

Presented By
Woonsocket Water



Annual
**WATER
QUALITY
REPORT**

Reporting Year 2011

PWS ID#: RI1559518

Meeting the Challenge

We are once again proud to present our annual water quality report covering all testing performed between January 1 and December 31, 2011. Over the years, we have dedicated ourselves to producing drinking water that meets all state and federal standards. We continually strive to adopt new methods for delivering the best-quality drinking water to you. As new challenges to drinking water safety emerge, we remain vigilant in meeting the goals of source water protection, water conservation, and community education while continuing to serve the needs of all our water users.

Please share with us your thoughts or concerns about the information in this report. After all, well-informed customers are our best allies.

Where Does My Water Come From?

Woonsocket Water Division uses surface water from the Crookfall Brook and Harris Pond watersheds. The Crookfall Brook watershed extends over approximately 7.93 square miles. It is a protected, high-quality, and primary source of supply for the Woonsocket Treatment Plant. Harris Pond has a watershed area of approximately 33.3 square miles. This source is used as a supplemental source as needed. Woonsocket Water maintains an active watershed protection program and closely monitors the watershed lands to protect water quality.

Community Participation

For public comment on an ongoing basis, customers may contact the office of Mayor Leo Fontaine or attend the Woonsocket City Council meetings. The city council holds hearings on budget and other financial matters, approves contracts, and considers ordinances that create or amend local laws. Some of these matters affect the operation of the Woonsocket Water Division. The city council meets on the first and third Mondays of every month at 7 p.m. in Harris Hall, City Hall, 169 Main Street, Woonsocket, RI. The meetings are televised on Cox Cable channel 17. Public comment is welcome.

Important Health Information

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 may be particularly at risk from infections. These people should seek advice about drinking water from their health care providers. The U.S. EPA/CDC (Centers for Disease Control and Prevention) guidelines on appropriate means to lessen the risk of infection by *Cryptosporidium* and other microbial contaminants are available from the Safe Drinking Water Hotline at (800) 426-4791 or <http://water.epa.gov/drink/hotline>.

How Is My Water Treated and Purified?

The treatment process consists of a series of steps. First, raw water is drawn from our water source into the treatment plant. Chemicals are added to initiate the next process, called flocculation. The addition of these substances causes small particles to adhere to one another (called floc), making them heavy enough to settle to the bottom, from which sediment is removed. This process is called clarification, or sedimentation. The clear supernatant is then filtered through a deep-bed carbon filter that removes the smaller suspended particles. After filtration, the water undergoes disinfection, fluoride addition (to prevent tooth decay), corrosion inhibitor addition, and pH adjustment before it is pumped out into the distribution system.

Source Water Assessment

The RI Department of Health, in cooperation with other state and federal agencies, has assessed the threats to Woonsocket's water supply sources. The assessment considered the intensity of development, the presence of businesses and facilities that use, store or generate potential contaminants, the ease with which contaminants can move through the soils in the Source Water Protection Area (SWPA), and the sampling history of the water.

Our monitoring program continues to ensure that the water delivered to your home is safe and wholesome. However, the assessment found that the water source is at moderate risk of contamination. This means that the water could one day become contaminated. Protection efforts are necessary to ensure continued water quality. The complete Source Water Assessment Report is available from Woonsocket Water Division at (401) 767-1411, or from HEALTH at (401) 222-6867.

Lead in Home Plumbing

If present, elevated levels of 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. We are responsible for providing high-quality drinking water, but we cannot control the variety of materials used in plumbing components. When your water has been sitting for several hours, you can minimize the potential for lead exposure by flushing your tap for 30 seconds to 2 minutes before using water for drinking or cooking. If you are concerned about lead in your water, you may wish to have your water tested. Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available from the Safe Drinking Water Hotline or at www.epa.gov/safewater/lead.

QUESTIONS?

For more information about this report, or for any questions relating to your drinking water, please call Marc Viggiani, Acting Water Superintendent, at (401) 767-1411 or visit our website at www.ci.woonsocket.ri.us.

What Causes the Pink Stain on Bathroom Fixtures?

