



EDMUND G. BROWN JR.
GOVERNOR



MATTHEW RODRIGUEZ
SECRETARY FOR
ENVIRONMENTAL PROTECTION

State Water Resources Control Board

Division of Drinking Water

September 8, 2014
System No.: 1510021

Mr. Daniel Allen, Public Works Director
City of Wasco
764 E Street
Wasco, CA 93280

RE: **Citation No. 03-12-14C-023**
Violation of Title 22, California Code of Regulations, Section 64426.1,
For July 2014

Dear Mr. Allen:

Enclosed is a Citation issued to the City of Wasco (Water System) public water system.

The Water System will be billed at the Division's hourly rate (currently estimated at \$126.00) for the time spent on issuing this Citation. The California Health and Safety Code Section 116577 provides that a public water system must reimburse the Division for actual costs incurred by the Division for specified enforcement actions, including but not limited to, preparing, issuing and monitoring compliance with a citation. At this time, the Division has spent approximately one and one half hours on enforcement activities associated with this violation.

The Water System will receive a bill sent from the Division of Drinking Water Fee Billing Unit in August of the next fiscal year. This bill will contain fees for any enforcement time spent on the City of Wasco water system for the current fiscal year.

If you have any questions regarding this letter and the enclosed citation, please contact the Visalia District office at (559) 447-3300.

Sincerely,

Tricia A. Wathen, P.E.
Senior Sanitary Engineer, Visalia District
SOUTHERN CALIFORNIA BRANCH
DRINKING WATER FIELD OPERATIONS

TAW/TS
Enclosures
cc: Kern County Environmental Health Services Division

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**STATE OF CALIFORNIA
WATER RESOURCES CONTROL BOARD
DIVISION OF DRINKING WATER**

IN RE: CITY OF WASCO
Water System No. 1510021

TO: Mr. Daniel Allen, Public Works Director
City of Wasco
764 E Street
Wasco, CA 93280

CC: Fresno County Division of Environmental Services
Kern County Environmental Health Services Department

**CITATION FOR VIOLATION OF
CALIFORNIA CODE OF REGULATIONS, TITLE 22, SECTION 64426.1
July 2014**

Issued on September 8, 2014

Section 116650 of the California Health and Safety Code authorizes the issuance of a citation to a public water system for violation of the California Safe Drinking Water Act (Health and Safety Code, Division 104, Part 12, Chapter 4, commencing with Section 116270) (hereinafter "California SDWA"), or any regulation, standard, permit or order issued or adopted thereunder.

The State Water Resources Control Board (hereinafter "Board"), acting by and through its Division of Drinking Water (hereinafter "Division") and the Deputy Director for the Division (hereinafter "Deputy Director"), hereby issues a citation to the City of Wasco (hereinafter "City") (764 E Street, Wasco, CA 93280) for violation of California Code of Regulations (CCR), Title 22, Section 64426.1.

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APPLICABLE AUTHORITIES

The applicable statutes and regulations are provided in Appendix A, attached hereto and incorporated by reference.

STATEMENT OF FACTS

Section 64426.1(b)(2) specifies that a public water system collecting fewer than 40 samples per month is in violation of the total coliform MCL when more than one sample collected during any month is total coliform-positive. The City is required to collect a minimum of five (5) distribution system bacteriological samples per week. The bacteriological water analysis results submitted by the City reported the presence of total coliform bacteria in two (2) of thirty-one (31) samples collected by the City in July 2014. None of the positive samples showed the presence of fecal coliform or *E. coli* bacteria.

Upon being informed of the presence of total coliform bacteria in one routine sample collected on July 22, 2014, City staff collected a total of three repeat samples on July 24, 2014. One of the repeat samples showed the presence of total coliform bacteria. Additional routine samples were collected on July 28, 2014, and were negative for total coliform bacteria and *E. coli*. All distribution water samples for coliform bacteria collected during July 2014 are summarized in Attachment A.

