

2009 Water Quality Report (published May 2010)

PSW ID#0818004

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We are pleased to present to you this year's Annual Water Quality Report. The table that follows shows the results of our monitoring for the period January 1, 2009 to December 31, 2009. This report is designed to inform you about the water quality and services we deliver to you every day. Our constant goal is to provide you with a safe and dependable supply of drinking water. We want you to understand the efforts we make to continually improve the water treatment process and protect our water resources. We are committed to ensuring the quality of your water and I'm pleased to report that our drinking water is safe and meets all Federal and State requirements.

We, at the Washington Township MUA work around the clock to provide top quality water to every tap. We ask that all our customers help us protect our water sources, which are the heart of our community, our way of life and our children's future.

If you have questions about this report or concerning your water utility, please contact Matthew Mallon, Supt. or Chuck Chew, Asst. Supt at 227-0880. We want our valued customers to be informed about their water utility. If you want to learn more, please attend any of our [regularly scheduled meetings](#). They are held on the second and last Monday of every month, at 7:30pm, at the WTMUA office on Whitman Drive.

Click [here](#) for an important message about the health risks of lead in drinking water.

SUBSTANCE	VIOLATION Y/N	LD EE VT EE LC TE D	RANGE OF DETEC- TED LEVELS	U N I T S	M C L G	MCL	LIKELY SOURCE OF CONTAMINATION	HEALTH EFFECTS
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RADIOACTIVE CONTAMINANTS

1. Alpha	N	11.13 RAA	11.13 RAA	pCi/L	0	15	Erosion of natural deposits.	Certain minerals are radioactive and may emit a form of radiation known as alpha radiation. Some people who drink water containing alpha emitters in excess of the MCL over many years may have an increased risk of getting cancer.
2. RA 226	N	2.8	2.8	pCi/L	0	5	Erosion of natural deposits.	Some people who drink water containing radium 226 or 228 in excess of the MCL over many years may have an increased risk

									of getting cancer.
RA 228	N	2.31	2.31	pCi/L					
u	N	0.18	0.18	ug/l	0	30			

INORGANIC CONTAMINANTS

Barium	N	0.32	0.0 - 0.32	ppm	2	2	Discharge of drilling wastes; discharge from metal refineries; erosion of natural deposits.	Some people who drink water containing barium in excess of the MCL over many years could experience an increase in their blood pressure.
Fluoride	N	1.97	0.21 - 1.97	ppm	4	4	Erosion of natural deposits; water additive which promotes strong teeth, discharge from fertilizer and aluminum factories.	Some people who drink water containing fluoride in excess of the MCL over many years could get bone disease, including pain and tenderness of the bones. Children may get mottled teeth.
Nitrate	N	3.49	<0.10 - 3.49	ppm	10	10	Runoff from fertilizer use, leaching from septic tanks, sewage; erosion of natural deposits.	Nitrate in drinking water levels above 10 ppm is a health risk for infants of less than six months of age. High nitrate levels in drinking water can cause blue baby syndrome. Nitrate levels may rise quickly for short periods of time because of rainfall or agricultural activity. If you are caring for an infant, you should ask advice from your health care provider.

SECONDARY CONTAMINANTS

Sodium	N	90.4	25.2 - 90.4	ppm	50	RUL 50	Naturally occurring in underground aquifers.	For healthy individuals, the sodium intake from water is not important because a much greater intake of sodium takes place in the diet. However, sodium levels above the Recommended Upper Limit may of concern to individuals on sodium restricted diet.
Chlorides	N	22.7	2.0 - 22.7	ppm	-	-		
Sulfate	N	21.9	2.5 - 21.9	ppm	250	RUL 250	Occurs naturally in waters as a result of leaching from gypsum and other common materials. Can also be a result of many different types of industrial waste.	The Recommended Upper Limit for sulfate is based on salty taste and possible laxative effects to the drinking water.

VOLATILE ORGANICS

All are Non-Detected

LEAD AND COPPER (Samples were collected from 30 homes)

SUBSTANCE	V I O L A T I O N Y/N	A L C E T V I E O L N	AMOUNT DETECTED 90th PERCENTILE	M C L G	UNIT MEAS.	SITES ABOVE ACTION LEVEL	HEALTH EFFECTS
Lead	N	15	<0.002 - 0.01353	0	ppb	0	Corrosion of household plumbing systems; erosion of natural deposits; leaching of wood preservatives.
Copper	N	1.3	<0.010 - 0.332	1.3	ppm	0	Corrosion of household plumbing systems; erosion of natural deposits.

The New Jersey Department of Environmental Protection ([NJDEP](http://www.nj.gov/dep)) has completed and issued the Source Water Assessment Report and Summary for this public water system, which is available at www.state.nj.us/dep/swap or by contacting the NJDEP, Bureau of Safe Drinking Water at 609-292-5550. (see [important notice](#) about people more vulnerable to contaminants in drinking water)

The source water assessment performed on our 16 sources determined the following:

Sources	Pathogens			Nutrients			Pesticides			Volatile Organic Compounds			In-organics			Radio-nuclides			Radon			Disinfection Byproduct Precursors		
	H	M	L	H	M	L	H	M	L	H	M	L	H	M	L	H	M	L	H	M	L	H	M	L
Wells - 16		1	15	4		12		4	12	3		13		11	5	4	10	2		6	10		16	
GUDI - 0																								
Surface Water Intakes - 0																								

The table above illustrates the susceptibility rating for the seven contaminant categories (and radon) for each source in the system. The table provides the number of wells and intakes that rated high (H), medium (M), low (L) for each contaminants category. For susceptibility ratings of purchased water, refer to the specific water system's source water assessment report.

If a system is rated highly susceptible for a contaminant category, it does not mean a customer is or will be consuming contaminated drinking water. The rating reflects the potential for contamination of source water, not the existence of contamination. Public water systems are required to monitor for regulated contaminants and to install treatment if any contaminants are detected at frequencies and concentrations above allowable levels. As a result of the assessments, DEP may customize (change existing) monitoring schedules based on the susceptibility ratings.