We're pleased to present to you our Annual Drinking Water Quality Report, also known as the Consumer Confidence Report. This report, a requirement of the 1996 amendments to the Safe Drinking Water Act, is designed to inform you about the quality water and services we deliver to you every day. Our constant goal is to provide you with a safe and dependable supply of drinking water. We want you to understand the efforts we make to continually improve the water treatment process and protect our water resources. We are committed to ensuring the quality of your water.

WATER SOURCE
Our water source is a 43-foot drilled well located in front of the owner’s home. Our well, which serves a population of 80, is treated with chlorine for disinfection.

SOURCE WATER ASSESSMENT
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 public water suppliers, town offices, and the DWP. For more information about the SWAP, please contact the DWP at telephone 207-287-2070.

If you have any questions about this report or concerning your water system, please contact Adam Walton at 322 Washburn Road, Presque Isle, ME 04769 or 207-768-1020. We want our valued residents to be informed about their water system. If you want to learn more, please contact us about the time and place of regularly scheduled meetings.

WATER QUALITY
Pine Village routinely monitors for contaminants in your drinking water according to Federal and State laws. The following table shows any detection resulting from our monitoring for the period of January 1st to December 31st, 2018.

In 2018, due to efforts to protect the water supply, 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): herbicides, carbamate pesticides, toxaphene/chlordane/PCB and 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.

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. All sources of drinking water are subject to potential contamination by substances that are naturally occurring or man-made. Contaminants that may be present in source water include:

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

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

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

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

**Radioactive contaminants** can be naturally-occurring or be the result of oil and gas production and mining activities.
In order to ensure that tap water is safe to drink, U.S. Environmental Protection Agency (EPA) prescribes regulations which limit the amount of certain contaminants in water provided by public water systems. U.S. Food and Drug Administration (FDA) regulations establish limits for contaminants in bottled water which must provide the same protection for public health.

The table below lists all of the drinking water contaminants that were detected throughout water quality monitoring and testing. The presence of contaminants in the water does not necessarily indicate that the water poses a health risk.

<table>
<thead>
<tr>
<th>Contaminant</th>
<th>Level Detected</th>
<th>Unit Measurement</th>
<th>MCLG</th>
<th>MCL</th>
<th>Likely Source of Contamination</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Microbiological Contaminants</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Total Coliform Bacteria</td>
<td>0 positive</td>
<td>Highest monthly # of positive samples</td>
<td>0 positive</td>
<td>1 pos/mo or 5% (e. coli)</td>
<td>Naturally present in the environment.</td>
</tr>
<tr>
<td><strong>Radioactive Contaminants</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Combined Uranium (3/17/15)</td>
<td>0.93</td>
<td>ppb</td>
<td>0</td>
<td>30</td>
<td>Erosion of natural deposits.</td>
</tr>
<tr>
<td>Radium-228 (4/7/15)</td>
<td>0.371</td>
<td>pCi/L</td>
<td>0</td>
<td>5</td>
<td>Erosion of natural deposits.</td>
</tr>
<tr>
<td>Uranium-238 (5/29/18)</td>
<td>1.2</td>
<td>ppb</td>
<td>0</td>
<td>30</td>
<td>Erosion of natural deposits.</td>
</tr>
<tr>
<td><strong>Inorganic Contaminants</strong></td>
<td></td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Barium (5/29/18)</td>
<td>0.12</td>
<td>ppm</td>
<td>2</td>
<td>2</td>
<td>Discharge of drilling wastes. Discharge from metal refineries. Erosion of natural deposits.</td>
</tr>
<tr>
<td>Copper (1/1/16-12/31/18)</td>
<td>0.0056</td>
<td>ppm</td>
<td>1.3</td>
<td>AL=1.3</td>
<td>Corrosion of household plumbing systems.</td>
</tr>
</tbody>
</table>

* = Reported results are the 90th percentile value (the value that 90% of all samples are less than).

