2018 Consumer Confidence Report

Franklin Pierce University PWS # 1994010

What is a Consumer Confidence Report?

The Consumer Confidence Report (CCR) details the quality of your drinking water, where it comes from, and where you can get more information. This annual report documents all detected primary and secondary drinking water parameters, and compares them to their respective standards known as Maximum Contaminant Levels (MCLs).



The sources of drinking water (both tap water and bottled water) include rivers, lakes, streams, ponds, reservoirs, springs, and wells. As water travels over the surface of the land or through the ground, it dissolves naturally-occurring minerals and, in some cases, radioactive material, and can pick up substances resulting from the presence of animals or from human activity.

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 storm water 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 byproducts of industrial processes and petroleum production, and can also come from gas stations, urban storm water runoff, and septic systems.

Radioactive contaminants, which can be naturallyoccurring or be the result of oil and gas production and mining activities.

In order to ensure that tap water is safe to drink, EPA prescribes regulations which limit the amount of certain contaminants in water provided by public water systems. The US Food and Drug Administration (FDA) regulations establish limits for contaminants in bottled water which must provide the same protection for public health.

What is the source of my drinking water?

Franklin Pierce University obtains its water from 4 bedrock wells. Your water is then treated to remove iron and manganese with a water softener system, and sodium hypochlorite is added for disinfection. Treated water is stored in a 500,000-gallon atmospheric storage tank which is connected to the distribution system pipes.

Why are contaminants in my water? 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. 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.

Do I need to take special precautions? 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 at 1-800-426-4791.

Source Water Assessment Summary

DES prepared drinking water source assessment reports for all public water systems between 2000 and 2003 in an effort to assess the vulnerability of each of the state's public water supply sources. Included in the report is a map of each source water protection area, a list of potential and known contamination sources, and a summary of available protection options. The results of the assessment, prepared during 2002, are noted below.

Wells in use:

Well	High	Medium	Low
800	0	2	10
012		not rated	
013		not rated	
014		not rated	

Note: This information is over 10 years old and includes information that was current at the time the report was completed. Therefore, some of the ratings might be different if updated to reflect current information. At the present time, DES has no plans to update this data but we are required to present it in this report.

The complete Assessment Report is available for review at FPU Water Treatment Facility. For more information, call Joseph P. Damour at 899-4012 or visit the DES Drinking Water Source Assessment website at

http://des.nh.gov/organization/divisions/water/d wgb/dwspp/dwsap.htm.

How can I get involved?

Contact the Facilities Department at 899-4120 with questions about water related issues. Franklin Pierce University has contracted WSO Plus, Inc. to provide trained and certified professional operators.

Violations and Other information:

DBP Report was not submitted by 6/31/2017. To correct this violation, the report was completed and submitted.

Definitions

Ambient Groundwater Quality Standard or **AGQS**: The maximum concentration levels for contaminants in groundwater that are established under RSA 485-C, the Groundwater Protection Act.

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

Level I Assessment: A study of the water system to identify potential problems and determine, if possible, why total coliform bacteria have been found in our water system.

Level II Assessment: A very detailed study of the water system to identify potential problems and determine, if possible, why an E.coli MCL violation has occurred and/or why total coliform bacteria have been found in our water system on multiple occasions.

Maximum Contaminant Level or **MCL**: 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 or **MCLG**: 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 Disinfectant Level or **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 or 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 or **TT:** A required process intended to reduce the level of a contaminant in drinking water.

Abbreviations

BDL: Below Detection Limit mg/L: milligrams per Liter NA: Not Applicable ND: Not Detectable at testing limits NTU: Nephelometric Turbidity Unit pCi/L: picoCurie per Liter ppb: parts per billion ppm: parts per million RAA: Running Annual Average TTHM: Total Trihalomethanes UCMR: Unregulated Contaminant Monitoring Rule ug/L: micrograms per Liter

Drinking Water Contaminants:

Lead: 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. This water system is responsible for high quality drinking water, but can not control the variety of materials used in your plumbing components. When your water has been sitting for several hours, you can minimize the potential for lead exposure by flushing cold water from your tap for at least 30 seconds before using water for drinking or cooking. Do not use hot water for drinking and 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://water.epa.gov/drink/info/lead/index.cfm

System Name: Franklin Pierce University PWS ID: 1994010

2018 Report (2017 data)

LEAD AND COPPER									
Contaminant (Units)	Action Level	90 th percentile sample value *	Date	# of sites above AL	Violation Yes/No	Likely Source of Contamination	Health Effects of Contaminant		
Copper (ppm)	1.3	1.1	2015	1	No	Corrosion of household plumbing systems; erosion of natural deposits; leaching from wood preservatives	Copper is an essential nutrient, but some people who drink water containing copper in excess of the action level over a relatively short amount of time could experience gastrointestinal distress. Some people who drink water containing copper in excess of the action level over many years could suffer liver or kidney damage. People with Wilson's Disease should consult their personal doctor.		
Lead (ppb)	15	8	2015	0	No	Corrosion of household plumbing systems, erosion of natural deposits	(15 ppb in more than 5%) Infants and young children are typically more vulnerable to lead in drinking water than the general population. It is possible that lead levels at your home may be higher than at other homes in the community as a result of materials used in your home's plumbing. If you are concerned about elevated lead levels in your home's water, you may wish to have your water tested and flush your tap for 30 seconds to 2 minutes before using tap water. Additional information is available from the Safe Drinking Water Hotline (800-426-4791). (above 15 ppb) 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.		

