

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23  
24  
25  
26  
27

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

**TO:** Myoma Dunes Mutual Water Company  
79-050 Avenue 42  
Bermuda Dunes, CA 92203

**Attn:** Mark Meeler, General Manager

**COMPLIANCE ORDER NO. 05-20-15R-002**  
**FOR**  
**VIOLATION OF HEALTH AND SAFETY CODE SECTION 116555 (a) (1)**  
**AND THE PRIMARY DRINKING WATER STANDARD FOR HEXAVALENT**  
**CHROMIUM**

**Issued on May 18, 2015**

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 this Compliance Order (hereinafter "Order") pursuant to Section 116655 of the California Health and Safety Code (hereinafter "CHSC") to the Myoma Dunes Mutual Water Company for violation of the CHSC Section 116555(a)(1) and Title 22, California Code of Regulations (hereinafter "CCR"), Section 64431.

1 **APPLICABLE AUTHORITIES**

2 **Section 116555(a) (1) of the CHSC states in relevant part:**

3  
4 (a) Any person who owns a public water system shall ensure that the system does  
5 all of the following:

- 6 (1) Complies with primary and secondary drinking water standards.

7 **Section 116655 of the CHSC states in relevant part:**

8  
9 (a) Whenever the department determines that any person has violated or is  
10 violating this chapter, or any permit, regulation, or standard issued or adopted  
11 pursuant to this chapter, the director may issue an Order doing any of the following:

- 12 (1) Directing compliance forthwith.  
13 (2) Directing compliance in accordance with a time schedule set by the  
14 department.  
15 (3) Directing that appropriate preventive action be taken in the case of a  
16 threatened violation.

17 (b) An Order issued pursuant to this section may include, but shall not be limited  
18 to, any or all of the following requirements:

- 19 (1) That the existing plant, works, or system be repaired, altered, or added to.  
20 (2) That purification or treatment works be installed.  
21 (3) That the source of the water supply be changed.  
22 (4) That no additional service connection be made to the system.  
23 (5) That the water supply, the plant, or the system be monitored.



1 (6) That a report on the condition and operation of the plant, works, system, or  
2 water supply be submitted to the department.

3 **CCR, Title 22, Section 64431, states in relevant part:**

4  
5 Public water systems shall comply with the primary MCLs in table 64431-A as  
6 specified in this article.

7 **Table 64431-A**  
8 **Maximum Contaminant Levels**  
9 **Inorganic Chemicals**

<i>Chemical</i>	<i>Maximum Contaminant Level, mg/L</i>
Aluminum	1.
Antimony	0.006
Arsenic	0.010
Asbestos	7 MFL*
Barium	1.
Beryllium	0.004
Cadmium	0.005
Chromium	0.05
Cyanide	0.15
Fluoride	2.0
Hexavalent chromium	0.010
Mercury	0.002
Nickel	0.1
Nitrate (as NO3)	45.
Nitrate+Nitrite (sum as nitrogen)	10.
Nitrite (as nitrogen)	1.
Perchlorate	0.006
Selenium	0.05
Thallium	0.002

10 \* MFL=million fibers per liter; MCL for fibers exceeding 10 um in length.

11  
12 **CCR Title 22, Section 64432, states in relevant part:**

13 (g) If the level of any inorganic chemical, except for nitrate, nitrite, nitrate plus  
14 nitrite, or perchlorate, exceeds the MCL, the water supplier shall do one of the  
15 following:

16 (1) Inform the Department within 48 hours and monitor quarterly beginning in  
17 the next quarter after the exceedance occurred; or

1 (2) Inform the Department within seven days from the receipt of the analysis  
2 and, as confirmation, collect one additional sample within 14 days from  
3 receipt of the analysis. If the average of the two samples collected exceeds  
4 the MCL, this information shall be reported to the Department within 48  
5 hours and the water supplier shall monitor quarterly beginning in the next  
6 quarter after the exceedance occurred.

7  
8 (h) If the concentration of an inorganic chemical exceeds ten times the MCL, within  
9 48 hours of receipt of the result the water supplier shall notify the Department and  
10 resample as confirmation. The water supplier shall notify the Department of the  
11 result(s) of the confirmation sample(s) within 24 hours of receipt of the confirmation  
12 result(s).

