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STATE OF CALIFORNIA
DEPARTMENT OF PUBLIC HEALTH

IN RE: California Rehabilitation Center - Norco
P.O. Box 1841
Norco, CA 92860-0991

TO: Cynthia Y. Tampkins, Warden
California Rehabilitation Center - Norco

CITATION FOR NONCOMPLIANCE - WATER SYSTEM NO. 3310800
CITATION NO. 05-20-14C-004
Issued on May 7, 2014

Section 116650, Article 9, Chapter 4, Part 12, Division 104 of the California Health and Safety Code (H & S Code), authorizes the issuance of a citation for failure to comply with the requirements of the California Safe Drinking Water Act, or any regulation, standard, permit or order issued thereunder.

VIOLATION

The California Department of Public Health, Drinking Water Field Operations Branch (hereinafter Department), hereby issues a citation to the California Rehabilitation Center – Norco (hereinafter, CRC) (P.O. Box 1841, Norco, CA 92860-0991) for the following violations:

1. California Code of Regulations (CCR), Title 22, Section 64533(a): Specifically, CRC failed to comply with the Primary Maximum Contaminant Level (MCL) for

1 total trihalomethanes (TTHM) at the Warehouse and Unit IV sample sites. For a
2 public water system monitoring quarterly, each locational running annual average
3 (LRAA), computed quarterly, shall not exceed the MCL of 0.080 mg/L (80 µg/L) for
4 total trihalomethanes, consisting of chloroform, bromodichloromethane,
5 dibromochloromethane, and bromoform. The TTHM LRAA for the four-quarter
6 monitoring period of April 1, 2013, through March 31, 2014, was 84.1 µg/L for the
7 Warehouse site and 84.5 µg/L for the Unit IV site

9 **BACKGROUND**

10 The CRC water system is operated under Water Supply Permit No. 05-20-07P-004,
11 issued by the Department on January 29, 2007. CRC serves water to approximately
12 5,400 staff and inmates at the Rehabilitation Center in Norco, CA. Water is also
13 supplied to the Center Force (Hospitality House), and the Department of Forestry
14 (Camp Norco). CRC is located within the City of Norco in the northwestern portion of
15 Riverside County, and receives all of its potable water from two service connections
16 with the City of Norco (City). CRC has two reservoirs, one booster station at
17 Reservoir No. 1, and a chlorination station also located at Reservoir No. 1. The water
18 supplied by the City consists primarily of groundwater produced by the City's wells
19 and, depending on system demand and availability, treated groundwater purchased
20 from Western Municipal Water District (WMWD).

21
22 Pursuant to Stage 2 of the Disinfectants/Disinfection Byproducts Rule (DBPR), CRC
23 collects two distribution system samples per quarter for TTHM and HAA5 analyses in
24 accordance with their Department-approved Stage 2 DBPR Monitoring Plan, dated
25 February 24, 2012. Under the Stage 2 DBPR, compliance with the TTHM MCL of
26 0.080 mg/L and the HAA5 MCL of 0.060 mg/L is based on a running annual average,
27 calculated quarterly, for each monitoring location. Under the Stage 2 DBPR, CRC is



1 also required to comply with operational evaluation levels (OELs) for TTHM and HAA5
2 at each monitoring location. The OELs act as an early warning for a possible Stage 2
3 DBPR violation in the following quarter, and when exceeded, triggers comprehensive
4 review of system operations to identify the cause(s) of the exceedance to allow CRC
5 to take proactive steps to prevent the violation.

6

7 The water supplied by the City generally contains a disinfectant residual ranging from
8 0.02 – 2.2 mg/L, measured daily by CRC at each of the two connections with the City.
9 Depending on the time of the year, such as during the summer months and other
10 periods of high water demand, the water provided by the City consists primarily of well
11 water that is generally high in temperature, averaging in the mid-90's °F. CRC's water
12 system infrastructure is aged and in need of repair or replacement. Operational and
13 infrastructural deficiencies are identified in the January 2000 Water Engineering
14 Report and Master Plan (Master Plan) prepared by Robert Bein, William Frost and
15 Associates, and in the Hydraulic Modeling Report prepared by Winzler & Kelly, dated
16 March 8, 2011.

17

18 CRC experiences significant chlorine demand in the system, which may be attributed
19 to aging pipes, faulty valves, and high temperature water provided by the City. These
20 factors contribute to the occurrence of stagnant water and other conditions that
21 facilitate bacteriological growth and disinfection byproduct (DBP) formation. Since
22 2011, CRC has violated the monthly total coliform MCL five times and the TTHM MCL
23 for four consecutive quarters.

24

25

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27

1 **PREVIOUS ENFORCEMENT ACTIONS**

2 The following enforcement actions were previously issued to this system for a similar
3 violation:

4

5 January 22, 2014: The Department issued Citation No. 05-20-14C-002 for
6 exceedance of the TTHM MCL at the Warehouse sample site, based on the four-
7 quarter LRAA calculated at the end of the fourth quarter of 2013.

8

9 October 29, 2013: The Department issued Citation No. 05-20-13C-006 for
10 exceedance of the TTHM MCL at the Warehouse and Unit IV sample sites, based on
11 the four-quarter LRAAs calculated at the end of the third quarter of 2013.

12

13 September 12, 2013: The Department issued Citation No. 05-20-13C-005 for
14 exceedance of the TTHM MCL at the Warehouse sample site, based on the four-
15 quarter LRAA calculated at the end of the second quarter of 2013, and failure to
16 report the results to the Department within 10 days of the end of the second quarter.

17

18 February 1, 2007: The Department issued Citation No. 05-20-07C-002 for
19 exceedance of the TTHM MCL at the end of the third quarter of 2006, based on a
20 four-quarter system -wide RAA, and failure to notify the Department and the public of
21 the violation within the required timeframe.

22

23 **CHRONOLOGY OF EVENTS**

24 The following is a chronology of events that occurred leading up to the TTHM MCL
25 failure. The laboratory reports are included as [Attachment No. 1](#).

26

1 **2nd Quarter 2013:** A dual sample set was collected on June 10, 2013, at the Unit IV
2 and Warehouse sample sites. The TTHM and HAA5 levels in the Unit IV sample
3 were 32.5 µg/L and 2.7 µg/L, respectively. The resultant TTHM LRAA and OEL were
4 77.6 µg/L and 58.1 µg/L, respectively. TTHM and HAA5 levels in the Warehouse
5 sample were 112.0 µg/L and 3.6 µg/L, respectively, resulting in a TTHM LRAA of 90.6
6 µg/L and a TTHM OEL of 89.6 µg/L. CRC was issued a citation for failing the TTHM
7 MCL at the Warehouse site and directed to provide Tier 2 public notification and
8 conduct a more in-depth evaluation to determine the cause of the elevated TTHM
9 levels.

10
11 **3rd Quarter 2013:** A dual sample set was collected on September 11, 2013, at the
12 Unit IV and Warehouse sample sites. The TTHM and HAA5 levels in the Unit IV
13 sample were 168 µg/L and 16.6 µg/L, respectively. The resultant TTHM LRAA and
14 OEL were 92.0 µg/L and 114.0 µg/L, respectively. The TTHM and HAA5 levels in the
15 Warehouse sample site were 115 µg/L and 4.6 µg/L, respectively, resulting in a TTHM
16 LRAA of 90.4 µg/L, and a TTHM OEL of 108.0 µg/L. CRC was issued a citation for
17 failing the TTHM MCL at both sampling locations.

