

# 2018 WATER QUALITY REPORT

# CITY OF CASHMERE WATER SYSTEM #117000

In 2018 the City of Cashmere Water Department conducted dozens of tests to monitor the quality of your drinking water. We test for over 64 drinking water contaminants. **The Cashmere Water System had no violations**. This brochure is a snapshot of the quality of the water we provided to you last year. Included are details about where your water comes from, what it contains, and how it compares to the Environmental Protection Agency (EPA) and state standards. We are committed to providing you with this information because informed customers are our best allies. For more information about your water, call 782-3513 and ask for Bruce Germain.



#### **Espanol**

Este informe contiene informacion muy importante sobre la calidad de su agua potable. Por favor lea este informe o comuniquese con alguien que pueda traducir la informacion.

#### Where does my water come from?



Your water comes from the Wenatchee River and two municipal wells, one located on Paton Street and one at the airport. The Wenatchee River supplies approximately 80% of the drinking water. The remaining 20% of the supply comes from the groundwater wells. Water from the Wenatchee River is pumped into a slow sand filtration system that removes dirt, debris and other suspended particles. Besides the sand acting as a filter, it also acts as a home for living organisms that consume impurities in the water. After this filtration process, the water is chlorinated to remove any harmful bacteria.

#### Is my water safe?

Last year, as in years past, your tap water met all U.S. Environmental Protection Agency (EPA) and state drinking water health standards. The City of Cashmere diligently safeguards its water supply and once again we are proud to report that our system has not violated a maximum contaminant level or any other water quality standard.

# 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. The 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 (800-426-4791).

# Why are there 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 the water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the EPA's Safe Drinking Water Hotline (1-800-426-4791).

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.

#### **Water Quality Report**

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, that can be naturally-occurring or result from urban storm water runoff, industrial or domestic wastewater discharges, oil and gas production, mining, or farming.
- 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 naturally occurring.

#### **NITRATES**

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 for advice from your health care provider

In order to ensure that tap water is safe to drink, the EPA prescribes regulations which limit the amount of certain contaminants in water provided by public water systems. We treat our water according to the EPA's regulations. Food and Drug Administration regulations establish limits for contaminants in bottled water that must provide the same protection for public health.

### CONSERVATION—What Can You Do?



Be aware of your water uses and consider water conservation measures. Indoors, watch for water losses such as dripping faucets or leaking toilet valves. Even small leaks waste large volumes over time which costs you money. Also consider water saving fixtures and appliances. The cost of these upgrades can be recouped over time in water savings. To conserve water outside you might consider cutting back on irrigation. Where you have plantings, monitor soil moisture, and where appropriate, cut back on water use. You may also consider low maintenance landscaping that requires little or no irrigation.

# DRINKING WATER REGULATIONS

To ensure that tap water is safe to drink, the Department of Health and EPA prescribe regulations that limit the amount of certain contaminants in water provided by public water systems. The Food and Drug Administration (FDA) and the Washington Department of Agriculture regulations establish limits for contaminants in bottled water that must provide the same protection for public health.

# LEAD & COPPER TESTING

Every three years testing is done for lead and copper. Ten samples were drawn from different locations and all were below the regulatory action levels of lead .015 mg/L and copper of 1.3 mg/L.

#### **Water Quality Report**

#### **Water Quality Data**

The table below lists some of the drinking water contaminants that were tested for during 2018. The presence of these contaminants in the water does not indicate that the water poses a health risk.

Source	Substance	Danill	11	Mal	MCLG/	Sample		
Source	Substance	Result	Units	MCL	MRDLG	Date	Violation	Likely Sources
S-04	Nitrites	<0.07	mg/L	1.0	0	2017	NO	Natural elements decaying
S-04	Nitrates	3.01	mg/L	10	10	2017	NO	Erosion of natural deposits, Fertilizer runoff
Cemetery	Trihalomethane	8.4*	mg/L	80	N/A	Quarterly	NO	Disinfection by-products
Cemetery	Haloacetic Acid	7.14*		60	N/A	Quarterly	NO	Disinfection by-products
BVF	Trihalomethane	14.49*	ug/L	80	N/A	Quarterly	NO	Disinfection by-products
BVF	Haloacetic Acid	13.75*	ug/L	60	N/A	Quarterly	NO	Disinfection by-products

<sup>\*</sup> Average of quarterly samples

In 2018 the City tested for Coliform Bacteria 48 times, all samples came back negative. The city tested for Volatile Organic Chemicals (VOC), all 46 chemicals tested came back under the MCL.

Complete Test results may be viewed by request at Cashmere City Hall, 101 Woodring St., Cashmere, WA 98815 or by calling 782-3513 and asking for Bruce Germain.

#### **Terms and Abbreviations**

**Maximum Contaminant Level (MCL):** The highest level of a contaminant that is allowed in drinking water. Set as close to MCLGs as feasible using the best treatment technology. Secondary MCLs are set to protect the odor, taste, and appearance of drinking water.

**Maximum Contaminant Level Goal (MCLG)**: The level of a contaminant in drinking water, for which there is no known or expected risk to health. The U.S. Environmental Protection Agency (EPA) sets MCLGs.

**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.

pCi/L: picocuries per liter (a measure of radiation)

**ppb**: parts per billion or micrograms per liter (ug/L)

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

SRL—State Reporting Level MCL—Maximum Contaminant Level ND—None Detected CM—Cemetery S-04—Well #4 S-10—Well #10 BVF-Pretreatment Plant L-4—309 Independence H-2—Well #10

## **BACKFLOW PREVENTION**

An important component of the protection of our drinking water is backflow prevention. Backflow occurs when low pressure in the City's water mains causes water to be drawn from lawn sprinkler systems, and commercial enterprises such as dentist offices, breweries, fire suppression systems, etc. into the City water system.

**ALL** underground sprinkler systems are required to have a state-approved and correctly installed backflow assembly to prevent contamination of the drinking water.

Each assembly must be tested annually to ensure proper operation and the test results submitted to the city. The City maintains a database of installed assemblies and test results.

#### WATER USE EFFICIENCY

In 2018 the City continued to work with businesses and residents to locate and fix water leaks in their systems in order to help keep water loss to a minimum and also keep their water costs down.

Washington State mandates that water systems maintain less than 10% water loss. Loss for 2018 was 4.60% making Cashmere's three year average 4.8%. As a City we work hard to stay on top of water leaks and repair them in a timely fashion.

Cashmere water consumers are encouraged to continue to conserve water by planting low-water landscaping and using other conservation measures. The city water rate tiers are in place to encourage water conservation.