

George Latimer County Executive

Sherlita Amler, M.D. Commissioner of Health

September 28, 2021

Town of Lewisboro 11 Main St South Salem, NY 10590

Attn: The Honorable Peter H. Parsons, Town Supervisor

2021 Annual Sanitary Survey Oakridge Water District Community Public Water Supply Lewisboro (T) PWS ID: NY5918395

Dear Supervisor Parsons:

The annual sanitary survey of the above referenced public water supply was conducted on September 14, 2021 by Chika Amasiani, Assistant Engineer and Delroy Taylor, P.E., Assistant Commissioner, the representatives of the Health Department.

Please be informed that at the time of the Sanitary Survey, the following items were noted and discussed with Mr. Tyler Post, Mr. Dan Mayorga, and Mr. Tony Goncalves, the representatives of your water system:

- 1. Rust continues to be observed on exterior of piping and filters in the treatment room leading to excessive corrosion. Please provide a timeline on when repainting of pipes and filter housing can be expected.
- 2. Sodium hydroxide was not provided with adequate secondary containment at the time of inspection. Adequate secondary containment for this chemical must be provided.
- 3. The well house for Well #5 had evident roofing issues as daylight was visible through seeps in the ceiling. The well house must be rehabilitated no later than December 20, 2021.
- 4. The area surrounding the Well #4 & #7 well house was overgrown and not easily accessible. Please provide adequate access to the entry way and surrounding area of the well house as soon as possible but no later than October 8, 2021.
- 5. The Permit to operate your public water supply was not posted at the time of inspection. A permit has since been provided to the Water System Operator and must be posted immediately

Enclosed please find the following documents for your information, use and records:

Water System Field Compliance Reports (NYSDOH Form DOH-4234)



- Water System Sanitary Survey Reports Form generated by the New York State Department of Health Safe Drinking Water Information System (SDWIS) and recorded on its database
- Updated Sample Schedule Report

Your continued cooperation toward compliance with the provisions of Part 5, Subpart 5-1 of the New York State Sanitary Code and Chapter 873, Article VII of the Laws of Westchester County is appreciated.

Should you have any questions or require additional information, please contact Chika Amasiani at (914) 864-7338 or the undersigned at (914) 864-7348.

Very truly yours,

Zaw T. Thein, P.E. Associate Engineer Bureau of Environmental Quality

ZT:CA Encl.

cc: Joel Smith, Facilities Manager, Town of Lewisboro
Tyler Post, Water System Operator, VRI
Andy Tse, NYSDOH
File

NEW YORK STATE DEPARTMENT OF HEALTH Bureau of Water Supply Protection

Water System Field Compliance Report: A Review of Compliance with Subpart 5-1 of the New York State Sanitary Code