13 (1) If the average concentration of the original and confirmation sample(s) is  
14 less than or equal to ten times the MCL, the water supplier shall monitor  
15 quarterly beginning in the quarter following the quarter in which the  
16 exceedance occurred.

17 (2) If the average concentration of the original and confirmation sample(s)  
18 exceeds ten times the MCL, the water supplier shall, if directed by the  
19 Department;

20 (A) Immediately discontinue use of the contaminated water source; and  
21 (B) Not return the source to service without written approval from the  
22 Department.

23

1 (i) Compliance with the MCLs shall be determined by a running annual average; if  
2 any one sample would cause the annual average to exceed the MCL, the system is  
3 immediately in violation. If a system takes more than one sample in a quarter, the  
4 average of all the results for that quarter shall be used when calculating the running  
5 annual average. If a system fails to complete four consecutive quarters of monitoring,  
6 the running annual average shall be based on an average of the available data.

7  
8 **STATEMENT OF FACTS**

9  
10 The Myoma Dunes Mutual Water Company (hereinafter, Company) serves water to  
11 approximately 6,159 individuals through approximately 2,465 service connections.  
12 The water system is operated under Domestic Water Supply Permit No. 05-20-03P-  
13 004, issued on April 7, 2003 and consists of five active wells, two reservoirs and two  
14 booster stations. The water system is a community public water system as defined in  
15 the California Health and Safety Code, Section 116275.

16  
17 Title 22, CCR, Division 4, Chapter 15, Article 4, establishes primary drinking water  
18 standards and monitoring and reporting requirements for inorganic constituents.  
19 Community water systems must comply with the maximum contaminant level for  
20 hexavalent chromium of 0.010 mg/L, as established in Title 22 CCR Section 64431.

21  
22 Samples collected in September 2014 showed hexavalent chromium concentrations  
23 over the MCL in water produced by three (3) of the Company's five (5) wells as noted  
24 in **Table 1** below. Therefore, in accordance with Section 64431 (g), the Company

1 was required to begin quarterly hexavalent chromium monitoring of each non-  
 2 compliant well, unless it chose to submit an additional sample, which it did not do.  
 3 Also, as noted in the table, the Company began to monitor its two compliant  
 4 hexavalent chromium wells on a quarterly basis, per Division request, due to past  
 5 results above the MCL. Section 64431 (i) provides that compliance with the  
 6 hexavalent chromium MCL is based on a "running annual average" (RAA) of the  
 7 quarterly monitoring samples, computed each quarter. Furthermore, Section 64431 (i)  
 8 states: "if any one sample would cause the annual average to exceed the MCL, the  
 9 system is immediately in violation." A summary of the water system's hexavalent  
 10 chromium monitoring is presented in the table below. All results are as reported to the  
 11 Division by the laboratory that performed the analysis.

12 **Table 1: Hexavalent Chromium Monitoring Results (in mg/L)**  
 13

Sample Quarter	Well 10	Well 11	Well 7	Well 4	Well 12
3rd Quarter 2014	0.0130	0.0130	0.0055	0.0052	0.0130
4th Quarter 2014	0.0120	0.0150	0.0110	0.0110	0.0120
1st Quarter 2015	0.0160	0.0160	0.0130	0.0120	0*
<b>Running Annual Average</b>	0.0103	0.0110	0.0073	0.0071	0.0063

14 \*Well No. 12 was off during 1<sup>st</sup> quarter 2015 due to pump failure.  
 15  
 16

17 **DETERMINATION**

18  
 19 Based on the above Statement of Facts, the Division has determined that the water  
 20 system has violated the California Health and Safety Code, Section 116555 and  
 21 Section 64431 in that the water produced by Well No. 11 during the 1<sup>st</sup> quarter of

1 2015, exceeded the hexavalent chromium MCL as shown in **Table 1** above, and  
2 further has determined that said violation is continuing through the date of this Order.  
3 Furthermore, as noted in the table, it is highly likely that the remaining wells (Wells  
4 No. 4, 7, 10 and 12) will exceed the hexavalent chromium MCL this year and will also  
5 be in violation of CHSC, Section 116555 and Section 64431.

