

**PWSID ME0091690**  
**SUGARLOAF WATER ASSOCIATION**  
**2023 Consumer Confidence Report**

**General Information**

**Water System Contact Name:** \_\_\_\_\_

**Address:** \_\_\_\_\_

**City, State, Zip Code:** \_\_\_\_\_

**Telephone #:** \_\_\_\_\_ **Fax#:** \_\_\_\_\_ **Email:** \_\_\_\_\_

**Report Covering Calendar Year:** Jan 1 - Dec 31, 2023

**Upcoming Regularly Scheduled Meeting(s):** \_\_\_\_\_

**Source Water Information**

**Description of Water Source:** Wells: 7 Surface Water Intakes: 1 (Carrabassett River)

**Water Treatment & Filtration Information:**

**Source Water Assessment:**

The sources of drinking water include rivers, lakes, ponds, and wells. As water travels over the surface of the land or through the ground, it dissolves naturally occurring minerals and radioactive material and can pick up substances resulting from human or animal activity. The Maine Drinking Water Program (DWP) has evaluated all public water supplies as part of the Source Water Assessment Program (SWAP). The assessments included geology, hydrology, land uses, water testing information, and the extent of land ownership or protection by local ordinance to see how likely our drinking water source is to being contaminated by human activities in the future. Assessment results are available at town offices and public water systems.

**Definitions:**

Maximum Contaminant Level (MCL): The highest level of a contaminant that is allowed in drinking water.

Maximum Contaminant Level Goal (MCLG): The level of a contaminant in drinking water below which there is no known or expected risk to health.

Secondart Maximum Contaminant Level (SMCL)

Running Annual Average (RAA): A 12 month rolling average of all monthly or quarterly samples at all locations. Calculation of the RAA may contain data from the previous year.

Locational Running Annual Average (LRAA): A 12 month rolling average of all monthly or quarterly samples at specific sampling locations. Calculation of the RAA may contain data from the previous year.

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

Maximum Residual Disinfectant Level (MRDL): The highest level of a disinfectant allowed in drinking water. There is convincing evidence that addition of a disinfectant is necessary for control of microbial contaminants.

Maximum Residual Disinfectant Level Goal (MRDLG): The level of a drinking water disinfectant below which there is no known or expected risk to health. MRDLGs do not reflect the benefits of the use of disinfectants to control microbial contaminants.

Treatment Technique (TT): A required process intended to reduce the level of a contaminant in drinking water.

**Units:**

ppm = parts per million or milligrams per liter (mg/L).

pCi/L = picocuries per liter (a measure of radioactivity).

ppb = parts per billion or micrograms per liter (µg/L).

pos = positive samples.

MFL = million fibers per liter

# Water Test Results

Contaminant	Date	Results	MCL	MCLG	Possible Sources of Contamination
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## Microbiological

COLIFORM (TCR) (1)	2023	<b>0 pos</b>	1 pos/mo or 5%	0 pos	Naturally present in the environment.
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## Inorganics

ARSENIC (6)	8/3/2023	<b>5.7 ppb</b>	10 ppb	0 ppb	Erosion of natural deposits. Runoff from orchards, glass and electronics production wastes.
FLUORIDE (3)	6/13/2023	<b>0.82 ppm</b>	4 ppm	4 ppm	Erosion of natural deposits. Water additive which promotes strong teeth. Discharge from fertilizer and aluminum factories.
NITRATE (5)	6/13/2023	<b>0.56 ppm</b>	10 ppm	10 ppm	Runoff from fertilizer use. Leaching from septic tanks, sewage. Erosion of natural deposits.

## Synthetics

TOTAL PFAS (6 regulated) (10)	6/20/2023	<b>3.6 ppt</b>	20 ppt	0 ppt	Man-made chemicals in a wide variety of consumer products and industrial applications. Stain- and water-resistant fabrics, carpeting, non-stick cookware, cleaning products and paints, Class B Firefighting foam (AFFF) foam and industrial processes.
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## Radionuclides

COMBINED RADIUM (-226 & -228)	12/20/2022	<b>0.33 pCi/l</b>	5 pCi/l	0 pCi/l	Erosion of natural deposits.
GROSS ALPHA (7)	11/22/2023	<b>1.19 pCi/l</b>	15 pCi/l	0 pCi/l	Erosion of natural deposits.
RADIUM-226	12/20/2022	<b>0.0604 pCi/l</b>	5 pCi/l	0 pCi/l	Erosion of natural deposits.
RADIUM-228	12/20/2022	<b>0.448 pCi/l</b>	5 pCi/l	0 pCi/l	Erosion of natural deposits.
RADON (8)	11/29/2023	<b>796 pCi/l</b>	4,000 pCi/l	4,000 pCi/l	Erosion of natural deposits.