18
19 **4th Quarter 2013:** CRC collected a sample at the Unit IV and Warehouse sample
20 sites on November 19, 2013, for TTHM analysis. The TTHM level in the Unit IV and
21 Warehouse sample was 27.0 µg/L and 47.5 µg/L, respectively. A dual sample set
22 was collected on December 11, 2013, at the Unit IV and Warehouse sample sites in
23 accordance with the schedule specified in the Stage 2 DBPR Monitoring Plan. The
24 TTHM and HAA5 levels in the Unit IV sample were 30.1 µg/L and 6.7 µg/L,
25 respectively. The TTHM and HAA5 levels in the Warehouse sample were 33.4 µg/L
26 and 6.6 µg/L, respectively. With two TTHM samples each, the TTHM arithmetic
27 average for the quarter was 28.6 µg/L for Unit IV and 40.5 µg/L for the Warehouse



1 site. The resultant TTHM LRAA and OEL for the Unit IV sample site were 79.1 µg/L
2 and 64.4 µg/L, respectively. The resultant TTHM LRAA and OEL for the Warehouse
3 site were 89.3 µg/L and 77.0 µg/L, respectively. The Unit IV sample site was
4 considered to be in compliance with the TTHM MCL. CRC was issued a citation for
5 failing the TTHM MCL at the Warehouse site.

6

7 **1st Quarter 2014:** A dual sample set was collected on March 12, 2014, at the Unit IV
8 and Warehouse sample sites. The TTHM and HAA5 levels in the Unit IV sample
9 were 109 µg/L and 15.8 µg/L, respectively. The resultant TTHM LRAA and OEL were
10 84.5 µg/L and 103.7 µg/L, respectively. TTHM and HAA5 levels in the Warehouse
11 sample were 69 µg/L and 2.5 µg/L, respectively, resulting in a TTHM LRAA of 84.1
12 µg/L and a TTHM OEL of 73.4 µg/L. Both samples sites are in violation of the TTHM
13 MCL. The Unit IV sample site also exceeded the TTHM OEL, which triggers an in-
14 depth operational evaluation. The March 12, 2014, sample results were reported to
15 the Department by the laboratory via email on March 31, 2014. CRC was instructed
16 to post notices of the violation by April 30, 2014.

17

18 **DISCUSSION OF CONTRIBUTING PROBLEMS, SANITARY HAZARDS AND**
19 **PUBLIC HEALTH SAFEGUARDS**

20 CRC attributes the high TTHM levels to a combination of factors that include aging
21 pipes, faulty valves, and high water temperature. Because high temperatures
22 promote the accelerated depletion of residual chlorine in the water, CRC has been
23 providing additional chlorination at Reservoir No. 1 in order to maintain a detectable
24 residual throughout the distribution system in order to control bacteriological growth
25 and to comply with the disinfectant residual requirement set by the Department. Past
26 and present evaluations of the system have identified operational and infrastructural

1 deficiencies that contribute to prolonged detention time of water in the system,
2 providing for increased chlorine contact time that promotes DBP formation.

3

4 In response to the Department's directive in a previous citation for an in-depth
5 evaluation to identify possible factors that may be contributing to increased DBP
6 formation, CRC consulted with City operators and identified various broken or faulty
7 valves in the system that need to be replaced. CRC anticipates that replacing the
8 valves will facilitate better water flow through the system and eliminate areas where
9 water may become stagnant. During a sanitary survey of CRC's water system
10 conducted on March 18, 2014, the Department noted that work to replace the valves
11 was in progress, but not yet completed. CRC should make every effort to make the
12 necessary improvements as soon as possible to return the system to compliance with
13 drinking water standards and to avoid further enforcement action.

14

15 **DIRECTIVES**

16 CRC is hereby directed to take the following actions:

17

18 1. Forthwith, CRC shall cease and desist from failing to comply with the Primary
19 Drinking Water Standard for total trihalomethanes (TTHM).

20

21 2. CRC shall post Department-approved notices of the TTHM MCL violation at the
22 Warehouse and Unit IV sites and at conspicuous locations throughout the
23 institution. The notices must remain posted until such time monitoring results
24 indicate that CRC has returned to compliance with the TTHM MCL.

25

26 3. Within 30 days of receipt of this Citation, CRC shall provide proof of public
27 notification using the enclosed form ([Attachment No. 2](#)). Include in the certification



1 of notification the number of notices posted, and the locations where the notices
2 were posted, and how long the notices were posted.

3

4 4. CRC shall include information regarding the TTHM MCL violation in the 2014
5 Consumer Confidence Report, which must be completed and distributed to staff
6 and inmates by July 1, 2015. A draft of the 2014 Consumer Confidence Report
7 shall be submitted to the Department for review and approval prior to distribution
8 and/or posting.

9

10 5. Within 30 days of receipt of this citation, CRC shall provide a written response with
11 an update on the status of the valve replacement project.

12

13 6. CRC shall complete the enclosed Operational Evaluation Reporting Form and
14 Distribution System Evaluation Checklist ([Attachment No. 3](#)) and submit the
15 completed forms to the Department by June 30, 2014.

16

17 All submittals required by this citation shall be sent to:

18

19 J. Steven Williams, P.E.
20 District Engineer
21 Department of Public Health
22 Division of Drinking Water and Environmental Management
23 1350 Front Street, Room 2050
24 San Diego, CA 92101

25

26 **CIVIL PENALTY**

27 Subsections 116650 (d) and (e) of the H&S Code allow for the assessment of an
28 administrative penalty for failure to comply with requirements of the California Safe
29 Drinking Water Act. Failure to comply with any provision of this citation may result in

1 the Department imposing a civil penalty of up to \$1,000 (one thousand dollars) per
2 day as of the date of violation of any provision of this citation.

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5-7-2014



Date

J. Steven Williams, P.E.,
District Engineer
Drinking Water Field Operations Branch
Department of Public Health

Attachments:

1. Quarterly DBP Monitoring Results (2nd Quarter 2013 – 1st Quarter 2014)
2. Proof of Notification Form
3. Operational Evaluation Reporting Form and Distribution System Evaluation Checklist

cc: County of Riverside, Department of Environmental Health

Deanna Rogers, Capital Outlay Analyst, Department of Corrections and Rehabilitation, Facilities Management Division, Capital Outlay Section, P.O. Box 942883, Sacramento, CA 94283-0001

Kimberly Hughes, Associate Warden – Business Services, California Rehabilitation Center - Norco, P.O. Box 1841, Norco, CA 92860-0991

David Huskey, Correctional Plant Manager A, California Rehabilitation Center - Norco, P.O. Box 1841, Norco, CA 92860-0991

Attachment No. 1

Stage 2 DDBPR Quarterly TTHM Report for Disinfection Byproducts Compliance (in µg/L or ppb)

System Name: CRC-Norco System No.: 3310800 Year: 2014 Quarter: 1 TTHM MCL = 0.080 mg/L or 80 ug/L

