



WATER TESTING PERFORMED IN 2017

ANNUAL WATER QUALITY REPORT

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Quality First

Once again we are pleased to present our annual water quality report covering the period between January 1 and December 31, 2017. As in years past, we are committed to delivering the best-quality drinking water possible. To that end, we remain vigilant in meeting the challenges of new regulations, source water protection, water conservation, and community outreach and education while continuing to serve the needs of all of our water users. Thank you for allowing us the opportunity to serve you and your family.

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/lead.

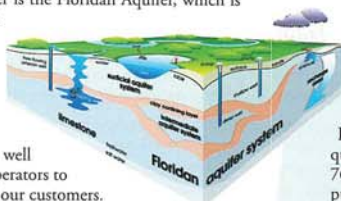
Important Health Information

Some people may be more vulnerable to contaminants in drinking water than the general population. Immunocompromised persons such as those with cancer undergoing chemotherapy, those 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>.



Where Does Statesboro's Water Come From?

The raw water supply of Statesboro's drinking water is the Floridan Aquifer, which is a limestone formation running under the entire county and extending south. Raw water from this aquifer is of a very high quality. Water is withdrawn from the Floridan Aquifer using six active deep wells. Water treatment consists of chlorination (disinfection), fluoridation (to help prevent tooth decay in children's teeth), and phosphate (for iron and corrosion control). This treatment takes place at each well site and is sampled and monitored daily by certified operators to ensure that high-quality drinking water is delivered to our customers.



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 that 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.

Information on the Internet

The U.S. EPA (<https://goo.gl/TFAMKc>) and the Centers for Disease Control and Prevention (www.cdc.gov/healthywater/drinking/) Web sites provide a substantial amount of information on many issues relating to water resources, water conservation, and public health. Also, the Georgia Environmental Protection Division has a Web site (epd.georgia.gov) that provides complete and current information on water issues in Georgia, including valuable information about our watershed.

QUESTIONS?

If you are interested in learning more about the water department or have any questions about the quality of water in Statesboro, please call Danny Lively at (912) 764-0693, or Matt Aycock at (912) 681-1161. If you have any questions about public participation and policy decisions, please call (912) 764-0693.

Sample Results

During the past year, we have taken many water samples in order to determine the presence of any radioactive, biological, inorganic, volatile organic, or synthetic organic contaminants. Our water is monitored for many different kinds of substances on a very strict sampling schedule. The information in the data tables shows only those substances that were detected between January 1 and December 31, 2017.

The State recommends monitoring 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. Remember that detecting a substance does not necessarily mean the water is unsafe to drink; our goal is to keep all detects below their respective maximum allowed levels.

We participated in the 3rd stage of the U.S. EPA's Unregulated Contaminant Monitoring Rule (UCMR3) program by performing additional tests on our drinking water. UCMR3 benefits the environment and public health by providing the EPA with data on the occurrence of contaminants suspected to be in drinking water, in order to determine if the EPA needs to introduce new regulatory standards to improve drinking water quality. Contact us for more information on this program.

REGULATED SUBSTANCES							
SUBSTANCE (UNIT OF MEASURE)	YEAR SAMPLED	MCL (MRDL)	MCLG (MRDLG)	AMOUNT DETECTED	RANGE LOW-HIGH	VIOLATION	TYPICAL SOURCE
Chlorine (ppm)	2017	[4]	[4]	0.72	ND-2.20	No	Water additive used to control microbes
Fluoride (ppm)	2017	4	4	0.64	0.09-2.94	No	Erosion of natural deposits; Water additive that promotes strong teeth; Discharge from fertilizer and aluminum factories
Haloacetic Acids [HAAs] (ppb)	2017	60	NA	1.0	ND-1.0	No	By-product of drinking water disinfection
TTHMs [Total Trihalomethanes] (ppb)	2017	80	NA	10.4	4.7-14.6	No	By-product of drinking water disinfection

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)	2016	1.3	1.3	0.066	0/30	No	Corrosion of household plumbing systems; Erosion of natural deposits
Lead (ppb)	2016	15	0	3.6	1/30	No	Corrosion of household plumbing systems; Erosion of natural deposits

UNREGULATED CONTAMINANT MONITORING RULE - PART 3 (UCMR3)

SUBSTANCE (UNIT OF MEASURE)	YEAR SAMPLED	AMOUNT DETECTED	RANGE LOW-HIGH
Molybdenum (ppb)	2014	1.67	1.40-1.90
Strontium (ppb)	2014	211	170-290

Water Disinfection

Any water supply can naturally be exposed to disease-causing microbes. Statesboro follows state and federal regulations to prevent disease by disinfection with chlorine. Regulations require a detectable amount of chlorine throughout the water distribution system to ensure public safety. Certain by-products are formed during disinfection as a result of chemical reactions between chlorine and naturally occurring organic matter in the water. The addition of chlorine is carefully controlled so the levels of by-products are kept low, while disinfection remains effective.

Count on Us

Delivering high-quality drinking water to our customers involves far more than just pushing water through pipes. Water treatment is a complex, time-consuming process. Because tap water is highly regulated by state and federal laws, water treatment plant and system operators must be licensed and are required to commit to long-term, on-the-job training before becoming fully qualified. Our licensed water professionals have a basic understanding of a wide range of subjects, including mathematics, biology, chemistry, and physics. Some of the tasks they complete on a regular basis include:

- Operating and maintaining equipment to purify and clarify water;
- Monitoring and inspecting machinery, meters, gauges, and operating conditions;
- Conducting tests and inspections on water and evaluating the results;
- Maintaining optimal water chemistry;
- Applying data to formulas that determine treatment requirements, flow levels, and concentration levels;
- Documenting and reporting test results and system operations to regulatory agencies; and
- Serving our community through customer support, education, and outreach.