6 **DIRECTIVES**

7 The Myoma Dunes Mutual Water Company is hereby directed to take the following  
8 actions:  
9

- 10 1. On or before June 5, 2015 submit a written response to the Division indicating  
11 its agreement to comply with the directives of this Order and with the  
12 Corrective Action Plan addressed herein.  
13
- 14 2. Commencing on the date of service of this Order, provide quarterly public  
15 notification in accordance with **Attachment No. 1**, hereto, of the Myoma Dunes  
16 Mutual Water Company failure to meet the hexavalent chromium MCL during  
17 any calendar quarter that the four-quarter running annual average exceeds the  
18 MCL.  
19
- 20 3. Commencing on the date of service of this Order, submit proof of each public  
21 notification conducted in compliance with **Directive No. 2**, herein above, within  
22 10 days following each such notification, using the form provided as  
23 **Attachment No. 2**, hereto.

1  
2  
3  
4  
5  
6  
7  
8  
9  
10  
11  
12  
13  
14  
15  
16  
17  
18  
19  
20  
21  
22  
23

- 4. Commencing on the date of service of this Order collect quarterly samples for hexavalent chromium from each well, as required by Section 64432(g), and ensure that the analytical results are reported to the Division electronically by the analyzing laboratory no later than the 10<sup>th</sup> day following the month in which the analysis was completed.
  
- 5. Prepare for Division review and approval, and prior to implementation, a Corrective Action Plan identifying improvements to the water system designed to correct the water quality problem (violation of the hexavalent chromium MCL) and ensure that the Myoma Dunes Mutual Water Company delivers water to consumers that meets primary drinking water standards. The plan shall include a time schedule for completion of each of the phases of the project such as design, construction, and startup, and a date as of which the Myoma Dunes Mutual Water Company will be in compliance with the hexavalent chromium MCL.
  
- 6. On or before July 31, 2015, present the Corrective Action Plan required under **Directive No. 5**, above, to the Division in person at the Division's offices located at 1350 Front Street, Room 2050, San Diego, California 92101.
  
- 7. Timely perform the Division approved Corrective Action Plan and each and every element of said plan according to the time schedule set forth therein.

- 1 8. On or before July 31, 2015 and every three months thereafter, submit a report  
2 to the Division in the form provided as **Attachment No. 3**, hereto, showing  
3 actions taken during the previous calendar three months to comply with the  
4 Corrective Action Plan.
- 5
- 6 9. Not later than ten (10) days following the date of compliance with the  
7 hexavalent chromium MCL, demonstrate to the Division that the water  
8 delivered by the Myoma Dunes Mutual Water Company complies with the  
9 hexavalent chromium MCL.
- 10
- 11 10. Notify the Division in writing no later than five (5) days prior to the deadline for  
12 performance of any **Directive** set forth herein if the Myoma Dunes Mutual  
13 Water Company anticipates it will not timely meet such performance deadline.
- 14

15 All submittals required by this Order shall be addressed to:

16  
17 J. Steven Williams, P.E.  
18 District Engineer  
19 State Water Resources Control Board  
20 Division of Drinking Water  
21 1350 Front Street, Room 2050  
22 San Diego, CA 92101  
23  
24

25 As used in this Order, the date of issuance shall be the date of this Order; and the  
26 date of service shall be the date of service of this Order, personal or by certified mail,  
27 on the Myoma Dunes Mutual Water Company.

28

1 The Division reserves the right to make such modifications to this Order and/or to  
2 issue such further Order(s) as it may deem necessary to protect public health and  
3 safety. Such modifications may be issued as amendments to this Order and shall be  
4 deemed effective upon issuance.

5  
6 Nothing in this Order relieves the Myoma Dunes Mutual Water Company of its  
7 obligation to meet the requirements of the California SDWA, or any regulation,  
8 standard, permit or Order issued thereunder.

9 **PARTIES BOUND**

10 This Order shall apply to and be binding upon the Myoma Dunes Mutual Water  
11 Company, its owners, shareholders, officers, directors, agents, employees,  
12 contractors, successors, and assignees.

13 **SEVERABILITY**

14 The Directives of this Order are severable, and the Myoma Dunes Mutual Water  
15 Company shall comply with each and every provision hereof, notwithstanding the  
16 effectiveness of any other provision.