Sample Date (month/day):	2012				2013				2014				2015				2016			
	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr
#	TTHM Results (ug/L)																			
1	Unit IV	35.0	110.6	80.1	87.3	32.5	168.0	28.6	109.0											
2	Warehouse	1.0	116.0	44.6	89.8	112.0	115.0	40.4	69.0											
3																				
4																				
	Number of Samples Taken	2	2	2	2	2	2	2	2											
#	TTHM OEL (ug/L)																			
1	Unit IV			76.5	91.3	58.1	114.0	64.4	103.7											
2	Warehouse			51.6	85.1	89.6	108.0	77.0	73.4											
3																				
4																				
	Is OEL ≤ MCL for all monitoring locations?			Y	N	N	N	Y	N											
	If no, list monitoring location # where MCL not met (a)				1, 2	2	1, 2		1											
#	TTHM LRAA (ug/L)																			
1	Unit IV				78.3	77.6	92.0	79.1	84.5											
2	Warehouse				62.9	90.6	90.4	89.3	84.1											
3																				
4																				
	Meets standard for all monitoring locations (i.e., LRAA ≤ MCL)?				Y	N	N	N	N											
	If no, list monitoring location # where MCL not met (b)					2	1, 2	2	1, 2											
	Will LRAA calc based on <4 qtrs of data be >MCL regardless of the monitoring results of subsequent qtrs, for all mon. locations? (c)																			
	If yes, list monitoring location # where MCL not met (b)																			

Comments: STATE OF CALIFORNIA DEPARTMENT OF PUBLIC HEALTH
APR 14 2014

Signature: *[Signature]* Date: 4.7.14

- (a) If the OEL exceeds the TTHM MCL, system must conduct an operational evaluation and submit a report to CDPH no later than 90 days after being notified of the analytical result that caused the OEL exceedance.
- (b) If LRAA exceeds the TTHM MCL, system must conduct public notification. For the initial 3 qtrs of monitoring, system must meet the following: (1) Average of First Qtr Result is ≤4 MCL, (2) Average of 1st and 2nd Qtr Results is ≤2MCL, and (3) Average of 1st, 2nd, and 3rd Qtr Results is ≤1.33 MCL.
- (c) If any individual quarter's result will cause the LRAA to exceed the TTHM MCL, the system is out of compliance at the end of that quarter.

Stage 2 DDBPR Quarterly HAA5 Report for Disinfection Byproducts Compliance (in µg/L or ppb)

System Name: CRC-Norco System No.: 3310800 Year: 2014 Quarter: 1 HAA5 MCL = 0.060 mg/L or 60 µg/L

Year:		2012				2013				2014				2015				2016			
Sample Date (month/day):	Quarter:	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr	1st Qtr	2nd Qtr	3rd Qtr	4th Qtr
#	Monitoring Location																				
1	Unit IV		17.0	13.6	5.0	15.1	2.7	16.6	6.6	15.8											
2	Warehouse		1.8	10.6	5.9	10.4	3.6	4.6	6.7	2.5											
3																					
4																					
	Number of Samples Taken	2	2	2	2	2	2	2	2	2											
#	Monitoring Location	HAA5 OEL (ug/L)																			
1	Unit IV				10.2	12.2	6.4	12.8	8.1	13.7											
2	Warehouse				6.1	9.3	5.9	5.8	5.4	4.1											
3																					
4																					
	Is OEL ≤ MCL for all monitoring locations?				Y	Y	Y	Y	Y	Y											
	If no, list monitoring location # where MCL not met (a)																				
#	Monitoring Location	HAA5 LRAA (ug/L)																			
1	Unit IV					12.7	9.1	9.9	10.3	10.4											
2	Warehouse					7.2	7.6	6.1	6.3	4.3											
3																					
4																					
	Meets standard for all monitoring locations (i.e., LRAA ≤ MCL)?					Y	Y	Y	Y	Y											
	If no, list monitoring location # where MCL not met (b)																				
	Will LRAA calc based on <4 qtrs of data be >MCL regardless of the monitoring results of subsequent qtrs, for all mon. locations? (c)																				
	If yes, list monitoring location # where MCL not met (b)																				

Comments:
 APR 14 2014

- (a) If the OEL exceeds the HAA5 MCL, system must conduct an operational evaluation and submit a report to CDPH no later than 90 days after being notified of the analytical result that caused the OEL exceedance.
- (b) If LRAA exceeds the HAA5 MCL, system must conduct public notification. For the initial 3 qtrs of monitoring, system must meet the following: (1) Average of First Qtr Result is ≤4 MCL, (2) Average of 1st and 2nd Qtr Results is ≤2MCL, and (3) Average of 1st, 2nd, and 3rd Qtr Results is ≤1.33 MCL.
- (c) If any individual quarter's result will cause the LRAA to exceed the HAA5 MCL, the system is out of compliance at the end of that quarter.

Signature: *Michael S. Sullivan* Date: 4.7.14

02 2013

STATE OF CALIFORNIA
DEPT. OF PUBLIC HEALTH

JUL 19 2013

Excelchem Environmental Labs

California State Prison: CA Rehabilitation Center 5th Street & Western Norco, CA 91760	Project: Drinking Water Project Number: [none] Project Manager: Singh Rai	Date Reported: 07/08/13 11:08
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**Warehouse
1306116-01 (Drinking Water)**

Analyte	Result	Reporting Limit	MDL	Units	Batch	Date Prepared	Date Analyzed	Method	Notes
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Trihalomethanes by GC/MS

Total Trihalomethanes	112	0.5	0.5	ug/l	AWF0202	06/11/13	06/11/13	EPA 524	
Chloroform	1.2	0.5	0.1	"	"	"	"	"	
Bromodichloromethane	4.2	0.5	0.1	"	"	"	"	"	
Dibromochloromethane	18.9	0.5	0.08	"	"	"	"	"	
Bromoform	87.6	0.5	0.1	"	"	"	"	"	
<i>Surrogate: Dibromofluoromethane</i>	<i>99.4 %</i>	% Recovery Limits		<i>70-130</i>					"
<i>Surrogate: Toluene-d8</i>	<i>97.4 %</i>	% Recovery Limits		<i>70-130</i>					"
<i>Surrogate: 4-Bromofluorobenzene</i>	<i>118 %</i>	% Recovery Limits		<i>70-130</i>					"

Haloacetic Acids

Monochloroacetic Acid	ND	2.00	2.00	ug/l	AWF0206	06/17/13	06/21/13	EPA 552.2	
Monobromoacetic Acid	ND	1.00	1.00	"	"	"	"	"	
Dichloroacetic Acid	ND	1.00	1.00	"	"	"	"	"	
Trichloroacetic Acid	ND	1.00	1.00	"	"	"	"	"	
Dibromoacetic Acid	3.56	1.00	1.00	"	"	"	"	"	
Total Haloacetic Acids (HAA5)	ND	10.0	10.0	"	"	"	"	"	
<i>Surrogate: 2,3-Dibromopropionic Acid</i>	<i>44.9 %</i>	% Recovery Limits		<i>70-130</i>					<i>S-LOW</i>

Wet Chemistry

Color	ND	1.00	1.00	Color Units	AWF0135	06/11/13	06/11/13	SM2120B	
Specific Conductance (EC)	930	5.00	1.09	uS/cm	AWF0134	06/11/13	06/11/13	EPA 120.1	
MBAS	ND	0.100	0.0600	mg/L	AWF0149	06/12/13	06/12/13	SM5540C	
Odor	ND	1.00	1.00	T.O.N.	AWF0121	06/10/13	06/10/13	SM2150B	
pH	8.09	0.100	0.100	pH Units	AWF0133	06/11/13	06/11/13	SM 4500-H+ B	Field
Total Dissolved Solids	506	15.0	7.68	mg/L	AWF0175	06/12/13	06/14/13	SM 2540C	
Turbidity	0.2	0.1	0.02	NTU	AWF0126	06/11/13	06/11/13	EPA 180.1	

Excelchem Environmental Lab.



Laboratory Representative

The results in this report apply to the samples analyzed in accordance with the chain of custody document. This analytical report must be reproduced in its entirety.

