
New Systems



OHA Drinking Water Services
Survey Training Webinar
October 18, 2018



DRINKING WATER SERVICES
Public Health Division

New Systems

- How to get a PWS ID number
- How to get the system set up in data online
- Plan review

How to get a PWS ID number

- Email compliance.dw@state.or.us
- Include the following:
 - System type (C, NTNC, TNC)
 - System name
 - Regulating agency (County or Ag)
 - County served
 - Plan review status
 - Contact name and address
- This triggers a letter

Re: New Water System
BLM SANDY RIDGE TRAILHEAD - OR4195585

Dear Dan Davis,

Your water system, named BLM SANDY RIDGE TRAILHEAD, has been added to the Oregon Drinking Water Services (DWS) inventory of Public Water Systems (PWS) as a Non-Transient Non-Community (NTNC) water system. Your Public Water System ID number is OR4195585. Please use this ID number in all communications involving your water system.

Please be sure that both the water system name and water system number are on any water quality reports or correspondence. Water quality testing results may be submitted one of the following three ways:

- Fax the reports to (971) 673-0694
For faxed data, please include a cover sheet with the # of pages including the cover, your name, and your phone number.
- Email the reports to: dwp.dmce@state.or.us
- Mail the reports to: Water Quality Reports
P.O. Box 14350
Portland, OR 97293-0350

You may submit general correspondence to:

Drinking Water Services
PO Box 14450
Portland, OR 97293-0450

For more information about Drinking Water Services, visit www.healthoregon.org/dwp. You can find information about your water system's sample results, monitoring schedules, and contact information by clicking the Data Online blue box at the top of the page. Search Data Online by either your water system name or ID number.

This letter is informative only and does not constitute plan review approval. Please contact the Plan Review Assistant at 971-673-0408 for status of plans currently in plan review.

Please be advised that most water systems undergo a water system survey every three to five years. There is a fee for the survey. In addition, all public water systems are required to have a written coliform sampling plan, operation and maintenance manual and emergency reponse plan.

Please direct any further questions to your regulating agency of Clackamas Co. Environment Health Services at 503-655-8384.

Sincerely,

Great, so it'll get added to the inventory, right?

- Kinda, but nope
- Requesting a PWS ID won't make it show up on Data Online ☹️
- We'd still need a few more things about:
 - Water system information
 - Source
 - Entry structure

Inventory update forms

Inventory Updates

[Drinking Water Services](#)

[County & Dept. of Agriculture Resources](#)

[Water System Surveys](#)

[Conferences and Training](#)

[Document Library](#)

[Inventory Updates](#)

[EPA Staff Resources](#)

[Coliform Resources](#)

[Monitoring Resources](#)

[Compliance Resources](#)

[Contact Us](#)

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- [Treatment Codes](#)
- Water system classification for operator certification requirements:
Water treatment plants and distribution systems at community and non-transient non-community public water systems are classified based on the size and complexity of the water system facility according to [OAR-333-061-0220](#). Classification of a water system or water system facility determines the level of certification required for operators in direct responsible charge of a water system or water system facility as prescribed by [OAR 333-061-0225](#). Use either of the following worksheets to classify a water system: [PDF](#) -or- [Excel](#)

The following documents are password protected:

- Chemical and Bacteriological Monitoring Schedule Change Form: [fillable MS Word](#) -or- [printable PDF](#)
- Entry Structure Diagram:
 - *Refer to the treatment code list (above) when filling out this form.*
 - [Entry Structure Diagram \(includes drawing grid\)](#)
 - [Entry Structure Form](#) and [Drawing Grid](#)
- Source Information: [fillable MS Word](#) -or- [printable PDF](#)
- [Water System Information](#)
- [Waiver request](#) and associated [procedure](#) to reduce monitoring from annual to once every three years after a VOC contaminant was detected.











Water System Information Page

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Source Information Page

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System **Smith Water System**

Entry ID

Source ID

Source Name **Well #1**

Contact with **Bill Smith**

Phone **(541) 555 - 1212**

County **Deschutes**

Staff Member **Jeff Freund**

Agency: **County**

Date

- New Source**
 Pre '81
 Plan Review Approved
 Needs Plan Review
 Modify Source
 Abandon/Disconnect Source

New Source Info

- Availability Permanent Seasonal
 Emergency
 Entry Point System has single source
 Structure Source on EP by itself
 Other (please fill our EP diagram)
 Latitude
 deg. min. sec.
 Longitude
 deg. min. sec.
 Capacity gal. Year Installed
 Basin Name

Land Use











- Pristine Forest (A) Rural On-Site Sew. Disp (H)
 Irrigated Crops (B) Urban On-Site Sew.