The cause of the failure is inconclusive based on the investigation conducted by the City's staff (see Attachment C). The City provides continuous disinfection of the distribution system and conducts routine monitoring from all its active wells. The analytical results for one of the two wells that were online in the month of July 2014, showed the presence of total coliform bacteria in Well No. 10 at 1.1 MPN/ 100mL. Well No. 7 results were negative for both total coliform bacteria and *E. coli* bacteria. Follow-up sampling for Well No. 10 was conducted on July 31, 2014, and the analytical results were negative for both total coliform bacteria and *E. coli* bacteria.

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The Groundwater Rule (GWR) requires the collection of a sample for bacteriological evaluation from the well(s) serving the system in response to a coliform-positive distribution sample within 24 hours of being notified of the coliform-positive result. Based on data submitted to the Division, the City did collect their raw water well samples in a timely manner in follow-up to the total coliform-positive routine samples collected on July 22, 2014. All source water samples for coliform bacteria collected during July 2014 are summarized in Attachment C.

Public notification to the Division and consumers of a water system is required whenever a violation of the Total Coliform MCL occurs. Notification to the Division is required by the end of the business day on which the violation has been determined. If the Division is closed, notification shall be within 24 hours of the determination. The Division was notified on July 23, 2014, in accordance with the above-referenced section.

Public notification to the consumers of the water systems has not been conducted. Attachments D and E is a copy of a public notice that the City may use to notify its customers. This notice fulfills the total coliform MCL notification requirements and includes the mandatory language. Proof of notification is required.

DETERMINATION

Title 22, CCR, Section 64426.1, Total Coliform Maximum Contaminant Level (MCL) provides that a public water system that collects fewer than 40 bacteriological samples per month has violated the regulation if more than one (1) sample collected during any month is total coliform-positive.

1 The Division has determined that the City failed to comply with Title 22, CCR, Section
2 64426.1, Total Coliform MCL for the month of July 2014 due to the presence of total
3 coliform bacteria in two (2) of thirty one (31) samples collected in July 2014.

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6 **DIRECTIVES**

7 The City is hereby directed to take the following actions:

- 8
- 9 1. Comply with Title 22, CCR, Section 64426.1, in all future monitoring periods.
 - 10
11 2. On or before **September 31, 2014** notify all persons served by the City of the TCR
12 MCL violation by utilizing the Tier 2 Public Notice for violations of Section 64426.1.
13 Public notice shall be given pursuant to Sections 64463.4 [lists method, time-frame
14 and delivery] and 64465 [content & format]. The City shall use the public
15 notification template appended as Attachment D to fulfill the public notification
16 requirements. Section 64463.4 allows community water systems to use mail or
17 direct delivery to each customer and the use of one or more of the following
18 methods: publication in a daily or weekly newspaper, posting the public notice in a
19 conspicuous public place within the water system or on the internet, or by delivery
20 to community organizations. The City may publish the public notice once in a daily
21 or weekly newspaper available in the general service area. The Division hereby
22 waives public notification by mail or direct delivery.
 - 23
24
25 3. Within 10 days of receipt of this Citation, the City shall provide to the Division
26 certification of public notification using the enclosed Proof of Notification form
27 (Attachment E). A copy of the final notice that was distributed shall also be
submitted to the Division with the proof of notification form.

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The Division reserves the right to make such modifications to the Citation as it may deem necessary to protect public health and safety. Such modifications may be issued as amendments to this Citation and shall be effective upon issuance.

Nothing in this Citation relieves the City of its obligation to meet the requirements of the California Safe Drinking Water Act or any regulation, standard, permit or order issued thereunder.

All submittal required by this Citation shall be submitted to the Division at the following address:

Tricia A. Wathen, P.E.
Senior Sanitary Engineer
State Water Resources Control Board
Division of Drinking Water
265 W. Bullard Avenue, Suite 101
Fresno, CA 93704

PARTIES BOUND

This Citation shall apply to and be binding upon the City of Wasco, its officers, directors, agents, employees, contractors, successors, and assignees.