Q 2 2013

Excelchem Environmental Labs

California State Prison: CA Rehabilitation Center 5th Street & Western Norco, CA 91760	Project: Drinking Water Project Number: [none] Project Manager: Singh Rai	Date Reported: 07/08/13 11:08
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**Unit IV
1306116-05 (Drinking Water)**

Analyte	Result	Reporting Limit	MDL	Units	Batch	Date Prepared	Date Analyzed	Method	Notes
---------	--------	-----------------	-----	-------	-------	---------------	---------------	--------	-------

Trihalomethanes by GC/MS

Total Trihalomethanes	32.5	0.5	0.5	ug/l	AWF0202	06/11/13	06/11/13	EPA 524	
Chloroform	1.2	0.5	0.1	"	"	"	"	"	
Bromodichloromethane	3.1	0.5	0.1	"	"	"	"	"	
Dibromochloromethane	9.0	0.5	0.08	"	"	"	"	"	
Bromoform	19.2	0.5	0.1	"	"	"	"	"	
<i>Surrogate: Dibromofluoromethane</i>	<i>101 %</i>	% Recovery Limits		<i>70-130</i>					"
<i>Surrogate: Toluene-d8</i>	<i>95.0 %</i>	% Recovery Limits		<i>70-130</i>					"
<i>Surrogate: 4-Bromofluorobenzene</i>	<i>120 %</i>	% Recovery Limits		<i>70-130</i>					"

Haloacetic Acids

Monochloroacetic Acid	ND	2.00	2.00	ug/l	AWF0206	06/17/13	06/21/13	EPA 552.2	
Monobromoacetic Acid	1.19	1.00	1.00	"	"	"	"	"	
Dichloroacetic Acid	1.54	1.00	1.00	"	"	"	"	"	
Trichloroacetic Acid	ND	1.00	1.00	"	"	"	"	"	
Dibromoacetic Acid	ND	1.00	1.00	"	"	"	"	"	
Total Haloacetic Acids (HAA5)	ND	10.0	10.0	"	"	"	"	"	
<i>Surrogate: 2,3-Dibromopropionic Acid</i>	<i>54.9 %</i>	% Recovery Limits		<i>70-130</i>					<i>S-LOW</i>

STATE OF CALIFORNIA
DEPT. OF ENVIRONMENTAL HEALTH

JUL 19 2013

Excelchem Environmental Lab.

The results in this report apply to the samples analyzed in accordance with the chain of custody document. This analytical report must be reproduced in its entirety.



Laboratory Representative

TRUESDAIL LABORATORIES, INC.

EXCELLENCE IN INDEPENDENT TESTING



Established 1931

14201 FRANKLIN AVENUE
TUSTIN, CALIFORNIA 92780-7008
(714) 730-6239 · FAX (714) 730-6462
www.truesdail.com

REPORT

Client: California Rehabilitation Center

5th and Western Avenue

Norco, CA 91760

Attention: Singh Rai

Project Name: Weekly Routine

Project Number: Agmnt #5600003884

P.O. Number: 4400002277

Release Number:

Laboratory No. 809915

Page 1 of 8

Printed 10/1/2013

Samples Received on 9/11/2013 4:25:00 PM

Field ID	Lab ID	Collected	Matrix
Warehouse	809915-001	09/11/2013 09:20	W
Vistor Processing	809915-002	09/11/2013 08:45	W
Unit IV	809915-003	09/11/2013 07:45	W
Navy	809915-004	09/11/2013 10:00	W
Reservoir	809915-005	09/11/2013 10:40	W

Comments:

HAA5 by EPA 552.2 analyzed by Jeff Swallow. TTHMs by EPA 524.2 analyzed by Kevin Dooling. Total Coliform, HPC and MBAS analyzed by Maria Mangarova. TDS and Specific Conductivity analyzed by Jenny Tankunakorn. pH analyzed by Naheed Eidinejad. General Physical analyzed by Kim Luck.

Heterotrophic Plate Count HPC SM 9215B

Batch HPC-PCA 9/11/2013 CRC

Parameter	Unit	Analyzed	DF	MDL	RL	Result
809915-001 Plate Count	CFU/mL	09/13/2013 17:30	1.00	1.00	1.00	ND
809915-002 Plate Count	CFU/mL	09/13/2013 17:30	1.00	1.00	1.00	1
809915-004 Plate Count	CFU/mL	09/13/2013 17:30	1.00	1.00	1.00	ND
809915-005 Plate Count	CFU/mL	09/13/2013 17:30	1.00	1.00	1.00	ND



Client: California Rehabilitation Center

Project Name: Weekly Routine

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Project Number: Agmnt #5600003884

Printed 10/1/2013

EPA 524.2 - GC/MS

Batch TTHMs 809915

Table with 7 columns: Parameter, Unit, Analyzed, DF, MDL, RL, Result. Rows include Bromodichloromethane, Bromofluorobenzene, Bromoform, Chloroform, Dibromochloromethane, and Total Trihalomethanes for samples 809915-001 and 809915-003.

Coliform P/A Test - Colilert (18h)

Batch ColilertPA 9/11/2013 CRC

Table with 7 columns: Parameter, Unit, Analyzed, DF, MDL, RL, Result. Rows show Coliforms, Total for samples 809915-001 through 809915-005, all with results of 'Absent'.

Residual Chlorine

Batch ResCl 09/11/2013

Table with 7 columns: Parameter, Unit, Analyzed, DF, MDL, RL, Result. Rows show Chlorine Residual for samples 809915-001 through 809915-005 with results ranging from 0.200 to 0.310.

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Client: California Rehabilitation Center

Project Name: Weekly Routine

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Project Number: Agmt #5600003884

Printed 10/1/2013

EPA 552 HAA's

Batch 710552

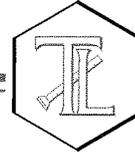
Parameter	Unit	Analyzed	DF	MDL	RL	Result
809915-001 Dibromoacetic acid	ug/L	09/18/2013	1.00	0.226	1.00	4.58
Dibromopropionic Acid	%	09/18/2013	1.00	0	70.0	98.8
Dichloroacetic acid	ug/L	09/18/2013	1.00	0.342	1.00	ND
Monobromacetic acid	ug/L	09/18/2013	1.00	0.297	1.00	ND
Monochloroacetic acid	ug/L	09/18/2013	1.00	0.389	1.00	ND
Total Haloacetic Acids (HAA5)	ug/L	09/18/2013	1.00	0.844	1.00	4.58
Trichloroacetic acid	ug/L	09/18/2013	1.00	0.153	1.00	ND
809915-003 Dibromoacetic acid	ug/L	09/18/2013	1.00	0.226	1.00	14.2
Dibromopropionic Acid	%	09/18/2013	1.00	0	70.0	122
Dichloroacetic acid	ug/L	09/18/2013	1.00	0.342	1.00	ND
Monobromacetic acid	ug/L	09/18/2013	1.00	0.297	1.00	1.45
Monochloroacetic acid	ug/L	09/18/2013	1.00	0.389	1.00	ND
Total Haloacetic Acids (HAA5)	ug/L	09/18/2013	1.00	0.844	1.00	16.6
Trichloroacetic acid	ug/L	09/18/2013	1.00	0.153	1.00	ND

Method Blank

Parameter	Unit	DF	Result
Monochloroacetic acid	ug/L	1.00	ND
Dichloroacetic acid	ug/L	1.00	ND
Trichloroacetic acid	ug/L	1.00	ND
Monobromacetic acid	ug/L	1.00	ND
Dibromoacetic acid	ug/L	1.00	ND
Dibromopropionic Acid	%	1.00	82.9
Total Haloacetic Acids (HAA5)	ug/L	1.00	ND

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www.truesdail.com

REPORT

Client: California Rehabilitation Center

5th and Western Avenue
Norco, CA 91760

Attention: Singh Rai

Project Name: TTHMs

Project Number: Agmnt #5600003884

P.O. Number: 4400002277

Release Number:

Laboratory No. 810998

Page 1 of 3

Printed 12/4/2013

Samples Received on 11/20/2013 2:16:00 PM

Field ID	Lab ID	Collected	Matrix
Warehouse	810998-001	11/20/2013 12:30	W
Unit IV	810998-002	11/20/2013 13:00	W
5th St.	810998-003	11/20/2013 13:30	W
Western	810998-004	11/20/2013 14:00	W

Comments:

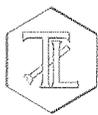
THMs analyzed by Kevin Dooling.