Groundwater Info

- Source Type Well Spring
 Water Resource
 Well ID
 Depth to 1st Wtr ft
 Bearing Zn ft
 Additional WBZs Yes No Unknown
 Static Water Lvl ft
 Source Elevation ft
 Casing Seal Yes No Unknown
 Seal Depth ft
 Screen Type Screened Perforated None
 WHPA delineated Yes No
 CFR Num. Method
 Analytical/HM Other

Entry Structure Form

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-  [Water System Information](#)
-  [Waiver request](#) and associated  [procedure](#) to reduce monitoring from annual to once every three years after a VOC contaminant was detected.

System: **Smith Water System**

PWS ID 41 1 2 3 4 5

Contact with: **Bill Smith**

Ph#: **541-555-1212** County: **Deschutes**

Staff member: **Jeff Freund**

Agency: **County** Date: **10.16.18**

Entry Points

Treatment Changes Only

ID	Name	Source Type					Availability					Treatment Codes			Designated Sample Point (if different from EP)	
		Ground (G)	Surface (S)	GWUDI (U)	P. Grnd (W)	P. Surface (P)	Permanent (P)	Seasonal (S)	Season		Emergency	Abandoned	Disconnected	None		
									Begins	Ends						
A	EP for Well #1	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

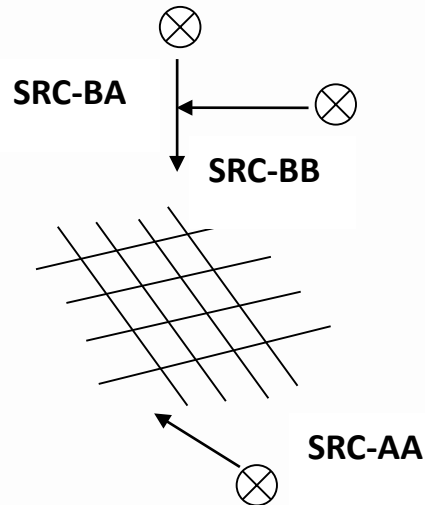
Schematic drawing **MUST** be included on a separate sheet. See [“Diagram Entry Points”](#) form.

Sources

IDs for sources on an EP start with the EP ID: BC for 3rd source on EP B)

ID	Name
AA	Well #1 - unapproved

Entry Structure Diagram



Installation Enclosurement Required: No

Last Survey Date: Jun 03, 2014 - Outstanding Permits:

Sources











<u>Facility ID</u>	<u>Facility Name - Well Logs</u>	<u>Activity Status</u>	<u>Availability</u>	<u>Source Type</u>
EP-A	EP FOR WELL #1	A		GW
SRC-AA	WELL #1 - DESC1805	A	Permanent	GW
EP-B	EP FOR WELLS #2 & #5	A		GW
SRC-BA	WELL #2 - DESC914	A	Permanent	GW
SRC-BB	WELL #5 - L112240	A	Permanent	GW

And while you're sending us forms

- If the system is in use, it's probably a good idea to add a schedule form for chems/bacti

Chemical and Bacteriological Schedule Form

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Chemical & Bacteriological Monitoring Schedule Change Form

OHA Drinking Water Services

System PWS ID# 41

Contact with Phone () - County

Staff Member Agency: Date

System Type: Community (C) Non-Transient Non Community (NTNC) Transient Non-Community (NC) State Regulated (NP)

Check if New System or Sample Pt: For new systems, include all necessary chemicals and sampling points.

Entry Point ID (In SDWIS Entry Pt ID "A" will appear as Facility ID "EP-A", Entry Pt ID "B" will appear as "EP-B" etc.)