wn, Village, or	Lewisboro (T)					idge Dr		
PWS ID N	Y 5 9 1 8 3 9 5 PWS Sour	Type [] te Type	ZC 🔲 N Surfa	NC □NTNC □ ace ☑Ground	NP GWUD	Date of Service 0 9 / 1 4	1 2	2
Time H	De Pre-operational Complaint Incident			Naiver Issued?	,	3 ************************************	5 🗆 N	C)
Part 5 Subsection	Summary Description of Sanitary Code Requirement	SOWIS	Status	Part 5 Subsection	Deficiency (Circle)	Summary Description of Sanitary Code Requirement	SOWIS	Sta
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	j	5-1.23(c)	М	Conspicuous posting of Sanitary Code Section 5-1.23, "Reporting Emergencies."	SF	1
5-1.22(a)	Obtain health department approval prior to the construction			5-1.29	S M	Finished (treated) water used for priming pumps.		14
7-1,62(8)	or modification of a water system.	SB		5-1.30	S M	Redundant disinfection equipment provided.	ND	11
5-1.23(a)	Obtain health department approval prior to use of an emergency water supply or alteration of a treatment process necessary to protect public health.	SD	ı	5-1.30 (e) 5-1.31(a)(3)	S M	Complies with disinfection waiver provision. Cross connection control program is implemented by supplier of water, including	ND SJ	4
5-1.27	Maintain minimum distribution system pressure of 20 psi at ground level.	SH	7	5-1.72(c)	S M	records of all device lesting. Complete daily records of operation of a water system.	09	'
5-1.30	Bypass of any stage of treatment,	SJ		5-1,72(d)	S M	Maintain records (e.g., sample results, reports, filter backwash recycle flow information).	10 09	"
5-1.30 5-1.30(b)	Disinfection of a groundwater source, surface water source or groundwater source influenced by surface water. Filtration of surface source and groundwater influenced	ND 41	1	5-1.72(b)	s	System is in compliance with Subpart 5-4. The correct number and level of operator(s) are available during plant operation. System has	SQ SY	
5-1.30(0)	by surface water unless avoidance criteria is met. Free chlorine residual disinfection concentration in the water.	42	4	rents		designated operators of appropriate grade level in responsible charge.	12	
5-1.30(b)(2)	entering the distribution system must be at least 0.2 mg/l and may not be less than the minimum concentration for compliance for more than four hours. Systems using other chemical disinfectants shall maintain residual disinfection levels entering the distribution system comparable to requirements for systems using chlorination. Maintain free chlorine residual at representative points in the distribution system.	41 NR		5-1.73	5 M	Provide or have available lest kit.		ţ
			i	App.5-A 3.2.1	S M	Developed well sources sufficient to meet maximum day demand with the largest well out of service.		1
5-1.30(g)				Арр.5-А 6.1	S	Pumps are accessible for maintenance and 3 feet above the 100 year flood plain.		1
5-1.31	Protect the water distribution system from the creation of cross connections of sufficient hazard to adversely affect the health	SJ		App.5-A.7.0.3 App.5-A.7.0.7	5 M	Water tanks, hatches, roofing, and access ways are watertight, vermin proof, and secure. Tank overflow terminates 12"-24" above grade		95
	of water consumers. Exercise due care and diligence in the maintenance and			App.5-B.2(d)	5 M	with proper screen on outlet. Finished grade of well is mounded to divert		-
	supervision of all sources of the public water to prevent so far as possible, their pollution and depletion.	SN		App.5-B.5(g)	s	surface water. Vented, water tight, vermin proof sanitary seal well cap.	so	1
1(0,	Exercise due care and diligence in the operation and main- tenance of a water treatment plant and distribution system.	SO		App.5-0.3(b)	5 M	Well casing in good condition and more than 18" above grade.		<u> </u>
	anding violations been resolved? 🔲 Yes 🔲 No		— 	Chlorine Residu Point of Collection Chlorine Residu	on <u>Entr</u>	Sample Collection Time 12 y Point mg/l Sample Collection Time 11	: 2	ن در
ments 5	er comment letter			Point of Collection	<u> 1210 </u>	Martin - Maplewad Bir	19#	32
	(0) 1/1						1	

Basic Information

Federal Primary Source Type: GW-Ground water System Population: 892 State PWS Type Code: C-Community water system Principal County: WESTCHESTER

Status Completed

Last Sanitary Survey: September 14, 2021

Sanitary Survey Frequency: Every 1 Year(s)

System Level Observations

Treatments Recommendation(s) made Source Recommendation(s) made

Finished Water Storage No deficiencies or recommendations Distribution System No deficiencies or recommendations Financial No deficiencies or recommendations

Specific Deficiencies

Persons on site for Sanitary Survey

Tony Goncalves Delroy F. Taylor Daniel Mayorga Chika Amasiani Tyler Post

1.11.0

SDWIS/State Water System Sanitary Survey Report Westchester County Health Dept PWS Name: OAKRIDGE WATER DISTRICT - PWS ID: NY5918395

Federal PWS Type Code: C-Community water system

Principal City:

Owner Type: L-Local Government

State Primary Source Type: GW-Ground water

Total Service Connections: 291

Most Significant Deficiency Recommenda

Date of Sanitary Survey 9/14/2021

Next Sanitary Survey

9/14/2022

Water System Notification Date

M and R and Data Verification No deficiencies or recommendations Management and Operations No deficiencies or recommendations Pumps (fac, cntls, etc.) No deficiencies or recommendations Operator Compliance Security Other Not Applicable No deficiencies or recommendations No deficiencies or recommendations

SDWIS/State Water Sample Schedule Report OAKRIDGE WATER DISTRICT PWS ID: NY5918395

Due Contaminant (Group)/

2021 Sample Location/Frequency

Last Compliance Results

Samples last collected:

8/3/2021

Samples last collected:

6/10/2021

Sample Requirements

Revised Total Coliform Rule (RTCR)

Location: DISTRIBUTION SYSTEM ID: DS0001

Frequency: 1 Sample Monthly

1 Sample must be collected days 3-9 of every month.

A positive total coliform (TC+) sample requires notifying the health department and collecting repeat distribution system samples within 24 hours. Unless otherwise directed by the health department, source (or raw) water before any treatment, from all active wells, must also be sampled within 24

