 - complete delivery by 1 <sup>st</sup> method		Only if you provided 100% distribution to all consumers by your 1 <sup>st</sup> method

Date CCR Distribution Completed:				
<b>Certification of Distribution and Accuracy of Consumer Confidence Report</b> I certify that the information in the attached CCR contains all data and required language found in the Fillable CCR provided by the DWP and that the CCR was distributed by the methods noted above.				
Licensed designated operator:				
	Please print			
Signature:	Date:	(must be after date of distribution)		
Email a copy of CCR, completed certification & accompanying documents to <u>DWPMOR@maine.gov</u> or mail to: ME DWP, 11 State House Station, 286 Water Street, Augusta, ME 04333-0011				