

Water System Field Compliance Report:

A Review of Compliance with Subpart 5-1 of the NYS Sanitary Code for Noncommunity and Other Small Water Systems

NEW YORK STATE DEPARTMENT OF HEALTH
Bureau of Water Supply Protection

Public Water System Name: Shady Lane Bakery Street Address: 2830 Rt. 96A
Town, Village, or City: Interlaken County: Seneca

PWS ID Number: N Y 4 9 3 0 0 4 9 Office Code: 49 Operation ID:
Date of Service: 8 / 5 / 15 Begin Time: End Time:
Time Spent Conducting Service:

Type of Disinfection: UV Chlorination Source Type: Surface Ground GWUDI Disinfection Waiver Issued? Yes No
Field Visit Type: Pre-operational Complaint Incident Illness Reinspection Sanitary Survey Inspection 4-Log Treatment Installed Yes No

Part 5 Subsection	Summary Description of Sanitary Code Requirement	SDWIS	Status
5-1.12(a)	Appropriate actions are taken in response to deteriorating source water quality or diminished effectiveness of treatment with potential for MCL violation.	SA	1
5-1.22(a)	Obtain health department approval prior to the construction or modification of a water system.	SB	1
5-1.23(b)	Notify State when delivery of water is interrupted for a period of four hours or more.	SE	4
5-1.25	Disinfect repaired facilities before returning to service.	SG	1
5-1.27	Maintain minimum distribution system pressure of 20 psi at ground level.	SH	1
5-1.30	Disinfection system is free of plumbing bypass.	SJ	1
5-1.30(a)(b)	Disinfection of a groundwater, surface water, and/or GWUDI source is operating as designed.	ND	1
5-1.30	Cl ₂ and UV equipment is operating as designed. UV is working, indicator light is "on," intensity meter is within adequate range of operation.	41	1
5-1.30(b)	Filtration of surface source or groundwater influenced by surface water unless avoidance criteria is met.	42	1
5-1.30(g)	Maintain free chlorine residual at representative points in the distribution system.	NR	1
5-1.31	Protect the water distribution system from the creation of cross connections of sufficient hazard to adversely affect the health of water consumers.	SJ	1
5-1.71(a) 5-1.71(b)	Obtain health department approval prior to use of a water supply or alteration of a treatment process necessary to protect public health.	SD	1
5-1.71(a)	Exercise due care and diligence in the maintenance and supervision of all sources of the public water system.	SN	1
5-1.71(b)	Exercise due care and diligence in the operation and maintenance of a water treatment plant and distribution system.	SO	1

Part 5 Subsection	Deficiency	Summary Description of Sanitary Code Requirement	SDWIS	Status
5-1.23(c)	M	Conspicuous posting of Sanitary Code Section 5-1.23, "Reporting Emergencies."	SF	4
5-1.28	S M	Storage tank properly sealed, vents properly screened and downward facing.	SI	1
5-1.29	S M	Treated water used for priming pumps.		1
5-1.30	S	Disinfectant contact time provided in accordance with approved design and treatment requirements.	ND	1
5-1.30	S M R	Redundant disinfection equipment provided.	ND	4
5-1.30	S M	Chlorinator injection point is located prior to pressure tank.		1
5-1.30 (e)	S	Complies with disinfection waiver provision.		4
5-1.71	S	Hydropneumatic tank is operational and functioning properly.	SO	4
5-1.71	M R	Water pressure gauges are maintained and provide reliable readings.		1
5-1.72(b)	S M	Required number of properly certified operators in responsible charge. (Not applicable for NC systems).		4
5-1.72(c)	S M	Complete daily records of operation of a water system and submit copy to the State by the 10th day of the following reporting period.	09 10	1
5-1.72(d)	S M	Maintain records (sample results, reports).	09	1
5-1.73	S M	Provide or have available approved test kit.		1
App.5-A.2.21	S M	All treatment chemicals meet ANSI/NSF Standard 60 or AWWA specifications.		1
App.5-A.7.2.1	M R	Hydropneumatic tanks are secure and easily accessible.		4
App.5-B.2(d)	S M	Finished grade of well is mounded to divert surface water.		1
App 5-B.5	S M R	Pump lubricants are USDA, USFDA, or NSF approved. Pumps located to be accessible for maintenance and repair.		4
App.5-B.5(g)	S	Well cap makes proper sanitary seal, is vented, watertight, and vermin proof.	SO	1
App.5-D.3(b)	S M	Well casing in good condition and more than 18" above grade.		1

Coliform Surveillance Sample Collected? Yes No
Sample Collection Time: _____
Sample Location: Bakery CWT

Chlorine Residual: 0.27 mg/l Sample Collection Time: _____
Point of Collection: Bakery CWT

Comments: Nitrate & T.coliform samples taken
315 5391948 *need more operation reports*
Completed by: Michelle Rameil Date: 8 / 5 / 15
Received by: Sarah A. Swarey Date: 8 / 5 / 15

Status Codes: 1. No violation observed 2. All or parts of an item in violation 3. Item was not reviewed 4. Item not applicable 5. Item(s) corrected during inspection
Deficiency Codes: S: Significant Deficiency M: Minor Deficiency R: Recommendation

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