17 **FURTHER ENFORCEMENT ACTION**

18 The California SDWA authorizes the Board to: issue a Citation with assessment of  
19 administrative penalties to a public water system for violation or continued violation of  
20 the requirements of the California SDWA or any regulation, permit, standard, Citation,  
21 or Order issued or adopted thereunder including, but not limited to, failure to correct a  
22 violation identified in a Citation or Compliance Order. The California SDWA also  
23 authorizes the Board to take action to suspend or revoke a permit that has been  
24 issued to a public water system if the public water system has violated applicable law

1 or regulations or has failed to comply with an Order of the Board; and to petition the  
2 superior court to take various enforcement measures against a public water system  
3 that has failed to comply with an Order of the Board. The Board does not waive any  
4 further enforcement action by issuance of this Order.

5

6

7

8

9

10

11

12

13

14

15

16

17

18

19

20

21

22

23

  
\_\_\_\_\_  
Jeff O'Keefe, P.E., Chief  
South Coast Section  
State Water Resources Control Board  
Division of Drinking Water

May 18, 2015  
Date

Certified Mail No. 7009 2250 0000 8390 7194

- Enclosures: (1) Public Notification Template w/ Instructions  
(2) Proof of Public Notification Form  
(3) Quarterly Progress Report

cc: County of Riverside, Department of Environmental Health (w/o attachments)  
File – Correspondence (w/o attachments)

## Instructions for Tier 2 Chemical or Radiological MCLs Notice Template

### Template Attached

Since exceeding chemical or radiological maximum contaminant levels (MCLs) is a Tier 2 violation, you must provide public notice to persons served as soon as practical but within 30 days after you learn of the violation [California Code of Regulations Title 22, Chapter 15, Section 64463.4(b)]. **Each water system required to give public notice must submit the notice to the State Water Resources Control Board, Division of Drinking Water (DDW) for approval prior to distribution or posting, unless otherwise directed by the DDW [64463(b)].**

### Notification Methods

You must use the methods summarized in the table below to deliver the notice to consumers. If you mail, post, or hand deliver, print your notice on letterhead, if available.

<i>If You Are a...</i>	<i>You Must Notify Consumers by...</i>	<i>...and By One or More of the Following Methods to Reach Persons Not Likely to be Reached by the Previous Method...</i>
Community Water System [64463.4(c)(1)]	Mail or direct delivery <sup>(a)</sup>	Publication in a local newspaper
		Posting in conspicuous public places served by the water system or on the Internet <sup>(b)</sup>
		Delivery to community organizations
Non-Community Water System [64463.4(c)(2)]	Posting in conspicuous locations throughout the area served by the water system <sup>(b)</sup>	Publication in a local newspaper or newsletter distributed to customers
		Email message to employees or students
		Posting on the Internet or intranet <sup>(b)</sup>
		Direct delivery to each customer

(a) Notice must be distributed to each customer receiving a bill including those that provide their drinking water to others (e.g., schools or school systems, apartment building owners, or large private employers), and other service connections to which water is delivered by the water system.

(b) Notice must be posted in place for as long as the violation or occurrence continues, but in no case less than seven days.

The notice attached is appropriate for the methods described above. However, you may wish to modify it before using it for posting. If you do, you must still include all the required elements and leave the health effects and notification language in italics unchanged. This language is mandatory [64465].

### Multilingual Requirement

The notice must (1) be provided in English, Spanish, and the language spoken by any non-English-speaking group exceeding 10 percent of the persons served by the water

system and (2) include a telephone number or address where such individuals may contact the water system for assistance.

If any non-English-speaking group exceeds 1,000 persons served by the water system, but does not exceed 10 percent served, the notice must (1) include information in the appropriate language(s) regarding the importance of the notice and (2) contain the telephone number or address where such individuals may contact the water system to obtain a translated copy of the notice from the water system or assistance in the appropriate language.

### **Population Served**

Make sure it is clear who is served by your water system -- you may need to list the areas you serve.

### **Corrective Action**

In your notice, describe corrective actions you are taking. Do not use overly technical terminology when describing treatment methods. Listed below are some steps commonly taken by water systems with chemical or radiological violations. Use one or more of the following actions, if appropriate, or develop your own:

- “We are working with [local/state agency] to evaluate the water supply and researching options to correct the problem. These options may include treating the water to remove [contaminant] or connecting to [system]’s water supply.”
- “We have stopped using the contaminated well. We have increased pumping from other wells, and we are investigating drilling a new well.”
- “We will increase the frequency at which we test the water for [contaminant].”
- “We have since taken samples at this location and had them tested. They show that we meet the standards.”