EPA 524.2 - GC/MS

Batch EPA524.2 11/26/2013

Parameter	Unit	Analyzed	DF	MDL	RL	Result
810998-001 Bromodichloromethane	ug/L	11/26/2013	1.00	0.0630	0.500	3.78
Bromoform	ug/L	11/26/2013	1.00	0.0910	0.500	31.0
Chloroform	ug/L	11/26/2013	1.00	0.0900	0.500	ND
Dibromochloromethane	ug/L	11/26/2013	1.00	0.104	0.500	12.3
Total Trihalomethanes	ug/L	11/26/2013	1.00	0.0920	0.500	47.5
810998-002 Bromodichloromethane	ug/L	11/26/2013	1.00	0.0630	0.500	1.49
Bromoform	ug/L	11/26/2013	1.00	0.0910	0.500	20.1
Chloroform	ug/L	11/26/2013	1.00	0.0900	0.500	ND
Dibromochloromethane	ug/L	11/26/2013	1.00	0.104	0.500	5.40
Total Trihalomethanes	ug/L	11/26/2013	1.00	0.0920	0.500	27.0
810998-003 Bromodichloromethane	ug/L	11/26/2013	1.00	0.0630	0.500	4.30
Bromoform	ug/L	11/26/2013	1.00	0.0910	0.500	35.1
Chloroform	ug/L	11/26/2013	1.00	0.0900	0.500	0.532
Dibromochloromethane	ug/L	11/26/2013	1.00	0.104	0.500	13.7
Total Trihalomethanes	ug/L	11/26/2013	1.00	0.0920	0.500	53.6
810998-004 Bromodichloromethane	ug/L	11/26/2013	1.00	0.0630	0.500	2.96

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Client: California Rehabilitation Center

Project Name: TTHMs

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Project Number: Agmnt #5600003884

Printed 12/4/2013

810998-004 Bromoform	ug/L	11/26/2013	1.00	0.0910	0.500	23.5
Chloroform	ug/L	11/26/2013	1.00	0.0900	0.500	ND
Dibromochloromethane	ug/L	11/26/2013	1.00	0.104	0.500	9.96
Total Trihalomethanes	ug/L	11/26/2013	1.00	0.0920	0.500	36.4

Method Blank

Parameter	Unit	DF	Result
Bromodichloromethane	ug/L	1.00	ND
Bromoform	ug/L	1.00	ND
Chloroform	ug/L	1.00	ND
Dibromochloromethane	ug/L	1.00	ND

Lab Control Sample

Parameter	Unit	DF	Result	Expected	Recovery	Acceptance Range
Bromodichloromethane	ug/L	1.00	4.69	5.00	93.8	70 - 130
Bromoform	ug/L	1.00	4.87	5.00	97.4	70 - 130
Chloroform	ug/L	1.00	4.10	5.00	82.0	70 - 130
Dibromochloromethane	ug/L	1.00	4.83	5.00	96.6	70 - 130
Bromofluorobenzene	ug/L	1.00	4.93	5.00	98.6	70 - 130

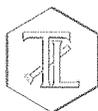
Lab Control Sample Duplicate

Parameter	Unit	DF	Result	Expected	Recovery	Acceptance Range
Bromodichloromethane	ug/L	1.00	4.35	5.00	87.0	70 - 130
Bromoform	ug/L	1.00	4.35	5.00	87.0	70 - 130
Chloroform	ug/L	1.00	3.84	5.00	76.8	70 - 130
Dibromochloromethane	ug/L	1.00	4.36	5.00	87.2	70 - 130
Bromofluorobenzene	ug/L	1.00	4.84	5.00	96.8	70 - 130

MRCCS - Secondary

Parameter	Unit	DF	Result	Expected	Recovery	Acceptance Range
Bromodichloromethane	ug/L	1.00	9.67	10.0	96.7	70 - 130
Bromoform	ug/L	1.00	10.0	10.0	100	70 - 130
Chloroform	ug/L	1.00	8.95	10.0	89.5	70 - 130
Dibromochloromethane	ug/L	1.00	9.74	10.0	97.4	70 - 130
Bromofluorobenzene	ug/L	1.00	4.92	5.00	98.4	70 - 130

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Client: California Rehabilitation Center

Project Name: TTHMs

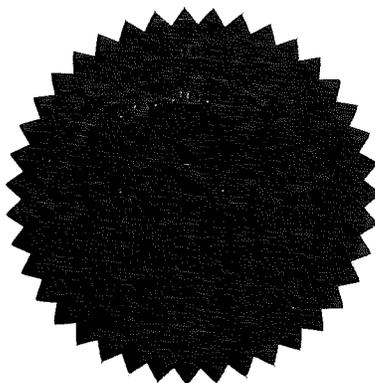
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Project Number: Agmnt #5600003884

Printed 12/4/2013

MRCVS - Primary

Parameter	Unit	DF	Result	Expected	Recovery	Acceptance Range
Bromodichloromethane	ug/L	1.00	9.26	10.0	92.6	70 - 130
Bromoform	ug/L	1.00	9.55	10.0	95.5	70 - 130
Chloroform	ug/L	1.00	8.72	10.0	87.2	70 - 130
Dibromochloromethane	ug/L	1.00	9.32	10.0	93.2	70 - 130
Bromofluorobenzene	ug/L	1.00	4.95	5.00	99.0	70 - 130



Respectfully submitted,

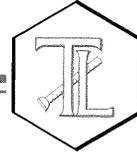
TRUESDAIL LABORATORIES, INC.

Shelly Brady

Shelly Brady
Project Manager

TRUESDAIL LABORATORIES, INC.

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www.truesdail.com

REPORT

Client: California Rehabilitation Center

5th and Western Avenue
Norco, CA 91760

Attention: Singh Rai

Project Name: Weekly Routine

Project Number: Agmnt #5600003884

P.O. Number: 4400002277

Release Number:

Laboratory No. 811334

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Printed 1/6/2014

Samples Received on 12/11/2013 6:45:00 PM

Field ID	Lab ID	Collected	Matrix
Warehouse	811334-001	12/11/2013 09:15	W
Vistor Processing	811334-002	12/11/2013 09:40	W
Unit IV	811334-003	12/11/2013 08:30	W
Navy	811334-004	12/11/2013 10:00	W
Reservoir	811334-005	12/11/2013 10:30	W

Comments:

MBAS and Total Coliforms analyzed by Maria Managrova. HPC analyzed by Paymon Abri. General Physical and pH analyzed by Himani Vaishnav. TTHMs by EPA 524.2 analyzed by Kevin Dooling. HAA5s by EPA 552.2 analyzed by Jose Guerrero. TDS and Specific Conductivity analyzed by Jenny Tankunakorn.

