

Annual Drinking Water Quality Report

Pulaski County PSA, 1155641

INTRODUCTION

This Annual Drinking Water Quality Report for calendar year 2024 is designed to inform you about your drinking water quality. Our goal is to provide you with a safe and dependable supply of drinking water, and we want you to understand the efforts we make to protect your water supply. The quality of your drinking water must meet state and federal requirements administered by the Virginia Department of Health (VDH).

If you have questions about this report or want additional information about any aspect of your drinking water or want to know how to participate in decisions that may affect the quality of your drinking water, please contact Jared Linkous, Executive Director at 540-980-7710

The times and location of regularly scheduled board meetings are as follows: 2nd Tuesday of every month at 9:00 am in the Pulaski County Administration Building, located at 143 3rd Street NW, Pulaski, VA 24301

GENERAL INFORMATION

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 and, in some cases, radioactive material, and can pick up substances resulting from the presence of animals or from human activity. Contaminants that may be present in source water include: (i) microbial contaminants, such as viruses and bacteria, which may come from sewage treatment plants, septic systems, agricultural livestock operations, and wildlife; (ii) inorganic contaminants, such as salts and metals, which can be naturally occurring or result from urban stormwater runoff, industrial or domestic wastewater discharges, oil and gas production, mining, or farming; (iii) pesticides and herbicides, which may come from a variety of sources such as agriculture, urban stormwater runoff, and residential uses; (iv) organic chemical contaminants, including synthetic and volatile organic chemicals, which are byproducts of industrial processes and petroleum production, and can also come from gas stations, urban stormwater runoff, and septic systems; (v) radioactive contaminants, which can be naturally occurring or be the result of oil and gas production and mining activities. In order to ensure that tap water is safe to drink, EPA prescribes regulations that limit the amount of certain contaminants in water provided by public water systems. FDA 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 contaminants does not necessarily indicate that water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the Environmental Protection Agency's Safe Drinking Water Hotline (800-426-4791).

Some people may be more vulnerable to contaminants in drinking water than the general population. Immuno-compromised persons such as persons with cancer who are undergoing chemotherapy, persons who have undergone organ transplants, people with HIV/AIDS or other immune system disorders, some elderly, and infants can be particularly at risk from infections. These people should seek advice about drinking water from their health care providers. EPA/CDC guidelines on appropriate means to lessen the risk of infection by Cryptosporidium and other microbial contaminants are available from the Safe Drinking Water Hotline (800-426-4791).

SOURCE(S) and TREATMENT OF YOUR DRINKING WATER

The source of your drinking water is surface water as described below:

Surface water is obtained from Claytor Lake and purchased surface water from the City of Radford obtained from the New River.

Is there any treatment of your drinking water supply? (X) Yes () No

The Virginia Department of Health conducted a source water assessment of our system during 2020. The reservoir/creek was determined to be of high susceptibility to contamination using the criteria developed by the state in its approved Source Water Assessment Program. The assessment report consists of maps showing the source water assessment area, an inventory of known land use activities of concern, and documentation of any known contamination. The report is available by contacting Jared Linkous at the phone number or address given elsewhere in this drinking water quality report.

DEFINITIONS

Contaminants in your drinking water are routinely monitored according to Federal and State regulations. The table on the next page shows the results of our monitoring for the period of January 1st to December 31st, 2022. In the table and elsewhere in this report you will find many terms and abbreviations you might not be familiar with. The following definitions are provided to help you better understand these terms:

Maximum Contaminant Level, or MCL - 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.

Maximum Contaminant Level Goal, or MCLG - 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.

Maximum Residual Disinfectant Level Goal or MRDLG: the level of 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.

Maximum Residual Disinfectant Level or MRDL: 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.

Non-detects (ND) - lab analysis indicates that the contaminant is not present

Parts per million (ppm) or Milligrams per liter (mg/l) - one part per million corresponds to one minute in two years or a single penny in \$10,000.

Parts per billion (ppb) or Micrograms per liter - one part per billion corresponds to one minute in 2,000 years, or a single penny in \$10,000,000.

Picocuries per liter (pCi/L) - picocuries per liter is a measure of the radioactivity in water.

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

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

Level 1 assessment - a study of the water system to identify potential problems and determine (if possible) why total coliform bacteria have been found in our water system.

Level 2 assessment - a very detailed study of the waterworks to identify potential problems and determine (if possible) why an *E. coli* PMCL violation has occurred and/or why total coliform bacteria have been found in our water system on multiple occasions.