## Lead/Copper

COPPER 90TH% VALUE (4)	7/1/2023 - 12/31/2023	<b>0.451 ppm</b> Range (0.023-0.83 ppm)	AL = 1.3 ppm	1.3 ppm	Corrosion of household plumbing systems.
LEAD 90TH% VALUE (4)	7/1/2023 - 12/31/2023	<b>39.3 ppb</b> Range (0-129 ppb)	AL = 15 ppb	0 ppb	Corrosion of household plumbing systems.

## Disinfectants and Disinfection Byproducts

### DISTRIBUTION SYSTEM

TOTAL HALOACETIC ACIDS (HAA5) (9)	LRAA (2023)	<b>138 ppb</b> Range (39-375 ppb)	60 ppb	0 ppb	By-product of drinking water chlorination.
TOTAL TRIHALOMETHANE (TTHM) (9)	LRAA (2023)	<b>74 ppb</b> Range (28-182 ppb)	80 ppb	0 ppb	By-product of drinking water chlorination.

## Chlorine Residual (Add chlorine residual information)

CHLORINE RESIDUAL	Range (____ - ____ ppm)	MRDL=4 ppm	MRDLG= 4 ppm	By-product of drinking water chlorination.
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## Turbidity (Add turbidity information, highest monthly reading in 2023)

TURBIDITY	_____ NTU	5 ntu	N/A	Soil runoff.
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### Notes:

- 1) Total Coliform Bacteria: Reported as the highest monthly number of positive samples, for water systems that take less than 40 samples per month.
- 2) E. Coli: E. coli are bacteria whose presence indicates that the water may be contaminated with human or animal wastes. Human pathogens in these wastes can cause short-term effects, such as diarrhea, cramps, nausea, headaches, or other symptoms. They may pose a greater health risk for infants, young children, the elderly, and people with severely-compromised immune systems.
- 3) Fluoride: For those systems that fluoridate, fluoride levels must be maintained between 0.5 to 1.2 ppm. The optimum level is 0.7 ppm.
- 4) Lead/Copper: Action levels (AL) are measured at consumer's tap. 90% of the tests must be equal to or below the action level.
- 5) Nitrate: Nitrate in drinking water at levels above 10 ppm is a health risk for infants of less than six months of age. High nitrate levels in drinking water can cause blue baby syndrome. Nitrate levels may rise quickly for short periods of time because of rainfall or agricultural activity. If you are caring for an infant you should ask advice from your health provider.
- 6) Arsenic: While your drinking water may meet EPA's standard for Arsenic, if it contains between 5 to 10 ppb you should know that the standard balances the current understanding of arsenic's possible health effects against the costs of removing it from drinking water. EPA continues to research the health effects of low levels of arsenic, which is a mineral known to cause cancer in humans at high concentrations and is linked to other health effects such as skin damage and circulatory problems. Quarterly compliance is based on running annual average.
- 7) Gross Alpha: Action level over 5 pCi/L requires testing for Radium 226 and 228. Action level over 15 pCi/L requires testing for Uranium. Compliance is based on Gross Alpha results minus Uranium results = Net Gross Alpha.
- 8) Radon: The State of Maine adopted a Maximum Exposure Guideline (MEG) for Radon in drinking water at 4000 pCi/L, effective 1/1/07. If Radon exceeds the MEG in water, treatment is recommended. It is also advisable to test indoor air for Radon.

9) TTHM/HAA5: Total Trihalomethanes and Haloacetic Acids (TTHM and HAA5) are formed as a by-product of drinking water chlorination. This chemical reaction occurs when chlorine combines with naturally occurring organic matter in water. Compliance is based on running annual average.

10) PFAS: The degree of risk depends on the level of chemicals and duration of exposure. Laboratory studies of animals exposed to high doses of PFAS have shown numerous negative effects such as issues with reproduction, growth and development, thyroid function, immune system, neurology, as well as injury to the liver. Research is still relatively new, and more needs to be done to fully assess exposure effects on the human body.

**All other regulated drinking water contaminants were below detection levels.**

**Secondary Contaminants (You are not required to list detects for secondary contaminants, but this information, particularly sodium levels, might be useful to your customers. The decision to supply this information in your CCR is up to you.)**

SULFATE	16 ppm	11/22/2023
IRON	0.096 ppm	11/22/2023
MAGNESIUM	4.8 ppm	11/22/2023
MANGANESE	0.0876 ppm	11/22/2023
SODIUM	7.1 ppm	11/22/2023

## Health Information

Drinking water, including bottled water, may reasonably be expected to contain at least small amounts of some contaminants. The presence of contaminants does not necessarily indicate that water poses a health risk.