SEVERABILITY

The Directives of this Citation are severable, and the City shall comply with each and every provision thereof notwithstanding the effectiveness of any provision.

FURTHER ENFORCEMENT ACTION

The California SDWA authorizes the Board to: issue citation with assessment of administrative penalties to a public water system for violation or continued violation of the

1 requirements of the California SDWA or any permit, regulation or order issued or adopted
2 thereunder including, but not limited to, failure to correct a violation identified in a citation or
3 compliance order. The California SDWA also authorizes the Board to take action to
4 suspend or revoke a permit that has been issued to a public water system if the system
5 has violated applicable law or regulations or has failed to comply with an order of the
6 Board; and to petition the superior court to take various enforcement measures against a
7 public water system that has failed to comply with an order of the Board. The Board does
8 not waive any further enforcement action by issuance of this citation.



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13 September 8, 2014
14 Date

Tricia A. Wathen
Tricia A. Wathen, P.E.
Senior Sanitary Engineer, Visalia District
DRINKING WATER FIELD OPERATIONS BRANCH

15
16 **TW/TS**

17 **Attachments:**

- 18 Attachment A: Positive Total Coliform Investigation report
19 Attachment B: Summary of Distribution Bacteriological Samples for July 2013 through July 2014
20 Attachment C: Summary of Source Bacteriological Samples for July 2013 through July 2014
21 Attachment D: Public Notice for July 2014
22 Attachment E: Proof of Notification Form

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APPENDIX A

Applicable Statues and Regulations for Citation No. 03-12-14C-023

Section 116650 of the CHSC states in relevant part:

§116650. Citations

- (a) If the Division determines that a public water system is in violation of this chapter or any regulation, permit, standard, citation, or order issued or adopted thereunder, the Division may issue a citation to the public water system. The citation shall be served upon the public water system personally or by certified mail. Service shall be deemed effective as of the date of personal service or the date of receipt of the certified mail. If a person to whom a citation is directed refuses to accept delivery of the certified mail, the date of service shall be deemed to be the date of mailing.
- (b) Each citation shall be in writing and shall describe the nature of the violation or violations, including a reference to the statutory provision, standard, order, citation, permit, or regulation alleged to have been violated.
- (c) A citation may specify a date for elimination or correction of the condition constituting the violation.
- (d) A citation may include the assessment of a penalty as specified in subdivision (e).
- (e) The Division may assess a penalty in an amount not to exceed one thousand dollars (\$1,000) per day for each day that a violation occurred, and for each day that a violation continues to occur. A separate penalty may be assessed for each violation.

Section 64426.1 of Title 22, California Code of Regulations (CCR) states in relevant part:

§64426.1. Total Coliform Maximum Contaminant Level (MCL).

- (a) Results of all samples collected in a calendar month pursuant to Sections 64423, 64424, and 64425 that are not invalidated by the Department or the laboratory shall be included in determining compliance with the total coliform MCL. Special purpose samples such as those listed in §64421(b) and samples collected by the water supplier during special investigations shall not be used to determine compliance with the total coliform MCL.
- (b) A public water system is in violation of the total coliform MCL when any of the following occurs:
 - (1) For a public water system which collects at least 40 samples per month, more than 5.0 percent of the samples collected during any month are total coliform-positive; or
 - (2) For a public water system which collects fewer than 40 samples per month, more than one sample collected during any month is total coliform-positive; or
 - (3) Any repeat sample is fecal coliform-positive or E. coli-positive; or
 - (4) Any repeat sample following a fecal coliform-positive or E. coli-positive routine sample is total coliform-positive.
- (c) If a public water system is not in compliance with paragraphs (b)(1) through (4), during any month in which it supplies water to the public, the water supplier shall notify the Department by the end of the business day on which this is determined, unless the determination occurs after the Department office is closed, in which case the supplier shall notify the Department within 24 hours of the determination. The water supplier

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shall also notify the consumers served by the water system. A Tier 2 Public Notice shall be given for violations of paragraphs (b)(1) or (2), pursuant to section 64463.4. A Tier 1 Public Notice shall be given for violations of paragraphs (b)(3) or (4), pursuant to section 64463.1.