So, the next time you turn on your faucet, think of the skilled professionals who stand behind each drop.



Source Water Assessment

A Source Water Assessment was completed for the City of Statesboro Water System. This report lists potential contaminants that could be detected within the system. If you are interested in a copy of this report, contact the City of Statesboro, P.O. Box 348, Statesboro, Georgia, 30459.

Protecting Your Water

Bacteria are a natural and important part of our world. There are around 40 trillion bacteria living in each of us; without them, we would not be able to live healthy lives. Coliform bacteria are common in the environment and are generally not harmful themselves. The presence of this bacterial form in drinking water is a concern, however, because it indicates that the water may be contaminated with other organisms that can cause disease.

In 2016, the U.S. EPA passed a new regulation called the Revised Total Coliform Rule, which requires additional steps that water systems must take in order to ensure the integrity of the drinking water distribution system by monitoring for the presence of bacteria like total coliform and *E. coli*. The rule requires more stringent standards than the previous regulation, and it requires water systems that may be vulnerable to contamination to have in place procedures that will minimize the incidence of contamination. Water systems that exceed a specified frequency of total coliform occurrences are required to conduct an assessment of their system and correct any problems quickly. The U.S. EPA anticipates greater public health protection under the new regulation due to its more preventive approach to identifying and fixing problems that may affect public health.

Though we have been fortunate to have the highest-quality drinking water, our goal is to eliminate all potential pathways of contamination into our distribution system, and this new rule helps us to accomplish that goal.

Definitions

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

LRAA (Locational Running Annual Average): The average of sample analytical results for samples taken at a particular monitoring location during the previous four calendar quarters. Amount Detected values for TTHMs and HAAs are reported as the highest LRAAs.

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.

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).

Benefits of Chlorination

Disinfection, a chemical process used to control disease-causing microorganisms by killing or inactivating them, is unquestionably the most important step in drinking water treatment. By far the most common method of disinfection in North America is chlorination.

Before communities began routinely treating drinking water with chlorine (starting with Chicago and Jersey City in 1908), cholera, typhoid fever, dysentery, and hepatitis A killed thousands of U.S. residents annually. Drinking water chlorination and filtration have helped to virtually eliminate these diseases in the U.S. Significant strides in public health are directly linked to the adoption of drinking water chlorination. In fact, the filtration of drinking water plus the use of chlorine is probably the most significant public health advancement in human history.

How chlorination works:

Potent Germicide Reduction in the level of many disease-causing microorganisms in drinking water to almost immeasurable levels.

Taste and Odor Reduction of many disagreeable tastes and odors like foul-smelling algae secretions, sulfides, and odors from decaying vegetation.

Biological Growth Elimination of slime bacteria, molds, and algae that commonly grow in water supply reservoirs, on the walls of water mains, and in storage tanks.

Chemical Removal of hydrogen sulfide (which has a rotten egg odor), ammonia, and other nitrogenous compounds that have unpleasant tastes and hinder disinfection. It also helps to remove iron and manganese from raw water.

Community Water Fluoridation

The safety and benefits of fluoride are well documented. For over 70 years, U.S. citizens have benefited from drinking water containing fluoride, leading to better dental health. Drinking fluoridated water keeps the teeth strong and has reduced tooth decay by approximately 25 percent in children and adults.

Over the past several decades, there have been major improvements in oral health. Still, tooth decay remains one of the most common chronic diseases of childhood. Community water fluoridation has been identified as the most cost-effective method of delivering fluoride to all members of the community, regardless of age, educational attainment, or income level.

Nearly all water contains some fluoride, but usually not enough to help prevent tooth decay or cavities. Public water systems can add the right amount of fluoride to the local drinking water to prevent tooth decay.

Community water fluoridation is recommended by nearly all public health, medical, and dental organizations in the U.S. Because of its contribution to the dramatic decline in tooth decay, the Centers for Disease Control and Prevention (CDC) named community water fluoridation one of the greatest public health achievements of the 20th century. (Courtesy of CDC: cdc.gov/fluoridation)

What Are PPCPs?

When cleaning out your medicine cabinet, what do you do with your expired pills? Many people flush them down the toilet or toss them into the trash. Although this seems convenient, these actions could threaten our water supply.

Recent studies are generating a growing concern over pharmaceuticals and personal care products (PPCPs) entering water supplies. PPCPs include human and veterinary drugs (prescription or over-the-counter) and consumer products, such as cosmetics, fragrances, lotions, sunscreens, and household cleaning products. From 2006 to 2010, the number of U.S. prescriptions increased 12 percent to a record 3.7 billion, while nonprescription drug purchases held steady around 3.3 billion. Many of these drugs and personal care products do not biodegrade and may persist in the environment for years.

The best and most cost-effective way to ensure safe water at the tap is to keep our source waters clean. Never flush unused medications down the toilet or sink. Instead, check to see if the pharmacy where you made your purchase accepts medications for disposal, or contact your local health department for information on proper disposal methods and drop-off locations. You can also go on the Web (<https://goo.gl/aZPgeB>) to find more information about disposal locations in your area.