Contaminants that may be present in source water include:

**Microbial contaminants**, such as viruses and bacteria, which may come from sewage treatment plants, septic systems, agricultural livestock operations, and wildlife.

**Inorganic contaminants**, such as salts and metals, which can be naturally occurring or result from urban stormwater runoff, industrial or domestic wastewater discharges, oil and gas production, mining, or farming.

**Pesticides and herbicides**, which may come from a variety of sources such as agriculture, urban stormwater runoff, and residential uses.

**Organic chemical contaminants**, including synthetic and volatile organic chemicals, which are by-products of industrial processes and petroleum production and can also come from gas stations, urban runoff, and septic systems.

**Radioactive Contaminants**, which can be naturally-occurring or be the result of oil and gas production and mining activities.

Some people may be more vulnerable to contaminants in drinking water than the general population. Immuno-compromised persons such as persons with cancer undergoing chemotherapy, persons who have undergone organ transplants, people with HIV/AIDS or other immune system disorders, some elderly, and infants can be particularly at risk from infections. These people should seek advice about drinking water from their health care providers.

EPA/CDC guidelines on appropriate means to lessen the risk of infection by Cryptosporidium and other microbial contaminants are available from the Safe Drinking Water Hotline (1-800-426-4791) or at the following link:

<https://www.epa.gov/ccr/forms/contact-us-about-consumer-confidence-reports>

If present, elevated levels of lead can cause serious health problems, especially for pregnant women and young children. Lead in drinking water is primarily from materials and components associated with service lines and home plumbing. Sugarloaf Water Association is responsible for providing high quality drinking water, but cannot control the variety of materials used in plumbing components. When your water has been sitting for several hours, you can minimize the potential for lead exposure by flushing your tap for 30 seconds to 2 minutes before using water for drinking or cooking. If you are concerned about lead in your water, you may wish to have your water tested.

Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available from the Safe Drinking Water Hotline or at the following link:

<http://www.epa.gov/safewater/lead>

## Violations

Violation Period	Violation Type
7/1/2023 - 9/30/2023	02 Violation - MCL, AVERAGE TOTAL HALOACETIC ACIDS (HAA5) DIST SYS
10/1/2023 - 12/31/2023	02 Violation - MCL, AVERAGE TOTAL HALOACETIC ACIDS (HAA5) DIST SYS
7/1/2023 -	71 Violation - CCR REPORT CONSUMER CONFIDENCE RULE
1/1/2023 - 6/30/2023	SE Violation - STATE EXCEEDANCE LEAD SUMMARY DIST SYS
7/1/2023 - 12/31/2023	SE Violation - STATE EXCEEDANCE LEAD SUMMARY DIST SYS

Lead & Copper Action Level Exceedance: In 2023, routine sampling detected (lead/copper) in excess of the maximum level allowed. \_\_\_\_\_ out of \_\_\_\_\_ sites sampled, exceeded the action level for (lead/copper). Drinking water regulations require that samples are taken from homes with a high risk potential for lead/copper in the plumbing. The following were action steps we were required to take and the dates those actions were completed: Distribute public lead/copper education material to all residents (Done on \_\_\_\_\_); Submit a corrosion control plan to the State Drinking Water Program (Done on \_\_\_\_\_). Our plan we submitted to reduce the corrosivity of the water (or reduce lead/copper levels) involves: \_\_\_\_\_ We have to fully implement/complete our plan by \_\_\_\_\_.

Lead/copper sampling will resume in \_\_\_\_\_. Results of subsequent future lead/copper testing will be made available to all residents. Lead Health Effects: Exposure to lead in drinking water can cause serious health effects in all age groups. Infants and children can have decreases in IQ and attention span. Lead exposure can lead to new learning and behavior problems or exacerbate existing learning and behavior problems. The children of women who are exposed to lead before or during pregnancy can have increased risk of these adverse health effects. Adults can have increased risks of heart disease, high blood pressure, kidney or nervous system problems. Infants and children who drink water containing lead in excess of the action level could experience delays in their physical or mental development. Children could show slight deficits in attention span and learning abilities. Adults who drink this water over many years could develop kidney problems or high blood pressure. Copper Health Effects: Copper is an essential nutrient, but some people who drink water

containing copper in excess of the action level over a relatively short time could experience gastrointestinal distress, or suffer liver or kidney damage. People with Wilson's Disease should consult their doctor.

As a community public water system, we are required to provide a consumer confidence report to our customers on an annual basis. The consumer confidence report provides customers with information regarding the source and quality of the drinking water supplied to them as well as information on any violations that occurred during that time period. In \_\_\_\_\_, we failed to distribute our consumer confidence report to our customers. To correct this issue, the \_\_\_\_\_ CCR has been or will be distributed.