This form is intended to assist public water systems in completing the investigation required by the Division of Drinking Water (Section 64426(f)) of Title 22 California Code of Regulations) and may be modified to take into account conditions unique to the system.

POSITIVE TOTAL COLIFORM INVESTIGATION

ADMINISTRATIVE INFORMATION

PWS Name: City of Wasco		PWSID NUMBER: 1510021	
Operator in Responsible Charge (ORC)		Name	Address
Person that collected TC samples if different than ORC		Jesus D. Cortez	764 E Street Wasco, Ca. 93280
Owner		City of Wasco	764 E Street Wasco, Ca. 93280
Certified Laboratory for Microbiological Analyses		B.C. Laboratories, Inc.	4100 Atlas Ct. Bakerfield, Ca. 93308
Date Investigation Completed: 8/11/2014			
Month(s) of Total Coliform MCL Failure: July 2014			

INVESTIGATION DETAILS

SOURCE	WELL (Name)				COMMENTS
	#5-City Yard	#7-Poplar	#10-Iris	#11-Oak	
1. Inspect each well head for physical defects and report					No visible defects
a. Is raw water sample tap upstream from point of disinfection?	Yes	Yes	Yes	Yes	
b. Is wellhead vent pipe screened?	Yes	Yes	Yes	Yes	
c. Is wellhead seal watertight?	Yes	Yes	Yes	Yes	
d. Is well head located in pit or is any piping from the wellhead submerged?	No	No	No	No	
e. Does the ground surface slope towards well head?	No	No	No	No	
f. Is there evidence of standing water near the wellhead?	No	No	No	No	
g. Are there any connections to the raw water piping that could be cross connections? (describe all connections in comments)	No	No	No	No	
h. Is the wellhead secured to prevent unauthorized access?	No	No	No	No	
i. To what treatment plant (name) does this well pump?	N/A	N/A	N/A	N/A	On site chlorination
j. How often do you take a raw water total coliform (TC) test?	Monthly	Monthly	Monthly	Monthly	
k. Provide the date and result of the last TC test at this location	7/28/2014	7/28/2014	7/30/2014	7/28/2014	See attachments

TREATMENT	PLANT (NAME)	PLANT (NAME)	PLANT (NAME)	PLANT (NAME)	COMMENTS
1. If you provide continuous chlorination treatment, was there any equipment failure? Did the distribution system maintain a chlorine residual?					

POSITIVE TOTAL COLIFORM INVESTIGATION

	TANK (name)	TANK (name)	TANK (name)	TANK (name)	COMMENTS
as root intrusion?					
8. Does the tank "float" on the distribution system or are there separate inlet and outlet lines?					
9. What is the measured chlorine residual (total/free) of the water exiting the storage tank today?					
10. What is the volume of the storage tank in gallons?					
11. Is the tank baffled?					
12. Prior to the TC+ or EC+, what was the previous date item #1-7 were checked and documented?					

DISTRIBUTION SYSTEM		SYSTEM RESPONSES				
1. What is the minimum pressure you are maintaining in the distribution system?		38 P.S.I.				
2. Did pressure in the distribution system drop to less than 5 psi prior to experiencing the TC+ positive finding?	No					
3. Has the distribution system been worked on within the last week? (service taps, hydrant flushing, main breaks, main extensions, etc.) if yes, provide details.	No					
4. Are there any signs of excavations near your distribution system not under the direct control of your maintenance staff?	No					
5. Did you inspect your distribution system to check for mainline leaks? Do you or did you have a mainline leak?	No					
6. If there was a mainline leak, when was it repaired?		N/A				
7. On what date was the distribution system last flushed?		6/6/2014				
8. Is there a written flushing procedure you can provide for our review?	No					
9. Do you have an active cross connection control program?	Yes					
10. What is name and phone number of your Cross-Connection Control Program Coordinator?		Kelly Harrington (661)862-8699				
11. Is the review and testing of backflow prevention devices current?	Yes					
12. On what date was the last physical survey of the system done to identify cross-connections?		2013				