Part 5-1.52 Table 9A - Disinfection Byproducts/Stage 2

Location: DISTRIBUTION SYSTEM ID: DS0001

Frequency: 1 Sample Quarterly

Sample Point: 32 SPLIT ROCK ROAD

Sample Point No.: LRAA1

Sample Point Type: DS-Distribution System

Location: DISTRIBUTION SYSTEM ID: DS0001

Frequency: 1 Sample Quarterly

Sample Point: 163 LAUREL RIDGE

Sample Point No.: LRAA2

Sample Point Type: DS-Distribution System

Part 5-1.52 Table 8C- Nitrates and Nitrites

Location: DISTRIBUTION SYSTEM ID: DS0001

Frequency: 1 Sample Yearly Sample Point: ENTRY POINT

Sample Point No.: EP-01

Sample Point Type: EP-Entry Point

Part 5-1.42 and 5-1.47 - Lead and Copper

Location: DISTRIBUTION SYSTEM ID: DS0001

Frequency: 10 Samples Every 3 years

10 Samples Collected on or Before: 6/26/2021

9/25/2018

Samples last collected: 1 Sample must be collected days 3-9 8/3/2021

of Feb, May, Aug, and Nov

1 Sample must be collected days 3-9

of Feb, May, Aug, and Nov

Sample must be collected by 12/31/2021

Samples last collected:

Next sample must be collected by 12/31/2021

Next 10 samples must be collected between

6/1/2024 and 9/30/2024.

Locations: WELL # 2 ID: WL0001 WELL # 4 ID: WL0002

WELL # 5 ID: WL0003 WELL TW # 6 ID: WL086793 WELL #7 ID: WL0007

Frequency: 1 Sample Every 3 years Sample Point: ENTRY POINT Sample Point No.: EP-01

Sample Point Type: EP-Entry Point

Part 5-1.52 Table 8B - Primary Inorganic Chemicals

Location: DISTRIBUTION SYSTEM ID: DS0001

Frequency: 1 Sample Every 3 years Sample Point: ENTRY POINT

Sample Point No.: EP-01 Sample Point Type: EP-Entry Point Samples last collected:

5/11/2021

Next sample must be collected by 12/31/2024

Part 5-1.52 Table 8D - Secondary Inorganic Chemicals

Location: DISTRIBUTION SYSTEM ID: DS0001

Frequency: 1 Sample Every 3 years

Sample Point: ENTRY POINT

Sample Point No.: EP-01 Sample Point Type: EP-Entry Point Samples last collected:

Next sample must be collected by 12/31/2024

5/11/2021

9/29/2021 WESTCHESTER COUNTY HEALTH DEPT OAKRIDGE WATER DISTRICT - NY5918395 Page 1

SDWIS/State Water Sample Schedule Report OAKRIDGE WATER DISTRICT PWS ID: NY5918395

Due Contaminant (Group)/

2021 Sample Location/Frequency

Last Compliance Results

Sample Requirements

Part 5-1.52 Table 9B - Principal Organic Chemicals

Location: WELL # 2 ID: WL0001 Frequency: 1 Sample Every 3 years

Sample Point: WELL # 2 TAP Sample Point No.: SP-01

Sample Point Type: RW-Raw Water Source

Location: WELL # 4 ID: WL0002 Frequency: 1 Sample Every 3 years Sample Point: WELL # 4 TAP

Sample Point No.: SP-01

Sample Point Type: RW-Raw Water Source

Location: WELL #5 ID: WL0003 Frequency: 1 Sample Every 3 years

Sample Point: WELL # 5 TAP Sample Point No.: SP-01

Sample Point Type: RW-Raw Water Source

Location: WELL #7 ID: WL0007 Frequency: 1 Sample Every 3 years

Sample Point: WELL #7 TAP Sample Point No.: SP-01

Sample Point Type: RW-Raw Water Source

Location: WELL TW # 6 ID: WL086793 Frequency: 1 Sample Every 3 years

Sample Point: WELL #6 TAP (#2 WELLHOUSE)

Sample Point No.: SP-01

Sample Point Type: RW-Raw Water Source

Part 5-1.52 Table 9C - Synthetic Organic Chemicals

Location: WELL # 2 ID: WL0001 Frequency: 1 Sample Every 3 years

Sample Point: WELL #2 TAP Sample Point No.: SP-01

Sample Point Type: RW-Raw Water Source

Location: WELL # 4 ID: WL0002

Frequency: 1 Sample Every 3 years

Sample Point: WELL # 4 TAP Sample Point No.: SP-01

Sample Point Type: RW-Raw Water Source

Location: WELL # 5 ID: WL0003 Frequency: 1 Sample Every 3 years

Sample Point: WELL # 5 TAP

Sample Point No.: SP-01

Sample Point Type: RW-Raw Water Source

Location: WELL #7 ID: WL0007 Frequency: 1 Sample Every 3 years

Location: WELL TW # 6 ID: WL086793

Sample Point: WELL #7 TAP Sample Point No.: SP-01

Sample Point Type: RW-Raw Water Source

Frequency: 1 Sample Every 3 years

Sample Point: WELL #6 TAP (#2 WELLHOUSE)

Sample Point No.: SP-01

Sample Point Type: RW-Raw Water Source

Samples last collected:

Next sample must be collected by 12/31/2024

5/11/2021

Samples last collected:

5/11/2021

Next sample must be collected by 12/31/2024

Samples last collected:

5/11/2021

Next sample must be collected by 12/31/2024

Samples last collected:

5/11/2021

Next sample must be collected by 12/31/2024

Next sample must be collected by 12/31/2024 Samples last collected:

5/11/2021

Samples last collected:

5/11/2021

Next sample must be collected by 12/31/2024

Samples last collected:

Next sample must be collected by 12/31/2024

5/11/2021

Next sample must be collected by 12/31/2024 Samples last collected:

5/11/2021

Samples last collected:

Next sample must be collected by 12/31/2024

5/11/2021

Samples last collected:

Next sample must be collected by 12/31/2024

5/11/2021

9/29/2021 WESTCHESTER COUNTY HEALTH DEPT OAKRIDGE WATER DISTRICT - NY5918395 Page 2

SDWIS/State Water Sample Schedule Report OAKRIDGE WATER DISTRICT PWS ID: NY5918395

Due Contaminant (Group)/
2021 Sample Location/Frequency

Last Compliance Results

Samples last collected:

4/19/2019

Sample Requirements

Part 5-1.52 Table 12 - Radiological

Location: DISTRIBUTION SYSTEM ID: DS0001

Frequency: 1 Sample Every 3 years
Sample Point: ENTRY POINT
Sample Point No.: EP-01
Sample Point Type: EP-Entry Point

Last Sample Collected

Next sample must be collected by 12/31/2022

Location: WELL # 2 ID: WL0001 Frequency: 1 Sample Every 3 years

Sample Point: WELL # 2 TAP Sample Point No.: SP-01

Last Sample Collected Next sample must be collected by 12/31/2022 on or Before: 03/28/2019

Sample Point No.: SP-01 Sample Point Type: RW-Raw Water Source

Location: WELL # 4 ID: WL0002 Frequency: 1 Sample Every 3 years

Sample Point: WELL # 4 TAP Sample Point No.: SP-01

Sample Point Type: RW-Raw Water Source

Last Sample Collected on or Before: 03/28/2019

Next sample must be collected by 12/31/2022

Location: WELL # 5 ID: WL0003 Frequency: 1 Sample Every 3 years

Sample Point: WELL # 5 TAP Sample Point No.: SP-01

Sample Point Type: RW-Raw Water Source

Last Sample Collected on or Before: 03/28/2019

Next sample must be collected by 12/31/2022

Location: WELL TW # 6 ID: WL086793 Frequency: 1 Sample Every 3 years

Sample Point: WELL #6 TAP (#2 WELLHOUSE)

Sample Point No.: SP-01

Sample Point Type: RW-Raw Water Source

Location: WELL #7 ID: WL0007 Frequency: 1 Sample Every 3 years Sample Point: WELL #7 TAP

Sample Point: WELL #7 TA Sample Point No.: SP-01

Sample Point Type: RW-Raw Water Source

Last Sample Collected Next sample must be collected by 12/31/2022

on or Before: 03/28/2019

Samples last collected: Next sa

3/28/2019

Next sample must be collected by 12/31/2022

Part 5-1.52 Table 9C - PFOA, PFOS and 1,4-Dioxane

Location: WELL # 2 ID: WL0001 Frequency: 1 Sample Quarterly

Sample Point: WELL # 2 TAP Sample Point No.: SP-01

Sample Point Type: RW-Raw Water Source

Location: WELL # 4 ID: WL0002 Frequency: 1 Sample Quarterly

Sample Point: WELL # 4 TAP Sample Point No.: SP-01

Sample Point Type: RW-Raw Water Source

Location: WELL # 5 ID: WL0003 Frequency: 1 Sample Quarterly

Sample Point: WELL # 5 TAP Sample Point No.: SP-01

Sample Point Type: RW-Raw Water Source

Location: WELL TW # 6 ID: WL086793 Frequency: 1 Sample Quarterly

Sample Point: WELL #6 TAP (#2 WELLHOUSE)

Sample Point: WELL #6 TAP (#2 WELLHO Sample Point No.: SP-01

Sample Point Type: RW-Raw Water Source

Location: WELL #7 ID: WL0007 Frequency: 1 Sample Quarterly Sample Point: WELL #7 TAP

Sample Point No.: SP-01 Sample Point Type: RW-Raw Water Source Last Sample Collected

Last Sample Collected

8/12/2021

8/12/2021

1 sample must be collected every quarter

1 sample must be collected every quarter

Last Sample Collected

8/31/2021

1 sample must be collected every quarter

Last Sample Collected

8/12/2021

1 sample must be collected every quarter

Last Sample Collected 8/12/2021

1 sample must be collected every quarter

9/29/2021 WESTCHESTER COUNTY HEALTH DEPT OAKRIDGE WATER DISTRICT - NY5918395 Page 3