**Note:** The state allows us to monitor for some contaminants less than once per year because the concentrations of these contaminants do not change frequently. Not all contaminants are tested for every year due to monitoring waivers and therefore we must use the most recent round of sampling. Some of our data is more than one year old, however, is limited to no older than 5 years.

**Definitions:**
- **Action Level (AL)** - The concentration of a contaminant which, if exceeded, triggers treatment or other requirements which a water system must follow.
- **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.
- **Maximum Contaminant Level (MCL)** - is the highest level of a contaminant that is allowed in drinking water. MCLs are set as close to the MCLGs as feasible using the best available treatment technology.
- **Maximum Contaminant Level Goal (MCLG)** - is the level of a contaminant in drinking water below which there is no known or expected risk to health. MCLGs allow for a margin of safety.
- **Maximum Residual Disinfection 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 Disinfection 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.
- **Not Applicable (N/A)** - Does not apply
- **Running Annual Average (RAA)** – A 12 month rolling average of all monthly or quarterly samples at all locations. Calculations of the RAA may contain data from the previous year.
- **Treatment Technique (TT)** - A required process intended to reduce the level of a contaminant in drinking water (e.g. treatment technique for turbidity).
- **Variances, Exemptions, and Waivers** - State or EPA permission not to meet an MCL, a treatment technique or test for a given contaminant under certain conditions.

**Units:**
- ppm = parts per million or milligrams per liter (mg/L).
- ppb = parts per billion or micrograms per liter (µg/L).
- pCi/L = picocuries per liter (a measure of radioactivity).
- pos = positive samples.
- MFL = million fibers per liter

**Notes:**
- **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.
- **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.
- **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.
**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.

**Lead/Copper** - Action levels (AL) are measured at consumer’s tap. 90% of the tests must be equal to or below the action level.

**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.

**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.

**Total Coliform Bacteria** - Reported as the highest monthly number of positive samples, for water systems that take less than 40 samples per month.

**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.

**IMPORTANT INFORMATION**

Since our system chlorinates its water, we are required to report our annual average for chlorine residual. **Chlorine Residual** was found to be 0.9 ppm, with a range of 0.3 ppm to 1.5 ppm.

**VIOLATIONS**

<table>
<thead>
<tr>
<th>Violation Period</th>
<th>Violation Type</th>
</tr>
</thead>
<tbody>
<tr>
<td>1/1/17 – 12/31/19</td>
<td>27 Violation – PUBLIC NOTICE, MOINTORING, ROUTINE (DBP), TTHM/HAAAC-STAGE 2 DIST SYS</td>
</tr>
<tr>
<td>6/1/18 – 9/30/18</td>
<td>66 Violation - LEAD CONSUMER NOTICE (LCR) LEAD &amp; COPPER RULE</td>
</tr>
</tbody>
</table>

We are required to monitor our drinking water for specific contaminants on a regular basis. Results of regular monitoring indicate whether or not our drinking water meets health standards. During 2017, we did not test for Total Trihalomethanes (TTHM) and/or Haloacetic Acids (HAA5) and we failed to provide public notice to customers in a timely fashion.

We are required to notify any customer who participated in our lead/copper testing of their individual lead results. In 2018, we failed to provide this information to our customers.

All 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 the water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the Environmental Protection Agency’s Safe Drinking Water Hotline at 1-800-426-4791.

For most people, the health benefits of drinking plenty of water outweigh any possible health risk from these contaminants. However, 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/Center of Disease Control (CDC) guidelines on appropriate means to lessen the risk of infection by cryptosporidium and other microbiological contaminants are available from the Safe Drinking Water Hotline (800-426-4791) or at [https://www.epa.gov/ccr/forms/contact-us-about-consumer-confidence-reports](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. We are 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 thirty (30) seconds to two (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 [http://www.epa.gov/safewater/lead](http://www.epa.gov/safewater/lead).

We, at Pine Village, work hard to provide top quality water to every tap. We ask that all our customers help us protect and preserve our drinking water resources, which are the heart of our community, our way of life, and our children’s future. Please contact us with any questions. Thank you for working together for safe drinking water.