BOOSTER STATION		SYSTEM RESPONSES				
1. Do you have a booster pump? How many?		No				
2. Do you have a standby booster pump if the main pump fails?						
3. Prior to bacteriological quality problems, did your booster pump fail?						
4. Do you notice standing water, leakage at the booster station?						

POSITIVE TOTAL COLIFORM INVESTIGATION

Page 5 of 5

ADDITIONAL INFORMATION TO BE SUBMITTED WITH RESPONSES TO THE ABOVE QUESTIONS

1. Sketch of System showing all sources, treatment locations, storage tanks, microbiological sampling sites and general layout of the distribution system including the location of all hazardous connections such as the wastewater treatment facility.
2. A set of photographs of the well, pressure tanks, and storage tanks in the system may be submitted if they would show that the contamination is directly related and changes have been made since the last inspection by our Department.
3. Name, certification level and certificate number of the Operator in Responsible Charge.
4. Copy of the last cross connection survey performed that identifies the location of all unprotected cross connections.

SUMMARY: BASED ON THE RESULTS OF YOUR INVESTIGATION AND ANY OTHER INFORMATION AT YOUR DISPOSAL, WHAT DO YOU BELIEVE TO BE THE CAUSE OF THE POSITIVE TOTAL COLIFORM SAMPLES FROM YOUR PUBLIC WATER SYSTEM?

Based on the results of my investigation, I believe the cause of the positive coliform samples to be, possible back splash due to elevation of sample spigot.

CERTIFICATION: I CERTIFY THAT THE INFORMATION SUBMITTED IN RESPONSE TO THE QUESTIONS ABOVE IS ACCURATE TO THE BEST OF MY PROFESSIONAL KNOWLEDGE

NAME: JD. CS

TITLE: Operator 3

DATE: 8-11-14

Bacteriological Distribution Monitoring Report

1510021 Wasco, City of

Distribution System Freq: 5/W

Sample Date	Location	T Coli	E Coli	F Coli	HPC	Type	Cl2	Cl2 Avg	Viol. Type	GWR Satisfied?	Comments
7/28/2014	641 Griffith	<1.1	<1.1			Repeat	0.75				
7/28/2014	633 Griffith	<1.1	<1.1			Repeat	0.68				Citation 03-12-14C-023
7/28/2014	645 Griffith	<1.1	<1.1			Repeat	0.69				
7/24/2014	641 Griffith	2.2	<1.1			Repeat	0.63				
7/24/2014	633 Griffith	<1.1	<1.1			Repeat					
7/24/2014	645 Griffith	<1.1	<1.1			Repeat	0.57				
7/22/2014	641 Griffith	1.1	<1.1			Routine	0.74		MCL	Yes	
7/1/2014	24 Samples	<1.1	<1.1			Routine	0.26-0.76				
6/1/2014	20 Samples	<1.1	<1.1			Routine	0.37-0.77				
5/1/2014	20 Samples	A	A			Routine	0.45-0.9				
4/17/2014	2314 Jasmine	<1.1	<1.1			Repeat	0.50			Yes	
4/17/2014	2237 Jasmine	<1.1	<1.1			Repeat	0.55				
4/17/2014	2334 Jasmine	<1.1	<1.1			Repeat	0.18				
4/15/2014	2314 Jasmine	1.1	<1.1			Routine	0.31				
4/1/2014	24 Samples	A	A			Routine	0.58-1.04				
3/1/2014	20 Samples	<1.1	<1.1			Routine	0.55-0.87				
2/1/2014	20 Samples	<1.1	<1.1			Routine	0.21-0.80				
1/1/2014	20 Samples	<1.1	<1.1			Routine	0.17-0.98				
12/2/2013	1274 Birch	<1.1	<1.1			Repeat					repeat for 11/26 positive
12/2/2013	1442 Poso	<1.1	<1.1			Repeat					repeat for 11/26 positive
12/2/2013	1445 12th St.	<1.1	<1.1			Repeat					repeat for 11/26 positive
12/1/2013	25 Samples	A	A			Routine	0.21-1.30				
11/26/2013	1445 12th St.	1.1	<1.1			Routine	0.26			Yes	Repeats collected 12/2/13 due to holiday timing.
11/1/2013	19 samples	<1.1	<1.1			Routine	0.24-0.88				
10/1/2013	25 samples	<1.1	<1.1			Routine	0.24-0.78				
9/1/2013	20 samples	<1.1	<1.1			Routine	0.17-0.84				
8/1/2013	20 samples	<1.1	<1.1			Routine	0.32-0.76				
7/1/2013	25 samples	<1.1	<1.1			Routine	0.38-0.82				