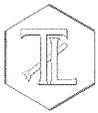
Heterotrophic Plate Count HPC SM 9215B

Batch HPC-PCA 12/11/2013

Parameter	Unit	Analyzed	DF	MDL	RL	Result
811334-001 Plate Count	CFU/mL	12/13/2013 15:30	1	1.00	1.00	10
811334-002 Plate Count	CFU/mL	12/13/2013 15:30	1	1.00	1.00	1
811334-004 Plate Count	CFU/mL	12/13/2013 15:30	1	1.00	1.00	2
811334-005 Plate Count	CFU/mL	12/13/2013 15:30	1	1.00	1.00	ND

Method Blank

Parameter	Unit	DF	Result
Plate Count	CFU/n	1	ND



Client: California Rehabilitation Center

Project Name: Weekly Routine

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Project Number: Agmnt #5600003884

Printed 1/6/2014

EPA 552 HAA's		Batch 552 811334				
Parameter	Unit	Analyzed	DF	MDL	RL	Result
811334-001 Dibromoacetic acid	ug/L	12/16/2013	1.00	0.226	1.00	6.63
Dibromopropionic Acid	%	12/16/2013	1.00	0	0	106
Dichloroacetic acid	ug/L	12/16/2013	1.00	0.342	1.00	ND
Monobromacetic acid	ug/L	12/16/2013	1.00	0.297	1.00	ND
Monochloroacetic acid	ug/L	12/16/2013	1.00	0.389	1.00	ND
Total Haloacetic Acids (HAA5)	ug/L	12/16/2013	1.00	0.844	1.00	6.63
Trichloroacetic acid	ug/L	12/16/2013	1.00	0.153	1.00	ND
811334-003 Dibromoacetic acid	ug/L	12/16/2013	1.00	0.226	1.00	6.72
Dibromopropionic Acid	%	12/16/2013	1.00	0	0	122
Dichloroacetic acid	ug/L	12/16/2013	1.00	0.342	1.00	ND
Monobromacetic acid	ug/L	12/16/2013	1.00	0.297	1.00	ND
Monochloroacetic acid	ug/L	12/16/2013	1.00	0.389	1.00	ND
Total Haloacetic Acids (HAA5)	ug/L	12/16/2013	1.00	0.844	1.00	6.72
Trichloroacetic acid	ug/L	12/16/2013	1.00	0.153	1.00	ND

Method Blank

Parameter	Unit	DF	Result
Monochloroacetic acid	ug/L	1.00	ND
Dichloroacetic acid	ug/L	1.00	ND
Trichloroacetic acid	ug/L	1.00	ND
Monobromacetic acid	ug/L	1.00	ND
Dibromoacetic acid	ug/L	1.00	ND
Dibromopropionic Acid	%	1.00	105
Total Haloacetic Acids (HAA5)	ug/L	1.00	ND

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Client: California Rehabilitation Center

Project Name: Weekly Routine
Project Number: Agmnt #5600003884

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Printed 1/6/2014

EPA 524.2 - GC/MS

Batch 524.2 811334

Table with 7 columns: Parameter, Unit, Analyzed, DF, MDL, RL, Result. Rows include Bromodichloromethane, Bromofluorobenzene, Bromoform, Chloroform, Dibromochloromethane, Total Trihalomethanes for samples 811334-001 and 811334-003.

Method Blank

Table with 4 columns: Parameter, Unit, DF, Result. Rows include Bromodichloromethane, Bromoform, Chloroform, Dibromochloromethane, Total Trihalomethanes, Bromofluorobenzene.

Coliform P/A Test - Colilert (18h)

Batch ColilertPA 12/11/2013

Table with 7 columns: Parameter, Unit, Analyzed, DF, MDL, RL, Result. Rows include Coliforms, Total for samples 811334-001, 811334-002, 811334-004, and 811334-005.

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Q1 2014

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REPORT

Client: California Rehabilitation Center

5th and Western Avenue
Norco, CA 91760

Attention: Singh Rai

Project Name: Weekly Routine

Project Number: Agmnt #5600003884

P.O. Number: 4400002277

Release Number:

Laboratory No. 812610

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Printed 3/31/2014

Samples Received on 3/12/2014 2:45:00 PM

Field ID	Lab ID	Collected	Matrix
Warehouse	812610-001	03/12/2014 09:30	W
Unit IV	812610-002	03/12/2014 10:00	W
Navy	812610-003	03/12/2014 10:30	W
Reservoir	812610-004	03/12/2014 09:00	W

Comments:

Total Coliforms and HPC analyzed by PA. HAA by EPA 552.2 analyzed by JG. THMs by EPA 524.2 analyzed by KD. General Physical analyzed by FM. MBAS analyzed by AL. pH analyzed by HV. TDS and EC analyzed by JT.

Coliform P/A Test - Colisure (24h)

Batch ColisurePA 3/12/2014

Parameter	Unit	Analyzed	DF	MDL	RL	Result
812610-001 Coliforms, Total	P/A/100mL	03/13/2014 15:00	1	1.00	1.00	Abse00
812610-002 Coliforms, Total	P/A/100mL	03/13/2014 15:00	1	1.00	1.00	Abse00
812610-003 Coliforms, Total	P/A/100mL	03/13/2014 15:00	1	1.00	1.00	Abse00
812610-004 Coliforms, Total	P/A/100mL	03/13/2014 15:00	1	1.00	1.00	Abse00

Heterotrophic Plate Count HPC SM 9215B

Batch HPC-PCA 3/12/2014

Parameter	Unit	Analyzed	DF	MDL	RL	Result
812610-001 Plate Count	CFU/mL	03/14/2014 15:00	1	1.00	1.00	ND
812610-002 Plate Count	CFU/mL	03/14/2014 15:00	1	1.00	1.00	170
812610-003 Plate Count	CFU/mL	03/14/2014 15:00	1	1.00	1.00	ND
812610-004 Plate Count	CFU/mL	03/14/2014 15:00	1	1.00	1.00	ND

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03/14/2014



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Report Continued

Client: California Rehabilitation Center

Project Name: Weekly Routine

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Project Number: Agmnt #5600003884

Printed 3/31/2014

EPA 552 HAA's		Batch 710783					
Parameter	Unit	Analyzed	DF	MDL	RL	Result	
812610-001 Dibromoacetic acid	ug/L	03/14/2014	1.00	0.226	1.00	2.47	
Dibromopropionic Acid	%	03/14/2014	1.00	0	70.0	117	
Dichloroacetic acid	ug/L	03/14/2014	1.00	0.342	1.00	ND	
Monobromacetic acid	ug/L	03/14/2014	1.00	0.297	1.00	ND	
Monochloroacetic acid	ug/L	03/14/2014	1.00	0.389	1.00	ND	
Total Haloacetic Acids (HAA5)	ug/L	03/14/2014	1.00	0.844	1.00	2.47	
Trichloroacetic acid	ug/L	03/14/2014	1.00	0.153	1.00	ND	
812610-002 Dibromoacetic acid	ug/L	03/14/2014	1.00	0.226	1.00	10.3	
Dibromopropionic Acid	%	03/14/2014	1.00	0	70.0	108	
Dichloroacetic acid	ug/L	03/14/2014	1.00	0.342	1.00	1.30	
Monobromacetic acid	ug/L	03/14/2014	1.00	0.297	1.00	1.50	
Monochloroacetic acid	ug/L	03/14/2014	1.00	0.389	1.00	ND	
Total Haloacetic Acids (HAA5)	ug/L	03/14/2014	1.00	0.844	1.00	15.8	
Trichloroacetic acid	ug/L	03/14/2014	1.00	0.153	1.00	2.68	