The reddish-pink color frequently noted in bathrooms on shower stalls, tubs, tile, toilets, sinks, toothbrush holders and on pets' water bowls is caused by the growth of the bacterium *Serratia marcescens*. *Serratia* is commonly isolated from soil, water, plants, insects, and vertebrates (including man). The bacteria can be introduced into the house through any of the above-mentioned sources. The bathroom provides a perfect environment (moist and warm) for bacteria to thrive.

The best solution to this problem is to continually clean and dry the involved surfaces to keep them free from bacteria. Chlorine-based compounds work best, but keep in mind that abrasive cleaners may scratch fixtures, making them more susceptible to bacterial growth. Chlorine bleach can be used periodically to disinfect the toilet and help to eliminate the occurrence of the pink residue. Keeping bathtubs and sinks wiped down using a solution that contains chlorine will also help to minimize its occurrence.

Serratia will not survive in chlorinated drinking water.

Water Main Flushing

Distribution mains (pipes) convey water to homes, businesses, and hydrants in your neighborhood. The water entering distribution mains is of very high quality; however, water quality can deteriorate in areas of the distribution mains over time. Water main flushing is the process of cleaning the interior of water distribution mains by sending a rapid flow of water through the mains.

Flushing maintains water quality in several ways. For example, flushing removes sediments like iron and manganese. Although iron and manganese do not pose health concerns, they can affect the taste, clarity, and color of the water. Additionally, sediments can shield microorganisms from the disinfecting power of chlorine, contributing to the growth of microorganisms within distribution mains. Flushing helps remove stale water and ensures the presence of fresh water with sufficient dissolved oxygen, disinfectant levels, and an acceptable taste and smell.

During flushing operations in your neighborhood, some short-term deterioration of water quality, though uncommon, is possible. You should avoid tap water for household uses at that time. If you do use the tap, allow your cold water to run for a few minutes at full velocity before use and avoid using hot water, to prevent sediment accumulation in your hot water tank.

Please contact us if you have any questions or if you would like more information on our water main flushing schedule.

Tap vs. Bottled

Thanks in part to aggressive marketing, the bottled water industry has successfully convinced us all that water purchased in bottles is a healthier alternative to tap water. However, according to a four-year study conducted by the Natural Resources Defense Council, bottled water is not necessarily cleaner or safer than most tap water. In fact, about 25 percent of bottled water is actually just bottled tap water (40 percent, according to government estimates).

The Food and Drug Administration is responsible for regulating bottled water, but these rules allow for less rigorous testing and purity standards than those required by the U.S. EPA for community tap water. For instance, the high mineral content of some bottled waters makes them unsuitable for babies and young children. Furthermore, the FDA completely exempts bottled water that's packaged and sold within the same state, which accounts for about 70 percent of all bottled water sold in the United States.

People spend 10,000 times more per gallon for bottled water than they typically do for tap water. If you get your recommended eight glasses a day from bottled water, you could spend up to \$1,400 annually. The same amount of tap water would cost about 49 cents. Even if you installed a filter device on your tap, your annual expenditure would be far less than what you'd pay for bottled water.

For a detailed discussion on the NRDC study results, check out their Web site at www.nrdc.org/water/drinking/bw/exesum.asp.

Substances That Could Be in Water

To ensure that tap water is safe to drink, the U.S. EPA prescribes regulations limiting the amount of certain contaminants in water provided by public water systems. U.S. Food and Drug Administration regulations establish limits for contaminants in bottled water, which must provide the same protection for public health. Drinking water, including bottled water, may reasonably be expected to contain at least small amounts of some contaminants. The presence of these contaminants does not necessarily indicate that the water poses a health risk.

The sources of drinking water (both tap water and bottled water) include rivers, lakes, streams, ponds, reservoirs, springs, and wells. As water travels over the surface of the land or through the ground, it dissolves naturally occurring minerals, in some cases, radioactive material, and substances resulting from the presence of animals or from human activity. Substances 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, or wildlife;

Inorganic Contaminants, such as salts and metals, which can be naturally occurring or may 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 may also come from gas stations, urban stormwater runoff, and septic systems;

Radioactive Contaminants, which can be naturally occurring or may be the result of oil and gas production and mining activities.