Violation Key

MCL	Exceeds the maximum contaminant level	MR5	Incorrect number of repeat samples as follow-up to a positive sample
MR1	No monthly sample for the report month	MR6	No source sample
MR2	No quarterly sample for the report month	MR7	No summary report submitted
MR3	Incorrect number of routine samples for the report month	MR8	Other comments and/or info
MR4	Did not collect 5 routine samples for previous month's positive sample	MR9	Cl2 not reported

Source Bacteriological Monitoring Report

1510021 Wasco, City of

<i>Sample Date</i>	<i>Time</i>	<i>Source</i>	<i>Sample Type</i>	<i>Test Method</i>	<i>T Coli</i>	<i>E Coli</i>	<i>F Coli</i>	<i>HPC</i>	<i>Violation</i>	<i>Comments</i>
7/31/2014	15:17	Well 10	Well	MPN	<1.1	<1.1				
7/28/2014	11:30	Well 10	GWR Well	MPN	1.1	<1.1				
7/24/2014	10:34	Well 7	GWR Well	MPN	<1.1	<1.1				
7/1/2014		Well 10	Well	MPN	<1.1	<1.1				
7/1/2014		Wells: 5,7,8,11,12	Well	MPN	<1.1	<1.1				
6/1/2014		Wells: 5,7,8,10,11,12	Well	MPN	<1.1	<1.1				
5/1/2014		Wells: 5,7,8,10,12	Well	MPN	<1.1	<1.1				
4/17/2014	14:14	Well 8	GWR Well	MPN	<1.1	<1.1				
4/1/2014		Wells: 5,7,10,12	Well	MPN	<1.1	<1.1				
3/6/2014	9:55	Well 12	Well	MPN	3.6	<1.1				
3/1/2014		Wells: 5,7,8,10,	Well	MPN	<1.1	<1.1				
2/1/2014		Wells: 5,7,8,10	Well	MPN	<1.1	<1.1				
1/1/2014		Wells: 5,7,10,12,	Well	MPN	<1.1	<1.1				
12/5/2013	10:37	Well 8	Well	MPN	3.6	<1.1				
12/2/2013		Well 11	GWR Well	MPN	<1.1	<1.1				GWR for 11/26 positive
12/1/2013		Wells: 2,5,7,10,11,12,	Well	MPN	<1.1	<1.1				
11/19/2013	9:24	Well 8	Well	MPN	>23.0	<1.1				
11/1/2013		Wells: 5,7,10,11	Well	MPN	<1.1	<1.1				
10/1/2013		Wells: 5,7,8,10,11	Well	MPN	<1.1	<1.1				
9/11/2013		Well 8	Well	MPN	9.2	<1.1				
9/1/2013		Wells: 2,5,7,10,11,12	Well	MPN	<1.1	<1.1				
8/6/2013		Wells: 5,7,8,10,11,12	Well	MPN	<1.1	<1.1				
7/2/2013		Wells: 5,7,8,10,11,12	Well	MPN	<1.1	<1.1				

IMPORTANT INFORMATION ABOUT YOUR DRINKING WATER

Este informe contiene información muy importante sobre su agua potable.