Method Blank

Parameter	Unit	DF	Result
Monochloroacetic acid	ug/L	1.00	ND
Dichloroacetic acid	ug/L	1.00	ND
Trichloroacetic acid	ug/L	1.00	ND
Monobromacetic acid	ug/L	1.00	ND
Dibromoacetic acid	ug/L	1.00	ND
Dibromopropionic Acid	%	1.00	108
Total Haloacetic Acids (HAA5)	ug/L	1.00	ND

Lab Control Sample

Parameter	Unit	DF	Result	Expected	Recovery	Acceptance Range
Monochloroacetic acid	ug/L	1.00	27.3	30.0	91.0	70 - 130
Dichloroacetic acid	ug/L	1.00	29.1	30.0	97.0	70 - 130
Trichloroacetic acid	ug/L	1.00	10.5	10.0	105	70 - 130
Monobromacetic acid	ug/L	1.00	20.0	20.0	100	70 - 130
Dibromoacetic acid	ug/L	1.00	10.1	10.0	101	70 - 130
Dibromopropionic Acid	%	1.00	24.7	25.0	98.8	70 - 130

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Client: California Rehabilitation Center

Project Name: Weekly Routine

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Project Number: Agmnt #5600003884

Printed 3/31/2014

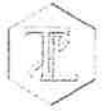
Lab Control Sample Duplicate

Parameter	Unit	DF	Result	Expected	Recovery	Acceptance Range
Monochloroacetic acid	ug/L	1.00	30.0	30.0	100	70 - 130
Dichloroacetic acid	ug/L	1.00	30.7	30.0	102	70 - 130
Trichloroacetic acid	ug/L	1.00	11.2	10.0	112	70 - 130
Monobromoacetic acid	ug/L	1.00	19.9	20.0	99.5	70 - 130
Dibromoacetic acid	ug/L	1.00	10.8	10.0	108	70 - 130
Dibromopropionic Acid	%	1.00	27.3	25.0	109	70 - 130

MRCVS - Primary

Parameter	Unit	DF	Result	Expected	Recovery	Acceptance Range
Monochloroacetic acid	ug/L	1.00	10.0	10.0	100	70 - 130
Dichloroacetic acid	ug/L	1.00	9.14	10.0	91.4	70 - 130
Trichloroacetic acid	ug/L	1.00	7.67	10.0	76.7	70 - 130
Monobromoacetic acid	ug/L	1.00	8.98	10.0	89.8	70 - 130
Dibromoacetic acid	ug/L	1.00	8.95	10.0	89.5	70 - 130
Dibromopropionic Acid	%	1.00	25.0	25.0	100	70 - 130

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Q-1 2014

Report Continued

Client: California Rehabilitation Center

Project Name: Weekly Routine

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Project Number: Agmnt #5600003884

Printed 3/31/2014

EPA 524.2 - GC/MS

Batch 710781

Parameter	Unit	Analyzed	DF	MDL	RL	Result
812610-001 Bromodichloromethane	ug/L	03/15/2014	1.00	0.0630	0.500	4.42
Bromofluorobenzene	%	03/15/2014	1.00	80.0	70.0	95.2
Bromoform	ug/L	03/15/2014	1.00	0.0910	0.500	44.6
Chloroform	ug/L	03/15/2014	1.00	0.0900	0.500	0.517
Dibromochloromethane	ug/L	03/15/2014	1.00	0.104	0.500	19.5
Total Trihalomethanes	ug/L	03/15/2014	1.00	0.0920	0.500	69.0
812610-002 Bromodichloromethane	ug/L	03/15/2014	1.00	0.0630	0.500	7.07
Bromofluorobenzene	%	03/15/2014	1.00	80.0	70.0	94.2
Bromoform	ug/L	03/15/2014	1.00	0.0910	0.500	68.1
Chloroform	ug/L	03/15/2014	1.00	0.0900	0.500	1.07
Dibromochloromethane	ug/L	03/15/2014	1.00	0.104	0.500	32.3
Total Trihalomethanes	ug/L	03/15/2014	1.00	0.0920	0.500	109

Method Blank

Parameter	Unit	DF	Result
Bromodichloromethane	ug/L	1.00	ND
Bromoform	ug/L	1.00	ND
Chloroform	ug/L	1.00	ND
Dibromochloromethane	ug/L	1.00	ND
Total Trihalomethanes	ug/L	1.00	ND
Bromofluorobenzene	%	1.00	97.0

Lab Control Sample

Parameter	Unit	DF	Result	Expected	Recovery	Acceptance Range
Benzene				0		
Bromodichloromethane	ug/L	1.00	4.97	5.00	99.4	80 - 120
Bromoform	ug/L	1.00	4.73	5.00	94.6	80 - 120
Chlorobenzene				0		
Chloroform	ug/L	1.00	4.95	5.00	99.0	80 - 120
Dibromochloromethane	ug/L	1.00	5.00	5.00	100	80 - 120
1,1-Dichloroethene				0		
Toluene				0		
Trichloroethene (TCE)				0		
Bromofluorobenzene	%	1.00	4.76	5.00	95.2	80 - 120
Toluene-d8				0		
Dibromofluoromethane				0		

This report applies only to the sample, or samples, investigated and is not necessarily indicative of the quality or condition of apparently identical or similar products. As a mutual protection to clients, the public, and these laboratories, this report is submitted and accepted for the exclusive use of the client to whom it is addressed and upon the condition that it is not to be used, in whole or in part, in any advertising or publicity matter without prior written authorization from Truesdail Laboratories.



Client: California Rehabilitation Center

Project Name: Weekly Routine

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Lab Control Sample Duplicate

Parameter	Unit	DF	Result	Expected	Recovery	Acceptance Range
Benzene				0		
Bromodichloromethane	ug/L	1.00	5.30	5.00	106	80 - 120
Bromoform	ug/L	1.00	5.32	5.00	106	80 - 120
Chlorobenzene				0		
Chloroform	ug/L	1.00	5.46	5.00	109	80 - 120
Dibromochloromethane	ug/L	1.00	5.48	5.00	110	80 - 120
1,1-Dichloroethene				0		
Toluene				0		
Trichloroethene (TCE)				0		
Bromofluorobenzene	%	1.00	4.61	5.00	92.2	80 - 120
Toluene-d8				0		
Dibromofluoromethane				0		

MRCCS - Secondary

Parameter	Unit	DF	Result	Expected	Recovery	Acceptance Range
Bromodichloromethane	ug/L	1.00	10.1	10.0	101	80 - 120
Bromoform	ug/L	1.00	9.88	10.0	98.8	80 - 120
Chloroform	ug/L	1.00	10.2	10.0	102	80 - 120
Dibromochloromethane	ug/L	1.00	10.6	10.0	106	80 - 120
Bromofluorobenzene	%	1.00	4.78	5.00	95.6	80 - 120

MRCVS - Primary

Parameter	Unit	DF	Result	Expected	Recovery	Acceptance Range
Bromodichloromethane	ug/L	1.00	9.47	10.0	94.7	80 - 120
Bromoform	ug/L	1.00	9.38	10.0	93.8	80 - 120
Chloroform	ug/L	1.00	9.08	10.0	90.8	80 - 120
Dibromochloromethane	ug/L	1.00	9.47	10.0	94.7	80 - 120
Bromofluorobenzene	%	1.00	4.80	5.00	96.0	80 - 120

Residual Chlorine

Batch R-CI 3/12/2014

Parameter	Unit	Analyzed	DF	MDL	RL	Result
812610-001 Chlorine Residual	mg/L	03/12/2014	1	0.500	0.100	0.200
812610-002 Chlorine Residual	mg/L	03/12/2014	1	0.500	0.100	0.300
812610-003 Chlorine Residual	mg/L	03/12/2014	1	0.500	0.100	0.210
812610-004 Chlorine Residual	mg/L	03/12/2014	1	0.500	0.100	0.960

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Attachment No. 2

Drinking Water Notification to Consumers

PROOF OF NOTIFICATION

Name of Water System: _____

Please explain what caused the problem if you have determined what it was and what steps you have taken to correct it. _____

Consumers Notified _____ Yes _____ No

If not, Explain: _____

Date of Notification: _____

On the date of notification set forth above, I served the above referenced document(s) on the consumers by:

_____ Sending a copy through the U.S. Mail, first class, postage prepaid, addressed to each of the resident(s) at the place where the property is situated, pursuant to the California Civil Code. Attach copy of Notice.

