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| *Instructions* For Failure to Take Corrective Action Within Required Time Frame Public Notice |

Instructions on Page 1, Template on Page 2 and Certificate on Page 3

A system’s failure to take corrective action within the required timeframe or be in compliance with a state-approved corrective action plan and schedule for significant deficiency under the Ground Water Rule is a treatment technique violation and requires Tier 2 notification. You must provide public notice to persons served as soon as practical but within 30 days after you learn of the violation [40 CFR 141.203(b)]. You must issue a repeat notice every three months for as long as the violation persists. Check with ADEQ to make sure you meet all requirements.

Consider providing the history of the situation in this notice (i.e., what events lead to requiring corrective action) to avoid confusing the public when this second notice is issued.

Community systems must use one of the following methods [40 CFR 141.203(c)]:

* Hand or direct delivery
* Mail, as a separate notice or included with the bill

Noncommunity systems must use one of the following methods [40 CFR 141.203(c)]:

* Posting in conspicuous locations
* Hand delivery
* Mail

In additional both community and noncommunity systems must use *another* method reasonably calculated to reach others if they would not be reached by the first method [40 CFR 141.203(c)]. Such methods could include newspapers, e-mail, or delivery to community organizations. If you mail, post, or hand deliver, print your notice on your system’s letterhead if available.

The notice on the reverse is appropriate for mailing, posting, or hand delivery. If you modify this notice, you must still include all required PN elements from 40 CFR 141.205(a) and leave the mandatory language unchanged (see below).

**Mandatory Language**
Mandatory language on health effects (from Appendix B to Subpart Q) must be included as written (with blanks filled in) and is presented in this notice in italics and with an asterisk on either end.

You must also include standard language to encourage the distribution of the public notice to all persons served, where applicable [40 CFR 141.205(d)]. This language is also presented in this notice in italics and with an asterisk on either end.

**Corrective Action**

In your notice, describe corrective actions you are taking. Listed below are some steps commonly taken by water systems with Ground Water Rule treatment technique violations. Depending on the corrective action you are taking, you can use one or more of the following statements, if appropriate, or develop your own text:

* Although we did not meet our deadline, we are now in consultation with the state to develop a corrective action plan.
* The [source of contamination/significant deficiency] has been identified and addressed.
* We have implemented a short-term plan to address the immediate issue while we pursue the long-term solution.

**Repeat Notices**

For repeat notices, you should state how long the violation has been ongoing and remind consumers of when you sent out any previous notices. If you are making progress with correcting the significant deficiency or addressing the fecal indicator-positive source sample, describe it. Alternatively, if funding or other issues are delaying corrective action, let consumers know.

**After Issuing the Notice**

Make sure to send ADEQ a copy of each type of notice and a certification that you have met all public notification requirements within ten days after issuing the notice [40 CFR 141.31(d)].

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| Public Notice For Failure to Take Corrective Action Within Required Time Frame  |

**IMPORTANT INFORMATION ABOUT YOUR DRINKING WATER**

**[System] Failed to [Correct a Significant Deficiency Within Required Time Frame.**

Our water system recently violated a drinking water requirement. Although this incident was not an emergency, as our customers, you have a right to know what happened and what we did (are doing) to correct this situation.

[A routine inspection conducted on [give date] by the [insert primacy agency] found [describe significant deficiency in our water system]] OR

[Sampling conducted at our groundwater source on [given date(s)] found indication of fecal contamination of our source(s)].

As required by Environmental Protection Agency’s (EPA’s) Ground Water Rule, we were required to act to [correct this deficiency/address the fecal-indicator positive source sample]. However, we failed to take this action by the deadline established by [insert primacy agency name].

**What should I do?**

* There is nothing you need to 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.

*\*Inadequately treated water may contain disease-causing organisms. These organisms include bacteria, viruses, and parasites which can cause symptoms such as nausea, cramps, diarrhea, and associated headaches.\**

These symptoms, however, are not caused only by organisms in drinking water, but also by other factors. If you experience any of these symptoms and they persist, you may want to seek medical advice.

**What is being done?**

[Describe corrective action.] We anticipate resolving the problem within [estimated time frame] (or the problem was resolved on [give date]).

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 [system name and PWS ID#].

Date distributed: \_\_\_\_\_\_.



Certificate of Public Notice Distribution

Public Water Systems must sign and submit this Certificate along with a copy of the public notice to ADEQ within 10 days of distribution to water users.

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| **Public Water System ID Number** | **Public Water System Name** |
|  |  |
| **Violation Date:** | **Notice Distribution Date:** |
|  |  |
| **Violation Type:** | **Contaminant(s):** |
| MCL MONITORING OTHER |  |
| **TIER 1 PUBLIC NOTICES FOR ACUTE MCL VIOLATION** MUST USE **ONE OR MORE** OF THESE METHODS:*\* Note that Tier 1 Public Notices must be distributed within 24 hours*Direct Hand Delivery to Customers Radio StationPosting at Conspicuous Locations throughout System TV Station *Indicate number and location of postings* Other (Must be approved by ADEQ)  |
| **TIER 2 and TIER 3 PUBLIC NOTICES***\* Note that Tier 2 Public Notices must be distributed within 30 days Tier 3 Public Notices must be distributed within 365 days***COMMUNITY WATER SYSTEMS** MUST USE AT LEAST **TWO** OF THE FOLLOWING METHODS: REQUIRED PRIMARY METHOD (Choose one):Direct Hand Delivery to Customers Customer MailingREQUIRED ADDITIONAL METHOD (Choose one):Consumer Confidence Report (Tier 3 only) Posting on the Internet Publication in Local NewspaperPosting at Conspicuous Locations throughout System*Indicate number and location of postings* Other (Must be approved by ADEQ)  |
| **NON-COMMUNITY WATER SYSTEMS** MUST USE AT LEAST **TWO** OF THE FOLLOWING METHODS: REQUIRED PRIMARY METHOD (Choose one):Direct Hand Delivery to Customers Customer Mailing Posting at Conspicuous Locations throughout System*Indicate number and location of postings* REQUIRED ADDITIONAL METHOD (Choose one):Publication in Local Newspaper Email to notify employees and students Posting in central locations*Indicate number and location of postings* Other (Must be approved by ADEQ)  |
| *I certify that the above information is true and accurate to the best of my knowledge:***Contact Name & Title (PRINT) Certified Operator # (if applicable)** **Authorized Signature Date**  |