### **After Issuing the Notice**

Send a copy of each type of notice and a certification that you have met all the public notice requirements to the DDW within ten days after you issue the notice [64469(d)]. You should also issue a follow-up notice in addition to meeting any repeat notice requirements the DDW sets.

It is recommended that you notify health professionals in the area of the violation. People may call their doctors with questions about how the violation may affect their health, and the doctors should have the information they need to respond appropriately.

It is a good idea to issue a “problem corrected” notice when the violation is resolved.

## 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.

### **[System] Has Levels of [Contaminant] Above the Drinking Water Standard**

Our water system recently violated a drinking water standard. Although this is not an emergency, as our customers, you have a right to know what you should do, what happened, and what we are doing to correct this situation.

We routinely monitor for the presence of drinking water contaminants. Water sample results received on [date] showed [name of contaminant] levels of [level and units]. This is above the standard, or maximum contaminant level (MCL), of [standard and units].

#### **What should I do?**

- **You do not need to use an alternative water supply (e.g., bottled water).**
- This is not an immediate risk. If it had been, you would have been notified immediately. However, [Insert relevant health effects language from section 64465 appendix].
- 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?**

[Describe corrective action]. We anticipate resolving the problem within [estimated time frame].

For more information, please contact [name of contact] at [phone number] or [mailing address].

*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 [system].

State Water System ID#: \_\_\_\_\_. Date distributed: \_\_\_\_\_.

**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 posting the notification.

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.

# Quarterly Progress Report

Water System:	Water System No.:
Compliance Order No.:	Violation:
Calendar Quarter:	Date Prepared:

This form should be prepared and signed by Water System personnel with appropriate authority to implement the directives of the Compliance Order and the Corrective Action Plan. Please attach additional sheets as necessary. The quarterly progress report must be submitted by the 10th day of each subsequent quarter, to the Division of Drinking Water, \_\_\_\_\_ District Office.

**Summary of Compliance Plan:**

**Tasks completed in the reporting quarter:**

**Tasks remaining to complete:**

**Anticipate compliance date:**

**Name**

**Signature**

**Title**

**Date**

PLACE STICKER AT TOP OF ENVELOPE TO THE RIGHT OF THE RETURN ADDRESS, FOLD AT DOTTED LINE

CERTIFIED MAIL™



7009 2250 0000 8390 7194  
7009 2250 0000 8390 7194

U.S. Postal Service™  
**CERTIFIED MAIL™ RECEIPT**  
(Domestic Mail Only; No Insurance Coverage Provided)

For delivery information visit our website at [www.usps.com](http://www.usps.com)

**OFFICIAL USE**

Postage	\$ 1.40
Certified Fee	3.30
Return Receipt Fee (Endorsement Required)	2.70
Restricted Delivery Fee (Endorsement Required)	
<b>Total Postage &amp; Fees</b>	<b>\$ 7.19</b>

Postmark  
Here

Sent To  
 MYOMA DUNES MUTUAL WATER COMPANY  
 Street, Apt. No.;  
 or PO Box No. 79-050 AVENUE 42  
 City, State, ZIP+4  
 BERMUDA DUNES, CA 92203

PS Form 3800, August 2006

See Reverse for Instructions

**SENDER: COMPLETE THIS SECTION**

- Complete items 1, 2, and 3. Also complete item 4 if Restricted Delivery is desired.
- Print your name and address on the reverse so that we can return the card to you.
- Attach this card to the back of the mailpiece, or on the front if space permits.

1. Article Addressed to:

MYOMA DUNES MUTUAL W.C.  
 79-050 AVE 42  
 BERMUDA DUNES, CA 92203

2. Article Number

(Transfer from service label)

7009 2250 0000 8390 7194

PS Form 3811, August 2001

Domestic Return Receipt

102595-02-M-1035

**COMPLETE THIS SECTION ON DELIVERY**

A. Signature

X

Agent

Addressee

B. Received by (Printed Name)

C. Date of Delivery

D. Is delivery address different from item 1?  Yes  
 If YES, enter delivery address below:  No

3. Service Type

Certified Mail

Express Mail

Registered

Return Receipt for Merchandise

Insured Mail

C.O.D.

4. Restricted Delivery? (Extra Fee)

Yes