_____ Newspaper (if the problem has been corrected). Attach a copy of Notice.

_____ Personally hand-delivering a copy to each of the consumers. Attach a copy of Notice.

_____ Posted on a public bulletin board, that will be seen by each of the consumers (for small, non-community water systems with prior Department approval). Attach copy of Notice.

I hereby declare the forgoing to be true and correct under penalty of perjury.

Dated: _____

Signature of Person Serving Notice

****Notice:** Complete this Proof of Notification and return it along with a copy of the notification to the Department within 10 days of receipt of giving public notice.

Disclosure: Be advised that the California Health and Safety Code states that any person who knowingly makes a 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 each separate violation for each day that violation continues. In addition, the violators may be prosecuted in criminal court and upon conviction, be punished by fine of not more than twenty-five thousand dollars (\$25,000) for each day of violation, or be imprisoned in county jail not to exceed one year or by both the fine and imprisonment.

Attachment No. 3

I. GENERAL INFORMATION

A. Facility Information

Facility Name: _____ PWSID: _____
 Facility Address: _____
 City: _____ State: _____ Zip: _____

B. Report Prepared by:

(Print): _____ Date prepared: _____
 (Signature): _____
 Contact Telephone Number: _____

II. MONITORING RESULTS

A. Provide the Compliance Monitoring Site(s) where the OEL was Exceeded.

Note: The site name or number should correspond to a site in your Stage 2 DBPR compliance monitoring plan.

B. Monitoring Results for the Site(s) Identified in II.A (include duplicate pages if there was more than one exceedance)

1. Check TTHM or HAA5 to indicate which result caused the OEL exceedance. TTHM HAA5

2. Enter your results for TTHM or HAA5 (whichever you checked above).

	Quarter			Operational Evaluation Value
	Results from Two Quarters Ago	Prior Quarter's Results	Current Quarter	
	A	B	C	
				$D = (A+B+(2*C))/4$
Date sample was collected				
TTHM (mg/L)				
HAA5 (mg/L)				

Note: The operational evaluation value is calculated by summing the two previous quarters of TTHM or HAA5 values plus twice the current quarter value, divided by four. If the value exceeds 0.080 mg/L for TTHM or 0.060 mg/L for HAA5, an OEL exceedance has occurred.

C. Has an OEL exceedance occurred at this location in the past? Yes No

If NO, proceed to item D. If YES, when did exceedance occur?

Was the cause determined for the previous exceedance(s)? Yes No

Are the previous evaluations/determinations applicable to the current OEL exceedance? Yes No

III. OPERATIONAL EVALUATION FINDINGS

A. Did the State allow you to limit the scope of the operational evaluation? Yes No

If NO, proceed to item B. If YES, attach written correspondence from the State.

B. Did the **distribution system** cause or contribute to your OEL exceedance(s)? Yes No
 Possibly

If NO, proceed to item C. If YES or POSSIBLY, explain (attach additional pages if necessary):

C. Did the **treatment** system cause or contribute to your OEL exceedance(s)? Yes No
 Possibly

If NO, proceed to item D. If YES or POSSIBLY, explain (attach additional pages if necessary):

D. Did **source water quality** cause or contribute to your OEL exceedance(s)? Yes No
 Possibly

If NO, proceed to item E. If YES or POSSIBLY, explain (attach additional pages if necessary):

E. Attach all supporting operational or other data that support the determination of the cause(s) of your OEL exceedance(s).

F. If you are unable to determine the cause(s) of the OEL exceedance(s), list the steps that you can use to better identify the cause(s) in the future (attach additional pages if necessary):

G. List steps that could be considered to minimize future OEL exceedances (attach additional pages if necessary)

H. Total **Number of Pages** Submitted, Including Attachments and Checklists: _____

Distribution System Evaluation Checklist

System Name: _____
Checklist Completed by: _____ Date: _____

A. Do you have disinfectant residual or temperature data for the monitoring location where you experienced the OEL exceedance? Yes No

If NO, proceed to item B. If YES, answer the following questions for the period in which an OEL exceedance occurred:

Yes No

Was the water temperature higher than normal for that time of the year at that location?

Was the disinfectant residual lower than normal for that time of the year at that location?

Was the disinfectant residual higher than normal for that time of the year at that location?

B. Do you have maintenance records available for the time period just prior to the OEL exceedance? Yes No

If NO, proceed to item C. If YES, answer the following questions:

Yes No

Did any line breaks or replacements occur in the vicinity of the exceedance?

Were any storage tanks or reservoirs taken off-line and cleaned?

Did flushing or other hydraulic disturbances (e.g., fires) occur in the vicinity of the exceedance?

Were any valves operated in the vicinity of the OEL exceedances?

C. If your system is metered, do you have access to historical records showing water use at individual service connections? Yes No

If NO, proceed to item D. If YES, was overall water use in your system unusually low, indicating higher than normal water age? Yes No

D. Do you have high-volume customers in your system (e.g., an industrial processing plant)? Yes No

If NO, proceed to item E. If YES, was there a change in water use by a high-volume customer? Yes No

E. Is there a finished water storage facility hydraulically upstream from the monitoring location where you experienced the OEL exceedance? Yes No

If NO, proceed to item F. If YES, review storage facility operations and water quality data to answer the following questions for the period in which the OEL exceedance occurred:

Yes No

Was a disinfectant residual detected in the stored water or at the tank outlet?

Do you know of any mixing problems with the tank or reservoir?

Does the facility operate in "last in-first out" mode?

Was the tank or reservoir drawn down more than usual prior to OEL exceedance, indicating a possible discharge of stagnant water?

Was there a change in water level fluctuations that would have resulted in increased water age within the tank or reservoir?

Distribution System Evaluation Checklist

F. Does your system practice booster chlorination? Yes No
If NO, proceed to item G. If YES, was there an increase in booster chlorination feed rates? Yes No

G. Did you have customer complaints in the vicinity of the OEL exceedance? Yes No
If NO, proceed to item H. If YES, explain.

H. Did concern about complying with a rule other than Stage 2 DBPR, such as the Lead and Copper rule, the TCR, or any other rule constrain your options to reduce the DBP levels at this site? For example, are you limited by the need to maintain a detectable disinfectant residual in your ability to control DBP levels in the distribution system? Yes No
If NO, proceed to item I. If YES, explain below and consult EPA's *Simultaneous Compliance Guidance Manual* for alternative compliance approaches.

I. Conclusion

Did the distribution system cause or contribute to the OEL exceedance(s)? Yes No
 Possibly

If NO, proceed to evaluations of treatment systems and source water. If YES or POSSIBLY, explain below.