For more information about contaminants and potential health effects, call the U.S. EPA's Safe Drinking Water Hotline at (800) 426-4791.

Sampling Results

During the past year, we have taken hundreds of water samples in order to determine the presence of any radioactive, biological, inorganic, volatile organic, or synthetic organic contaminants. The tables below show only those contaminants that were detected in the water. The state requires us to monitor for certain substances less often than once per year because the concentrations of these substances do not change frequently. In these cases, the most recent sample data are included, along with the year in which the sample was taken.

REGULATED SUBSTANCES							
SUBSTANCE (UNIT OF MEASURE)	YEAR SAMPLED	MCL [MRDL]	MCLG [MRDLG]	AMOUNT DETECTED	RANGE LOW-HIGH	VIOLATION	TYPICAL SOURCE
Barium (ppm)	2011	2	2	0.04	0.011–0.04	No	Erosion of natural deposits
Chlorine (ppm)	2011	[4]	[4]	0.40	ND–1.09	No	Water additive used to control microbes
Fluoride (ppm)	2011	4	4	0.74	0.10–1.05	No	Erosion of natural deposits; Water additive that promotes strong teeth
Haloacetic Acids [HAAs] (ppb)	2011	60	NA	13.1	ND–23.6	No	By-product of drinking water disinfection
Nitrate (ppm)	2011	10	10	0.62	0.07–0.62	No	Runoff from fertilizer use; Leaching from septic tanks, sewage; Erosion of natural deposits
TTHMs [Total Trihalomethanes] (ppb)	2011	80	NA	47.2	28.7–79.2	No	By-product of drinking water disinfection
Total Coliform Bacteria (% positive samples)	2011	5% of monthly samples are positive	0	2	NA	No	Naturally present in the environment
Total Organic Carbon (removal ratio)	2011	TT	NA	1.5	1.0–1.72	No	Naturally present in the environment
Turbidity ¹ (NTU)	2011	TT	NA	0.541	0.054–0.541	No	Soil runoff
Turbidity (Lowest monthly percent of samples meeting limit)	2011	TT	NA	98.48%	NA	No	Soil runoff
Tap water samples were collected for lead and copper analyses from sample sites throughout the community							
SUBSTANCE (UNIT OF MEASURE)	YEAR SAMPLED	AL	MCLG	AMOUNT DETECTED (90TH%TILE)	SITES ABOVE AL/ TOTAL SITES	VIOLATION	TYPICAL SOURCE
Copper (ppm)	2011	1.3	1.3	0.02	0/30	No	Corrosion of household plumbing systems; Erosion of natural deposits
Lead (ppb)	2011	15	0	3	0/30	No	Corrosion of household plumbing systems; Erosion of natural deposits

¹Turbidity is a measure of the cloudiness of the water. It is monitored because it is a good indicator of the effectiveness of the filtration system. During the reporting year, a minimum of 98.48 percent of all samples taken to measure turbidity met water quality standards.

Definitions

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

MCL (Maximum Contaminant Level): The highest level of a contaminant that is allowed in drinking water. MCLs are set as close to the MCLGs as feasible using the best available treatment technology.

MCLG (Maximum Contaminant Level Goal): The level of a contaminant in drinking water below which there is no known or expected risk to health. MCLGs allow for a margin of safety.

MRDL (Maximum Residual Disinfectant Level): 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.

MRDLG (Maximum Residual Disinfectant Level Goal): 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.

NA: Not applicable

ND (Not detected): Indicates that the substance was not found by laboratory analysis.

NTU (Nephelometric Turbidity Units): Measurement of the clarity, or turbidity, of water. Turbidity in excess of 5 NTU is just noticeable to the average person.

ppb (parts per billion): One part substance per billion parts water (or micrograms per liter).

ppm (parts per million): One part substance per million parts water (or milligrams per liter).

removal ratio: A ratio between the percentage of a substance actually removed to the percentage of the substance required to be removed.

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