Sample Point ID (Entry Pt ID or SRC Sampling Point ID)	Code/Chemical/Analyte See reverse for complete list of chemical groups and analyte codes	Frequency								Begin Date	End Date (Leave blank unless closing a previous schedule)
		<input type="checkbox"/> New Schedule <input type="checkbox"/> Schedule Reduction <input type="checkbox"/> Schedule Increase									
		Once	Monthly	Quarterly	Yearly	Once Every 3 Years	Twice Every 3 yrs	Once Every 6 Years	Once Every 9 Years		
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>

Attach additional page(s) as necessary

Distribution Sampling Point ID (In SDWIS Distrib. Sampling Point "A" will be identified as: Facility ID "DIST-A")

(DBP Sample Points must include peak month that sampling is required in and sample location)

DBP TTHM HAA5 IDSE LCR ASBD or TCR	DIST-A or IDSE-01 2DBP-01, etc.	Sample Site ID or Street Address (Enter for DBPs only. This address will be used to tie sample results to the site)	# Samples Required	Frequency								Begin Date	End Date
				<input type="checkbox"/> New Schedule <input type="checkbox"/> Schedule Reduction <input type="checkbox"/> Schedule Increase									
				Monthly	Quarterly	Semi Annual	Yearly	Once Every 3 Years	Once Every 6 Years	Once Every 9 Years			
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>
<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="text"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="text"/>	<input type="text"/>

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Standard chem schedules

Monitoring Resources

Drinking Water Services

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-  [Chemical Monitoring Schedules for Community and Non-Transient Non-Community groundwater systems](#)
-  [Standard Monitoring Framework](#)
-  [Alerts: What to Do With Chemical Detections](#)
-  [Arsenic Testing and Follow-up at TNC and State-Regulated Water Systems](#)
-  [Emergency Groundwater Source Monitoring Requirements](#)

Lead and Copper Rule:

-  [Lead or Copper Exceedance Procedure](#)
-  [Plumbing Replacement Program Procedure](#)
-  [Lead and Copper Tap Sample Invalidation Procedure](#)

Chemical Monitoring Intervals for Community & NTNC Groundwater Systems



Oregon Health Authority
Oregon Public Health
Drinking Water Services
PO Box 14450, Portland OR 97293-0450
Phone 971-673-0405 Fax 971-673-0694
www.healthoregon.org/dwp

Chemical Sampling Requirements ¹	Initial	Routine	Possible Reduction	Possible Increase Due to Detection ²
<i>Entry Point Sampling</i>				
Nitrate	Every year		None	Quarterly
Nitrite ³	Every 3 years		Every 9 years	
Inorganics (Incl. Arsenic)	Every 3 years		Every 9 years ⁴	

DRINKING WATER SERVICES
Public Health Division



Setting coliform schedules

Coliform Bacteria Sampling			
Community systems	Monthly samples based on population*		
Non-Transient, Transient, State-Regulated Systems	Groundwater population served		Surface water
	≤ 1000 1 per quarter	>1000 Monthly based on population*	Monthly sampling based on population*
Non-Community systems operating seasonally	Monthly samples based on population*		

* Population	Samples per month
Up to 1,000	1
1,001 to 2,500	2
2,501 to 3,300	3
etc.	See rules or call DWS

Yeah, but I'm going to do a survey soon

- Great! You'll cover all that by using the survey forms
- But let's briefly talk about "soon"
 - How far out are you scheduling the survey?
 - You have 45 days to issue a letter/forms after the survey
 - If they're using the system, inventory forms may be the way to go

But doesn't plan review cover this?

- Yep
- But using the plan review process to set up inventory items should be used for new infrastructure *not* new systems
 - New well vs
 - New system
- Remind systems that they should submit all their items under the plan review process
 - They should include tanks, treatment, waterlines
 - Except waterlines if on one property

Since we're talking plan review...

- Pre-81 and plan review
 - Neighborhood with 16 homes from the 1970s served by a well drilled in 1970
 - Well drilled in 1970 serving a large home that is being converted to a B&B

Neighborhood with 16 homes (1970s)

- (b) Facilities at public water systems must comply with the construction standards in place at the time the facility was constructed or installed for use at a public water system. A public water system shall not be required to undertake alterations to existing facilities, unless the standard is listed as a significant deficiency as prescribed in OAR 333-061-0076(4) or if MCLs are being exceeded.
- Warn them about the black dot items

Source Deficiencies:

Well Construction Deficiencies:

- ⊕ Sanitary seal and casing not watertight
- ⊕ Does not meet setbacks from hazards
- ⊕ Wellhead not protected from flooding
- ⊕ No raw water sample tap
- ⊕ No treated sample tap (if applicable)
- ⊕ No screen on existing well vent

House with 1970s well, converted to B&B

- (c) Non-public water systems that are converted to public water systems shall be modified as necessary to conform to the requirements of this rule.

In summary

- Request a PWS ID from DMCE using the compliance email address
- Either conduct a survey soon or use the inventory update forms to set up the system on Data Online
- Plan review is required for new systems; some systems will escape this requirement

Questions?



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