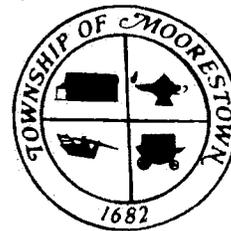


The Township of Moorestown

601 East Third Street • Moorestown • New Jersey 08057-4223

(856) 235-3520



March 4, 2016

This letter is being sent to provide clarification of a written notification that was mailed to your home last weekend and to reassure you that your water is safe. All documents referred to in this letter (*italicized for your convenience*) will be posted on the Township's website. In order to have a full understanding of the situation, please know the following:

- At no time was there a threat to public health or safety as a result of this issue.
- The notification process that was employed was the same process that was employed (at the written direction of the NJDEP) the last time Moorestown had a positive total coliform result in 2010.
- The notification that you received last week was based on *a template provided by the NJDEP* and the NJDEP further revised the notification before it was sent out.

The Township collects 24 samples per month (we are required to collect 20), from 24 different NJDEP approved locations to test for total coliform. Last February (2015), a single location had two positive results which triggered a MCL violation. Within a week, that location tested negative. No other locations tested positive and the location that had the two positive results last year has not had another positive result since. These samples also test for E coli, and all tests for E. coli have been negative.

As a result of the MCL violation, Moorestown contacted the NJDEP and NJ American Water Company (at the time, 100% of our water was from NJAWC), and posted a notification of the positive test results on the Township website. We also planned to (and will) have this information in our 2016 Consumer Confidence Report. Our communication with the NJDEP included a completed *Public Notification Certification Form* to tell the NJDEP how we satisfied our notification requirements.

At the direction of the NJDEP, we also completed a *Level 1 Assessment Form*. This assessment was completed on March 9, 2015 and concluded that the positive test results were likely the result of an issue with the tap where the samples were taken and not with the water system as a whole.

Unfortunately, the NJDEP did not inform Moorestown of the need to mail notification to all customers of the water system until February, 2016. The notification you received was based on the NJDEP's template and included revisions they provided.

I apologize for the confusion and concerns this issue has caused and hope that this letter helps provide the clarification that Moorestown's residents deserve. The most important thing for you to know is that Moorestown's water was and is safe.

If you have any questions or concerns, please contact me at bbutler@moorestown.nj.us or 856-235-3520.



Bill Butler

Moorestown Utilities Superintendent

IMPORTANT INFORMATION ABOUT YOUR DRINKING WATER

Tests Show Coliform Bacteria in Moorestown Water Dept's Water

Our water system recently violated a drinking water standard. Although this is not an emergency, as our customers, you have a right to know what happened, what you should do, and what we are doing to correct this situation.

We routinely monitor for the presence of drinking water contaminants. We took [number] samples for coliform bacteria during [month]. [Number/percentage] of those samples showed the presence of coliform bacteria. The standard is that no more than [1 sample per month/5 percent of our samples] may do so.

What should I do?

- You do not need to boil your water or take other corrective actions. However, if you have specific health concerns, consult your doctor.
- If you have a severely compromised immune system, have an infant, are pregnant, or are elderly, you may be at increased risk and should seek advice from your health care providers about drinking this water. General guidelines on ways to lessen the risk of infection by microbes are available from EPA's Safe Drinking Water Hotline at 1-800-426-4791.

What does this mean?

This is not an emergency. If it had been you would have been notified within 24 hours. Total coliform bacteria are generally not harmful themselves. **Coliforms are bacteria which 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.**

Usually, coliforms are a sign that there could be a problem with the treatment or distribution system (pipes). Whenever we detect coliform bacteria in any sample, we do follow-up testing to see if other bacteria of greater concern, such as fecal coliform or *E. coli*, are present. **We did not find any of these bacteria in our subsequent testing.** If we had, we would have notified you immediately. However, we are still finding coliforms in the drinking water.

What is being done?

[Describe corrective action.]

We are still detecting coliform bacteria. We will inform you when our sampling shows that no bacteria are present. We anticipate resolving the problem within [estimated time frame].

For more information, please contact [name of contact] at [phone number] or [mailing address].

Please share this information with all the other people who drink this water, especially those who may not have received this notice directly (for example, people in apartments, nursing homes, schools, and businesses). You can do this by posting this notice in a public place or distributing copies by hand or mail.

This notice is being sent to you by Moorestown Water Dept. PWSID: NJ0322001.

Date distributed: _____.

BSDW 53
10/09



Department of Environmental Protection - Bureau of Water System Engineering
401 East State Street - PO Box 420
Trenton, New Jersey 08625-0420
Tel# (609) 292-5550 - Fax# (609) 633-1495

Office Use Only
Reviewed by:
Date:

Public Notification Certification Form – Tiers 1, 2 & 3

Requirements Pursuant to 40 CFR 141, Subpart Q and N.J.A.C. 7:10

This form and a copy of your Notice to the Public must be submitted to the State within 10 days of notifying your customers.