Nephelometric Turbidity Unit (NTU) - nephelometric turbidity unit is a measure of the clarity, or cloudiness, of water. Turbidity in excess of 5 NTU is just noticeable to the average person. Turbidity is monitored because it is a good indicator of the effectiveness of our filtration system.

WATER QUALITY RESULTS

Regulated Contaminants

Contaminant (units)	MCLG	MCL	Level Detected	Violation (Y/N)	Range	Date of Sample	Typical Source of Contamination
Nitrate (ppm)	10	10	0.848	N	-	2024	Runoff from fertilizer use; Leaching from septic tanks, sewage; Erosion of natural deposits
Barium (ppm)	2	2	0.021	N	-	2024	Discharge of drilling waste; Discharge from metal refineries; Erosion of natural deposits
Fluoride (ppm)	4	4	0.460	N	-	2024	Erosion of natural deposits; Water additive which promotes strong teeth; Discharge from fertilizer and aluminum factories
Chlorine (ppm)	MRDLG = 4	MRDL = 4	1.1	N	0.26 – 2.0	2024	Water additive used to control microbes
Total Organic Carbon	NA	TT, met when ≥ 1	1.23	N	1.0–1.42	2024	Naturally present in the environment
Haloacetic Acids (ppb)	NA	60	41	N	13.1 – 65	2024	By-product of drinking water disinfection
Total Trihalomethanes (ppb)	NA	80	57	N	9.7 – 71.5	2024	By-product of drinking water disinfection
Turbidity	NA	TT, 1 NTU Max	0.17	N	0.01 – 0.17	2024	Soil runoff
		TT, ≤ 0.3 NTU 95% of the time	100%				

Lead and Copper Contaminants

Contaminant (units)	MCLG	Action Level	90 th Percentile	Date of Sampling	# of Sampling Sites Exceeding Action Level	Typical Source of Contamination
Lead (ppb)	0	AL = 15	0	8/2024 – 9/2024	0	Corrosion of household plumbing systems; Erosion of natural deposits
Copper (ppm)	1.3	AL = 1.3	0.347	8/2024 – 9/2024	0	Corrosion of household plumbing systems; Erosion of natural deposits

Monitoring Results for Sodium (Unregulated-No Limits Designated)

Level Detected (unit)	Sample Date	Typical Source	Guidance
9.59 (mg/L)	1/16/2024	Naturally Occuring; Addition of treatment chemicals/processes	For individuals on a <u>very</u> low sodium diet (500 mg/day), EPA recommends that drinking-water sodium not exceed 20 mg/L. Should you have a health concern, contact your health care provider.

The state allows us to monitor for some contaminants less than once per year because the concentrations of these contaminants do not change frequently. Some of our data presented in the above tables, though accurate, is more than one year old.

MCL's are set at very stringent levels by the U.S. Environmental Protection Agency. In developing the standards EPA assumes that the average adult drinks 2 liters of water each day throughout a 70-year life span. EPA generally sets MCLs at levels that will result in no adverse health effects for some contaminants or a one-in-ten-thousand to one-in-a-million chance of having the described health effect for other contaminants.

VIOLATION INFORMATION – Did any PMCL or TT violation occur during the year? () Yes (X) No

VIOLATION INFORMATION – Did any monitoring, reporting, or other violations occur during the year? () Yes (X) No
If yes, an explanation of the violation, including potential health effects, and actions we are taking to correct the violation, is as follows:

ADDITIONAL HEALTH INFORMATION

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. PCPSA is responsible for providing high quality drinking water, but 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 two 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 (800-426-4791). You can also use a filter certified by an American National Standards Institute accredited certifier to reduce lead in drinking water. If you are concerned about lead in your water and wish to have your water tested, contact PCPSA. Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available at <http://www.epa.gov/safewater/lead>.

ADDITIONAL INFORMATION ABOUT YOUR WATERWORKS

Service Line Inventory

PCPSA has completed the required Lead Service Line Inventory and submitted the results to the Virginia Department of Health Office of Drinking Water. Based on customer self-identification, historical records and field investigation, we have determined that there are 1188 lines with Unknown materials in the system. These will be included in our replacement plan. We thank you for your help and cooperation. The hard copy full inventory is available at the PCPSA offices.

Health Effects Information

Exposure to lead in drinking water can cause serious health effects in all age groups. Infants and children can have decreases in IQ and attention span. Lead exposure can lead to new learning and behavior problems or exacerbate existing learning and behavior problems. The children of women who are exposed to lead before or during pregnancy can have increased risk of these adverse health effects. Adults can have increased risks of heart disease, high blood pressure, kidney or nervous system problems.