Tradúzcalo o hable con alguien que lo entienda bien.

City of Wasco Has Levels of Coliform Bacteria Above the Drinking Water Standard

Our water system recently failed a drinking water standard. Although this incident was not an emergency, as our customers, you have a right to know what you should do, what happened and what we did to correct this situation.

We routinely monitor for drinking water contaminants. We took thirty one (31) samples to test for the presence of coliform bacteria in July, 2014. Two of these samples showed the presence of total coliform bacteria. The standard is that no more than 1 sample per month may show the presence of coliform bacteria.

What should I do?

- **You do not need to boil your water or take other corrective actions.**
- This is not an emergency. If it had been, you would have been notified immediately. Total coliform bacteria are generally not harmful themselves. *Coliforms are bacteria which are naturally present in the environment and are used as an indicator that other, potentially-harmful, bacteria may be present. Coliforms were found in more samples than allowed and this was a warning of potential problems.*
- Usually, coliforms are a sign that there could be a problem with the treatment or distribution system (pipes). Whenever we detect coliform bacteria in any sample, we do follow-up testing to see if other bacteria of greater concern, such as fecal coliform or *E. coli*, are present. **We did not find any of these bacteria in our subsequent testing.**
- People with severely compromised immune systems, infants, and some elderly may be at increased risk. These people should seek advice about drinking water from their health care providers. General guidelines on ways to lessen the risk of infection by microbes are available from EPA's Safe Drinking Water Hotline at 1(800) 426-4791.
- If you have other health issues concerning the consumption of this water, you may wish to consult your doctor.

What happened? What is being done?

For more information, please contact the City at (661) 759-5207 or 764 E. St., Wasco, CA 93280.

Please share this information with all the other people who drink this water, especially those who may not have received this notice directly (for example, people in apartments, nursing homes, schools, and businesses). You can do this by posting this public notice in a public place or distributing copies by hand or mail.

Secondary Notification Requirements

Upon receipt of notification from a person operating a public water system, the following notification must be given within 10 days [Health and Safety Code Section 116450(g)]:

- **SCHOOLS:** Must notify school employees, students, and parents (if the students are minors).
- **RESIDENTIAL RENTAL PROPERTY OWNERS OR MANAGERS** (including nursing homes and care facilities): Must notify tenants.
- **BUSINESS PROPERTY OWNERS, MANAGERS, OR OPERATORS:** Must notify employees of businesses located on the property.

This notice is being sent to you by the City of Wasco.

Date distributed: _____.

PROOF OF NOTIFICATION

(Return with copy of notice)

As required by Section 116450 of the California Health and Safety Code, I notified all users of water supplied by the **City of Wasco** of the failure to meet the **total coliform bacteria MCL** for the month of **July 2014** as directed by the Department.

Notification was made on _____ by
(date)

mailed and/or hand delivered and/or posted written notice.
(circle all that apply)

Signature of Water System Representative

Printed Name

Date

DISCLOSURE: Be advised that Section 116725 and 116730 of the California Health and Safety Code state that any person who knowingly makes any false statement on any report or document submitted for the purpose of compliance with the attached order may be liable for a civil penalty not to exceed five thousand dollars (\$5,000) for separate violation for each day that violation continues. In addition, the violators may be prosecuted in criminal court and upon conviction, be punished by a fine of not more than \$25,000 for each day of violation, or be imprisoned in the county jail not to exceed one year, or by both the fine and imprisonment.

Due to the Department within 10 days of notification to the public
Total Coliform MCL Failure: February 2011
System Number: 5410009
Citation No.: In progress