Haloacetic Acids (HAA5) MCL Violation: In 2023, our water system exceeded the MCL for HAA5. The MCL is based on the running annual average (RAA) of four quarter's worth of sample data. HAA5 is formed as a by-product of drinking water chlorination. This chemical reaction occurs when chlorine combines with naturally occurring organic matter in water. The results of these tests revealed levels for HAA5 in excess of 60 ppb MCL . We are in the process of exploring the various options to reduce HAA5 in your water supply. Some people who drink water containing HAA5 in excess of the MCL over many years may have an increased risk of getting cancer or could experience nervous system or liver damage.

### **Waiver Information (to be included in the CCR for systems that were granted a waiver)**

In 2023, our system was granted a 'Synthetic Organics Waiver.' This is a three year exemption from the monitoring/reporting requirements for the following industrial chemical(s): TOXAPHENE/CHLORDANE/PCB, HERBICIDES, CARBAMATE PESTICIDES, SEMIVOLATILE ORGANICS. This waiver was granted due to the absence of these potential sources of contamination within a half mile radius of the water source(s).

# Maine Drinking Water Program

## Consumer Confidence Report Certification Form

**PWSID#:** ME0091690 **Water System Name:** SUGARLOAF WATER ASSOCIATION

**INSTRUCTIONS:**

1. Distribute copies of your Consumer Confidence Report (CCR) to all users served by your public water system **by JULY 1<sup>ST</sup>**.
2. Use the checklist below to check off which methods you use to distribute your CCR- you **MUST** select **AT LEAST ONE** option from **EACH** of the two columns below.
3. Please complete the certification section below and submit it, along with a copy of the CCR you distributed to customers, to the Maine Drinking Water Program **before OCTOBER 1<sup>ST</sup>**.

**Primary Method of Distribution** (you **MUST** use **at least one (1)** of these methods)

**Direct Delivery Method- to get report to each customer**

CHECK IF USED	METHOD	ADDITIONAL INFO
<input type="checkbox"/>	Mail hard copy	
<input type="checkbox"/>	Hand deliver	
<input type="checkbox"/>	Mail notice that CCR is available on website- <b>MUST</b> include a direct URL ( <u>CCR MUST open when url is clicked</u> )	Provide url: _____ <b>Attach copy of notice (i.e. bill)</b>
<input type="checkbox"/>	Email the direct URL	<b>Attach copy of email</b>
<input checked="" type="checkbox"/>	Email the CCR as a file attachment	<b>Attach copy of email</b>
<input type="checkbox"/>	Email CCR in message	<b>Attach copy of message</b>

**AND**

**Secondary Method of Distribution** (you **MUST** use **at least one (1)** of these methods\*)

**Good Faith Effort to reach non-bill-paying consumers**

CHECK IF USED	METHOD	ADDITIONAL INFO
<input type="checkbox"/>	Do a postal patron mailing with service area	<b>Provide zip codes used in postal patron mailing</b>
<input type="checkbox"/>	Deliver multiple copies to single bill addresses serving several people- i.e. apartment buildings, businesses, large private employers	<b>Provide list of business/facilities receiving copies</b>
<input type="checkbox"/>	Posting on internet at URL	Provide url: _____
<input checked="" type="checkbox"/>	Post the CCR in public places	<b>Provide a list of where posted</b>
<input type="checkbox"/>	Publication of CCR in local newspaper	<b>Provide copy of newspaper notice</b>
<input type="checkbox"/>	Advertising availability of CCR in news media	<b>Provide copy of announcement</b>
<input type="checkbox"/>	Deliver to community organizations	<b>Provide list of facilities</b>
<input type="checkbox"/>	Availability of paper copy	<b>Provide method of sharing this info</b>
<input type="checkbox"/>	Population <500-complete delivery by 1 <sup>st</sup> method	Only if you provided 100% distribution to all consumers by your 1 <sup>st</sup> method & population served is below 500

**Certification of Distribution and Accuracy of Consumer Confidence Report (CCR)**

I certify that the information in the attached CCR contains all data and required language found in the Fillable CCR provided by the Drinking Water Program and that the CCR was distributed by July 1<sup>st</sup> by the methods noted above.

Name of licensed designated operator: \_\_\_\_\_  
*Please print*

Signature: *Ryan Hatley* Date: \_\_\_\_\_ **(DO NOT PRE-DATE)**

**Date CCR distribution completed:** \_\_\_\_\_ **(DO NOT PRE-DATE)**

EMAIL COPY OF CCR, COMPLETED CERTIFICATION & ACCOMPANYING DOCS TO [DWPMOR@maine.gov](mailto:DWPMOR@maine.gov) OR MAIL TO: MAINE DRINKING WATER PROGRAM, 11 STATE HOUSE STATION, 286 WATER STREET, AUGUSTA, ME 04333-0011