DETECTED WATER QUALITY RESULTS							
Contaminant (Units)	Level Detected*	MCL	MCLG	Violation YES/NO	Likely Source of Contamination	Health Effects of Contaminant	
Radioactive Contaminants							
Compliance Gross Alpha (pCi/L)	2.3 Sampled 9/16/2013	15	0	No	Erosion of natural deposits	Certain minerals are radioactive and may emit a form of radiation know as alpha radiation. Some people who drink water containing alpha emitters in excess of the MCL over many years may have an increased risk of getting cancer.	
Uranium (ug/L)	7.4 Sampled 9/16/2013	30	0	No	Erosion of natural deposits	Some people who drink water containing uranium in excess of the MCL over many years may have an increased risk of getting cancer and kidney toxicity.	
Combined Radium 226 + 228 (pCi/L)	3.2 Sampled 9/16/2013	5	0	No	Erosion of natural deposits	Some people who drink water containing radium 226 or 228 in excess of the MCL over many years may have an increased risk of getting cancer.	

Inorganic Contan	ninants					
Arsenic (ppb)	1 Sampled 1/5/2015	10	0	No	Erosion of natural deposits; runoff from orchards; runoff from glass and electronics production wastes	(5 ppb through 10 ppb) While your drinking water meets EPA's standard for arsenic, it does contain low levels of arsenic. EPA's standard balances the current understanding of arsenic's possible health effects against the costs of removing arsenic 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. (above 10 ppm) Some people who drink water containing arsenic in excess of the MCL over many years could experience skin damage or problems with their circulatory system, and may have an increased risk of getting cancer.
Barium (ppm)	0.004 Sampled 1/5/2015	2	2	No	Discharge of drilling wastes; discharge from metal refineries; erosion of natural deposits	Some people who drink water containing barium in excess of the MCL over many years could experience an increase in their blood pressure.
Chlorine (ppm)	Range 0 to 2.09 Average: 0.65	MRDL = 4	MRDLG = 4	No	Water additive used to control microbes	Some people who use water containing chlorine well in excess of the MRDL could experience irritating effects to their eyes and nose. Some people who drink water containing chlorine well in excess of the MRDL could experience stomach discomfort.
Fluoride (ppm)	0.4 Sampled 1/5/2015	4	4	No	Erosion of natural deposits; water additive which promotes strong teeth; discharge from fertilizer and aluminum factories	Some people who drink water containing fluoride in excess of the MCL over many years could get bone disease, including pain and tenderness of the bones. Fluoride in drinking water at half the MCL or more may cause mottling of children's teeth, usually in children less than nine years old. Mottling also known as dental fluorosis, may include brown staining and/or pitting of the teeth, and occurs only in developing teeth before they erupt from the gums.
Haloacetic Acids (HAA) (ppb)	Range = 15.6 to 30 Sampled 2017	60	NA	No	By-product of drinking water disinfection	Some people who drink water containing haloacetic acids in excess of the MCL over many years may have an increased risk of getting cancer.
Methyl tertiary- butyl ether (MtBE) (ppb)	Range = ND to 3.6 Sampled 2017	13	13	No	A gasoline additive	The New Hampshire Bureau of Health Risk Assessment considers MtBE a possible human carcinogen. Some people who drink water containing MtBE in excess of the MCL over many years could experience problems with their kidneys and may have an increased risk of getting cancer.
Total Trihalomethanes (TTHM) (Bromodichloro- methane Bromoform Dibromomethane Chloroform) (ppb)	Range 29.8 to 35.1 Sampled 2017	100/80	N/A	No	By-product of drinking water chlorination	Some people who drink water containing trihalomethanes in excess of the MCL over many years may experience problems with their liver, kidneys, or central nervous systems, and may have an increased risk of getting cancer.

ADDITIONAL TESTING							
Additional Tests & Secondary MCLs (SMCL)	Results	Date	Treatment technique (if any)	AL (Action Level), SMCL or AGQS (Ambient groundwater quality standard)	Specific contaminant criteria and reason for monitoring		
Chloride (ppm)	29	Sampled 1/5/2015	N/A	250	We are required to regularly sample for Chloride		
Iron (ppm)	2.3	Sampled 1/5/2015	Ion Exchange	0.3	We are required to regularly sample for Iron		
Maganese (ppm)	0.058	Sampled 1/5/2015	Ion Exchange	0.05	We are required to regularly sample for Manganese		
Sulfate (ppm)	12	Sampled 1/5/2015		250	We are required to regularly sample for sulfate		
Sodium (ppm)	33	Sampled 1/5/2015		100-250	We are required to regularly sample for sodium		

VIOLATIONS								
VIOLATIONS	Date of	ExplainReturnedAction taken toHealth Effects (Env-Dw 804-810)						
	violation	violation	То	resolve				
			Compliance					
DBP M/R	12/19/2017	DBP Report was	1/17/2018	DPB Report was	N/A			
		not submitted by		completed and				
		6/31/2017		submitted				