PWSID#: 0322001

Water System Name: Moorestown Water Dept

Violation #: 8386

Violation or Situation Date: 2/11/15

Individual Contaminant or Contaminant Group: Total Coliform

Monitoring Period: 02/01/2015 to 02/28/2015

Violation or Situation Type: (Check appropriate box) MCL Treatment Technique Water Main Break
 MRDL E. coli Positive Source Water Sample Monitoring and Reporting Other: _____

Violation or Situation Public Notification Tier: (Check appropriate box) Tier 1 Tier 2 Tier 3

Please check all that apply and provide information as indicated below:

- 1. Consulted with DEP within 24 hours (Tier 1) or 48 hours (Tiers 2 & 3) Date: 2/13/15
- 2. Distributed the notice by the following method(s), and on the following date(s) in accordance with 40 CFR 141.201 et seq:

- Reverse 911 Date: _____
- Continuously Post Date: _____
- Separate Mailing to Customers Date: _____
- Hand Deliver Notice to Customers Date: _____
- Publish Notice in Newspaper Date: _____
- Release Notice to and Announced by Broadcast Media Date: _____
- Post Notice on System Website Date: 2/27/15
- Billing Date: _____
- Annual Report (Consumer Confidence Report) Date: _____
- Other: _____ Date: _____

Note: Non-community water systems that serve a school, preschool or daycare must also hand deliver the notice to a parent or legal guardian of each child for Tier 1, 2 and 3 violations and situations. For more information reference EPA's Public Notification Handbook at: <http://www.epa.gov/safewater/publicnotification/compliancehelp.html>

- 3. Content – 10 Required Elements Checklist: 40 CFR 141 Subpart Q (Ensure all items are included in the notice)

- Description of violation or situation including contaminant and contaminant levels as appropriate
- Date violation or situation occurred.
- Potential adverse health risks, using mandatory language provided in the rule.
- Required language for Monitoring and Reporting Violations, provided in the rule
- The population at risk, including sub-populations particularly vulnerable if exposed.
- Whether alternate water supply should be used.
- What action consumers should take, including when to seek medical help, if known.
- What the system is doing to correct the violation or situation.
- When the system expects to return to compliance or resolve the situation.
- Contact information: Owner name, business address, and phone number of the water system owner, operator or designee that can provide additional information concerning the notice.
- A statement encouraging recipients to distribute the notice to other persons served, using standard language from the rule.

- 4. Attach a copy of the posted Public Notice(s) to this certification form.

The public water system named above hereby certifies that public notification has been provided to its consumers in accordance with all delivery, content, and format requirements specified in 40 CFR Part 141 and N.J.A.C 7:10.

Owner/Operator: Billy D. Butler (Signature) Billy D. Butler (Print Name) 856-235-3520 (Phone Number)

Date of Certification: 2/27/15 Operator License # (if applicable) T-3 332123/W-4 476701

Level I Assessment Form

Delaware River

System Name: Township of Moorestown	Source Water: RPM's NTAW Surface	PWSID # NS0322001
System Type: Community Water System (CWS)	Population Served: 20,000	PWS Address: 601 E. Third St. Moorestown, NJ 08057
Operator in Responsible Charge (ORC): Billy D. Butler	Phone: 856-235-3520	
City/State: Moorestown, NJ 08057		
County: Burlington	Phone: 856-235-0550	
Person that collected TC samples if different than ORC: Brian Grant		
Address, City, State, Zip: 120 Kings Highway, Moorestown, NJ 08057 (Water Treatment Plant)		
Date Assessment Completed: 3/9/15		

Questions (1-5)	Reviewed and checked? (Type "3" if completed or "N/A")	Issue(s) found? (Y/N)	Issue Description	Corrective Action Taken (including Date)
1. Have any of the following occurred at relevant facilities prior to the collection of TC samples? -any interruptions in the treatment process -any reported loss of pressure events (pressure < 5 psi) -operation and maintenance activities that could have introduced total coliform reported vandalism and/or unauthorized access to facilities -visible indicators of unsanitary conditions reported -any fire-fighting event, flushing operation, sheared hydrant, etc. -any sites with low or inadequate disinfectant residual or sites where it is difficult to maintain a residual -any other water quality parameters measured where results were out of the ordinary	3 3 3 N/A 3 3	N N N N N N N	Township was using NTAW for 100% of its water.	Dirty water Tap @ Sink. 2/17/15
2. Have there been any recent operational changes to the system? -sources introduced -treatment or operational changes -potential sources of contamination	3 N/A 3	N N N		Dirty water Tap @ Sink. (2/17/15) Sink @ location. Took Sample From Dirty Sink
3. Evaluate sample site. -condition or location of tap -regular use of connection	3 3	Y		
4. Sample protocol followed and reviewed. -flush tap -remove aerator -DO swivel -fresh sample bottles -sample storage acceptable	3 3 N/A 3 3	W W W W W		
5. Distribution System -system pressure -cross connection -pump station -air relief valves -fire hydrants or blow off -breaks -repairs	3 3 N/A W/A N/A 3	N N N N N N		

Level 1 Assessment Form

Questions (1-5)	Reviewed and checked? (Type "3" if completed or "N/A")	Issue(s) found? (Y/N)	Issue Description	Corrective Action Taken (including Date)
6. Storage Tank -screens -security -access opening -condition of tank -vent -drain overflow -pressure tank -O&M	N/A	N N N N N N N		
7. Treatment Process -interruptions -POE/POU -softeners -O&M	N/A N/A N/A	N	100% Treatment was being utilized by NJPWCo.	
8. Source - Well -secondary seal -vent screened -air gap -cross connection -security -pump to waste line	N/A N/A N/A	N N N N N	No TWP Wells in Use at the time of Sampling.	
9. Source - Spring -condition of spring development -condition of spring box -security	N/A N/A N/A			
10. Source - Surface Water Supply -heavy rainfall -rapid snowmelt	N/A N/A			

Note: Form to be completed based on data and documents available to the PWS operator in charge, maintained on file and returned to the Primary Agency within XX days.

Additional Comments:

The Township of Moorestown was receiving 100% of its water from New Jersey American Water Company.

Print name of person completing form:
 Signature: Billy D. Butler

Date: 3/9/15

Reserved for State

1. Assessment has been successfully completed.
2. Likely reason for total coliform-positive occurrence is established.
3. System has corrected the problem.
4. Was a reset requested and / or granted? - Rationale
5. Name of State reviewer:
