

## Table of Contents: The Plan

Introduction: Protecting Public Health .....	i
How to use the template .....	i
Section A: Emergency Response Objectives.....	A-1
Section B: What to Do in Case of an Emergency.....	B-1
Section C: Emergency Operations Checklists and Threat Confirmation Checklist .....	C-1
Emergency Operations Checklists .....	C-1
Threat Confirmation Checklist.....	C-5
Section D: System Information .....	D-1
Section E: Lines of Authority.....	E-1
Internal Contacts.....	E-1
External Contacts .....	E-3
Section F: Responding to Emergency Events.....	F-1
Checklist: Responding to a Power Outage.....	F-1
Table: Responding to a Power Outage .....	F-2
Checklist: Responding to a Loss in Pressure .....	F-3
Table: Responding to a Loss in Pressure.....	F-4
Checklist: Responding to Flooding.....	F-5
Table: Responding to Flooding .....	F-6
Checklist: Responding to Contamination .....	F-7
Table: Responding to Contamination .....	F-8

*Continued on next page ►►*

Section G: Emergency Public Notification .....	G-1
Critical Customers and Contacts .....	G-1
Public Notice for Drinking Water Order: Boil Water for Loss of Pressure .....	G-4
Public Notice for Drinking Water Order: Boil Water for Presence of E. coli .....	G-5
Public Notice for Drinking Water Order: Boil Water for Presence of Total Coliform bacteria .....	G-6
Public Notice for Drinking Water Order: Do Not Drink.....	G-7
Public Notice for Drinking Water Order: Do Not Use.....	G-8
Public Notice for Drinking Water Order: Do Not Give Water to Infants.....	G-9
Sample Press Release.....	G-10
Section H: Assessing Vulnerabilities .....	H-1
Equipment and Spare Parts Inventory .....	H-1
Service Contractors and Supply Contacts .....	H-8
Emergency Power - Sizing a Generator .....	H-13
Section I: Response Actions and Procedures .....	I-1
Well Disinfection Procedure .....	I-1
Bulk Water Delivery Policy .....	I-4
Section J: Water Conservation During an Emergency.....	J-1
Section K: Returning to Standard Operations.....	K-1

## Introduction: Protecting Public Health

Preparing an Emergency Response Plan is an essential part of managing a drinking water system. The Rhode Island Department of Health has made this document available to public water systems in the state to help them develop such plans.

### How to use the template

Complete the templates in the **Plan** section to develop an Emergency Response Plan for the water system. Each section of the Plan refers to a corresponding section(s) in the **Guide**. The Guide discusses key components of emergency planning and provides examples of how to develop your Emergency Response Plan by completing the templates provided here.

This document is also available on-line in Microsoft Word and Adobe pdf formats. A digital copy of your Plan will make it easier to update and revise. A digital copy also allows you to modify sections of the Plan to fit the specific needs of the water system.

If you do complete your Plan digitally, make sure you save and print it. Put the Plan in the binder.

Emergency Response Plans contain sensitive information. Keep your Plan in a secure location that is accessible in case of an emergency.



## Section A: Emergency Response Objectives

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**See Section 1  
of the Guide**

*Use your mission statement and objectives to help focus emergency planning and response. For sample text, see Section 1, page 1-1.*

### Emergency Response Mission and Objectives

<b>Mission Statement</b>	
<b>Objective 1</b>	
<b>Objective 2</b>	
<b>Objective 3</b>	
<b>Objective 4</b>	

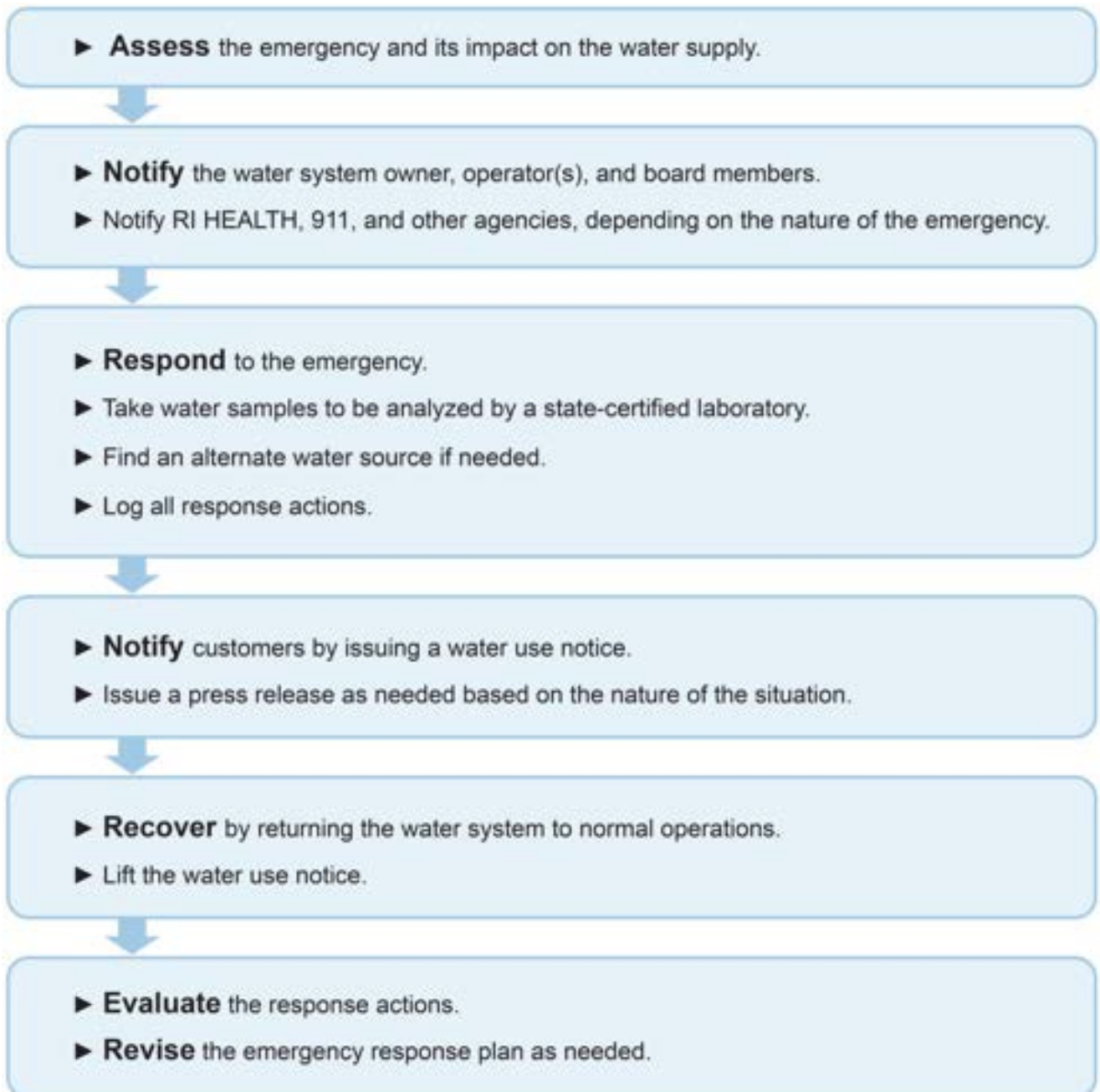


## Section B: What to Do in Case of an Emergency

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See Section 2  
of the Guide

*This flowchart is repeated here from Section 2 of the Guide as a reminder of the general stages of emergency response. There is nothing here for you to fill out.*







## Section C: Emergency Operations Checklists and Threat Confirmation Checklist

**See Section 3  
of the Guide**

Use the following checklist to determine whether your system has a complete Emergency Response Plan. Complete the checklist as you develop the Plan. When you have completed the Plan, review the checklist to determine if there is anything missing.

### Emergency Operations Checklists

Emergency Response Plan Content Checklist			
Yes	No	Does the Plan Include...	Comments
<input type="checkbox"/>	<input type="checkbox"/>	Contact information for internal personnel?	
<input type="checkbox"/>	<input type="checkbox"/>	Contact information for external personnel, such as critical users, state agencies, repair and service providers, media outlets, analytical laboratories, utility companies, etc.?	
<input type="checkbox"/>	<input type="checkbox"/>	A pre-determined line of authority structure for the owner, board members, the lead operator, and any other operators?	
<input type="checkbox"/>	<input type="checkbox"/>	A designated staff member to serve as the Media Spokesperson during and after an emergency?	
<input type="checkbox"/>	<input type="checkbox"/>	A pre-determined list of roles and responsibilities for internal personnel?	
<input type="checkbox"/>	<input type="checkbox"/>	An inventory of on-site equipment and alternate power supplies?	

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Emergency Response Plan Content Checklist			
Yes	No	Does the Plan Include...	Comments
<input type="checkbox"/>	<input type="checkbox"/>	A list of potential spare parts, equipment, and tools included within the Plan?	
<input type="checkbox"/>	<input type="checkbox"/>	An inventory and/or location of other important system manuals and information?	
<input type="checkbox"/>	<input type="checkbox"/>	Property, distribution line, and other pertinent maps? Details on where these maps are located on the property, if they aren't included here in this binder.	
<input type="checkbox"/>	<input type="checkbox"/>	A reviewed and/or modified Responding to a Power Outage Checklist to meet the needs of your water system?	
<input type="checkbox"/>	<input type="checkbox"/>	A reviewed and/or modified Responding to a Loss of Pressure Checklist to meet the needs of your water system?	
<input type="checkbox"/>	<input type="checkbox"/>	A reviewed and/or modified Responding to Flooding Checklist to meet the needs of your water system?	
<input type="checkbox"/>	<input type="checkbox"/>	A reviewed and/or modified Responding to a Contamination Checklist to meet the needs of your water system?	
<input type="checkbox"/>	<input type="checkbox"/>	Information on the system's daily water demand in gallons per day?	
<input type="checkbox"/>	<input type="checkbox"/>	Information on the system's production capacity and storage capacity?	

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### Emergency Response Plan Content Checklist

Yes	No	Does the Plan Include...	Comments
<input type="checkbox"/>	<input type="checkbox"/>	An estimated number of days that the water system can provide water to its customers?	
<input type="checkbox"/>	<input type="checkbox"/>	Copies of public notification resources, such as press release and Boil Water notices?	

### Supplemental Preparation Questions

Yes	No	Question	Comments
<input type="checkbox"/>	<input type="checkbox"/>	Was a vulnerability assessment conducted to determine weaknesses in property security or the need to upgrade and/or replace vital components of the infrastructure?	
<input type="checkbox"/>	<input type="checkbox"/>	Does your water system have a plan for alternative communication equipment when the power goes out (e.g. radios)?	
<input type="checkbox"/>	<input type="checkbox"/>	Does your water system have the information for sizing a backup generator to meet the electrical needs during an emergency?	
<input type="checkbox"/>	<input type="checkbox"/>	Has your water system developed relationships with neighboring water systems, in case you need an alternate water supply?	
<input type="checkbox"/>	<input type="checkbox"/>	Are system personnel aware of the Emergency Response Plan's content and where it is located so they can access when needed?	
<input type="checkbox"/>	<input type="checkbox"/>	Are personnel aware of their roles and responsibilities in the event of an emergency?	

Continued on next page ►►

Additional System-Specific Questions			
Yes	No	Question	Comments
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		
<input type="checkbox"/>	<input type="checkbox"/>		

## Threat Confirmation Checklist

The Threat Confirmation Checklist helps you keep track of the actions taken in response to a vandalism or terrorist threat. The Checklist also serves as a reminder of what still needs to be done in the event of a threat to the water system.

### Possible Threat

Has the water system:

- Notified local law enforcement as appropriate?
- Considered internal water system information from those who know the system?
- Considered information from their Vulnerability Assessment?
- Considered real-time water quality data?

Has the water system:

- Performed a site assessment?
- Implemented an immediate operational response?

Has the water system notified:

- Rhode Island Department of Health?
- Rhode Island State Health Laboratories?

### Credible Threat

Has the water system:

- Notified key water system personnel and external partner agencies?
- Collected/analyzed samples?
- Performed a site assessment?
- Taken public health response actions (operational and public notification)?

*Continued on next page ►►*

## Confirmed Threat

Has the water system consulted with Rhode Island Department of Health to review:

- The results from laboratory analysis?
- The results and observations of continued site assessment?
- Targeted information from external sources (public health and law enforcement)?

If confirmed, has the water system requested:

- Assistance reassessing the public health response measures?
- Assistance in planning for remediation and recovery activities?
- Assistance in locating alternate drinking water source?
- Assistance with sampling and analysis to monitor treatment and remediation?
- Assistance interacting with the public and media?

## Section D: System Information

**See Section 4 of the Guide**

*Place system as-built plans, other plans and maps, and a copy of the system's sanitary survey in the binder's Resources section or the front or back pocket. Refer to these resources when completing the tables below.*

Facility #1	
<b>Name:</b>	
<b>Approximate Dimensions:</b>	
<b>Location:</b>	
<b>Description of Facility:</b>	
Facility #2	
<b>Name:</b>	
<b>Approximate Dimensions:</b>	
<b>Location:</b>	
<b>Description of Facility:</b>	
Treatment Facility <i>(if applicable)</i>	Chemical Storage <i>(if applicable)</i>
<b>Name:</b>	<b>Name:</b>
<b>Location:</b>	<b>Location:</b>
<b>Approximate Dimensions:</b>	<b>Approximate Dimensions:</b>
<b>Description of Facility:</b>	<b>Description of Facility:</b>

## System Information

Location of Important Manuals and Procedures	
Item	Location
Technical Manuals	
Start-Up/Shut-Down Procedures (SOPs)	
Operations & Maintenance (O&M) Plan or Manual	
Water Sampling Procedures	
Sanitary Survey	
Water System Management Guide	
Water System Shock Chlorination Procedures	
Other (specify)	



Pipe Information				
Type	Use/Location	Size (e.g., diameter)	Length	Material Makeup

Well Source Information <input type="checkbox"/> Not applicable				
Source Name	Location	Well Depth	Well Yield	Storage Tank Capacity

Continued on next page ►►

Surface Source Information <input type="checkbox"/> Not applicable				
Source Name	Location	Intake Location	Capacity	Storage Tank Capacity

Water Storage Information		
Location	Capacity	Type/Description

Continued on next page ►►

Pump Information				
Source	Location	Pump Type	Manufacturer	Pump Model

Disinfection and Treatment	
Chemicals Used	Location of Chemical Storage

Continued on next page ►►

**System Demand:** The table below records how much capacity your system has compared to what your demand is and helps you to determine how many days of water you will have during an emergency. This information may change during different times of the year.

System Demand	
Maximum Daily Demand (gallons/day)	
Average Daily Demand (gallons/day)	
What is the total storage capacity of the system? (gallons)	
What is the total production capacity of this system? (gallons/day)	
Estimated Available Water (days) <i>Divide total storage capacity by average daily demand</i>	

Alternative Power Supply				
Make/Model	Voltage/ Amps	Fuel Type	Tank Capacity	Location Stored
<b>Powers Facility:</b>				
<b>Powers Facility:</b>				

## Section E: Lines of Authority

**See Section 5  
of the Guide**

*Use the tables in this section to list contact information for Internal and External Contacts. Identify responsibilities for Owner(s), Board of Director(s), and Operator(s).*

### Internal Contacts

#### Water System Owner(s) Contact Information

Name and Title	Responsibilities	Phone (Day) Phone (Night)	Email

#### Board of Directors Contact Information

Name and Title	Responsibilities	Phone (Day) Phone (Night)	Email

*Continued on next page ►►*

### System Operator and Other Operator(s) Contact Information

Name and Title	Responsibilities	Phone (Day) Phone (Night)	Email
Designated Operator			
Other Operator			

## External Contacts

Emergency Responders and State Agency Contact List			
Organization	Department or Contact Name	Phone (Day) Phone (Night)	Email (if applicable)
Local Fire Department			
Local Police Department			
Emergency Medical Service			
RI Department of Health	Office of Drinking Water Quality	Monday – Friday 8:00 AM – 4:00 PM (401) 222-6867  After hours emergency (401) 272-5952	
RI Department of Environmental Management	Office of Compliance and Inspection	Monday – Friday 8:00 AM – 4:00 PM (401) 222-1360	
*Also for HAZMAT needs.	Environmental Police (Division of Law Enforcement)	Anytime, any emergency (401) 222-3070	
RI WARN	Dave Aucoin, RIWARN Chair	(401) 461-8848 x418	daucoin@narrabay.org

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Emergency Responders and State Agency Contact List			
Organization	Department or Contact Name	Phone (Day) Phone (Night)	Email (if applicable)
RI Emergency Management Agency (RIEMA)		(401) 946-9996	
RI State Police		(401) 444-1000	
Local Emergency Management Director			
Other (specify)			
Other (specify)			



## Section F: Responding to Emergency Events

See Sections 6 and 9 of the Guide

Use the checklists for the emergencies included here to help you keep track of your response actions. Use the table that follows each checklist to list specific response actions.

### Checklist: Responding to a Power Outage

If your water system has lost power, contamination might have entered your water system, putting your customer's health at risk. You must take prompt action, that might include using back-up power, system disinfection and flushing, customer notification and possibly a Boil Water Order.

#### What to Do If the Water System Experiences a Power Outage?

*Each situation is unique. Circumstances vary and the order of actions below may change.*

- Inform the system owner(s), designated operator, and board members of the situation.** Each is responsible for tasks identified in the water system's Emergency Response Plan in Section E.
- Notify the power company. First Responder should notify the power company.** Let the power company know that the water system has lost power and if you will be using a back-up generator.
- Assess whether the outage will last more than 6 hours.** If no, monitor conditions and storage tank levels. If outage will last more than 6 hours, consider using a back-up generator.
- Notify the RI Dept. of Health, Office of Drinking Water Quality, at (401) 222-6867.**
- Notify your customers.** If the water system cannot be adequately flushed and disinfected, customers must be notified with a press release to media outlets and posted Boil Water Order notices as soon as possible. Copies of these notices are in Section G and on the HEALTH website at [www.health.ri.gov/drinkingwaterquality/about/yourwater](http://www.health.ri.gov/drinkingwaterquality/about/yourwater). In addition, customers must be notified if they will be receiving highly chlorinated water.
- Disinfect the system.** Section I of the Plan has the Rhode Island Department of Health's well disinfection procedures.
- A power outage might result in contamination of the supply or loss of pressure.** If this happens, follow the steps in the *Responding to a Loss of Pressure* checklist.

**When Do I Issue a Boil Water Order?**

- If you cannot adequately flush and disinfect your water system.
- If any water samples are positive for *E. coli*.
- If there is a broken sewer line adjacent to a broken water line.

For specific guidance on issuing and lifting drinking water orders, see Rules and Regulation Pertaining to Public Drinking Water [R46-13-DWQ].

**Table: Responding to a Power Outage**

Use the table below to summarize the vulnerability assessment, identify immediate response actions, define what notifications need to be sent out, and describe important follow-up actions when responding to a power outage.

Refer to Section 9 of the Guide on page 9-3 for an example of a completed table. In addition, see the flowchart in Section 6 of the Guide on page 6-3 for help indentifying actions to take during a power outage.

<b>Assessment</b>	
<b>Immediate Actions</b>	
<b>Notifications</b>	
<b>Follow-up Actions</b>	

## Checklist: Responding to a Loss in Pressure

**Pressure loss** can be defined as very low or no pressure within the water system, often resulting in no water in parts or all of the system. **If your water system loses pressure, contamination might have occurred, putting your customers at risk.** You must take prompt action, that might include disinfection, flushing, customer notification, and possibly a Boil Water Order.

### What to Do If the Water System Experiences a Loss in Pressure?

*Each situation is unique. Circumstances vary and the order of actions below may change.*

- Inform the system owner, system operator, and board members of the situation.**  
Each is responsible for tasks identified in the water system's Emergency Response Plan in Section E.
- Notify the RI Dept. of Health, Office of Drinking Water Quality, at (401) 222-6867.**
- Notify your customers.** If the water system cannot be adequately flushed and disinfected after water pressure is restored, customers must be notified with a press release to media outlets and posted Boil Water Order notices as soon as possible. Copies of these notices are in Section G and on the HEALTH website at [www.health.ri.gov/drinkingwaterquality/about/yourwater](http://www.health.ri.gov/drinkingwaterquality/about/yourwater). In addition, customers must be notified if they will be receiving highly chlorinated water.
- Disinfect the system.** Section I of the Plan has the Rhode Island Department of Health's well disinfection procedures.
- Flush the system.** After water service is restored, flush the system to remove contamination such as sediment or highly chlorinated water. Depending upon the event, flushing could occur before and after the disinfection step.
- Test the water.** After disinfecting and flushing, contact a state-certified laboratory to have the water tested for bacteria. If the sample is positive for **total Coliform**, repeat the disinfection and flushing procedure. If the sample is positive for **E. coli**, immediately issue a Boil Water Order and notify the RI Department of Health, Office of Drinking Water Quality at (401) 222-6867.
- Contact the RI Department of Health** when the contamination is resolved and the supply is safe for consumption. **Remove the Boil Water notice.**

**When Do I Issue a Boil Water Order?**

- If you cannot adequately flush and disinfect your water system.
- If any water samples are positive for *E. coli*.
- If there is a broken sewer line adjacent to a broken water line.

For specific guidance on issuing and lifting drinking water orders, see Rules and Regulation Pertaining to Public Drinking Water [R46-13-DWQ].

**Table: Responding to a Loss in Pressure**

Use the table below to summarize the vulnerability assessment, identify immediate response actions, define what notifications need to be sent out, and describe important follow-up actions when responding to a loss in pressure.

Refer to Section 9 of the Guide on page 9-3 for an example of a completed table. In addition, see the flowchart in Section 6 of the Guide on page 6-4 for help indentifying actions to take due to loss of pressure.

<b>Assessment</b>	
<b>Immediate Actions</b>	
<b>Notifications</b>	
<b>Follow-up Actions</b>	

## Checklist: Responding to Flooding

Flooding can be a result of severe weather or rising water level from a nearby waterbody. One preventative measure is to consult the town or city to determine if the entire water system or parts of it are located in a floodplain area. This can help you determine which areas of the water system are more vulnerable to flooding.

### What to Do If the Water System is Flooded?

*Each situation is unique. The order of actions below may change and the steps taken will be based on the severity and impact of the flooding.*

- Inform the system owner, system operator, and board members of the situation.**  
Each is responsible for tasks identified in the water system's Emergency Response Plan in Section E.
- Assess the damage from the flooding.**
- Notify the RI Dept. of Health, Office of Drinking Water Quality, at (401) 222-6867.**
- Notify your customers.** If the water system cannot be adequately flushed and disinfected, customers must be notified with a press release to media outlets and posted Boil Water Order notices as soon as possible. Copies of these notices are in Section G and on the HEALTH website at [www.health.ri.gov/drinkingwaterquality/about/yourwater](http://www.health.ri.gov/drinkingwaterquality/about/yourwater). In addition, customers must be notified if they will be receiving highly chlorinated water.
- Disinfect the system.** Depending upon the event, flushing could occur before and after the disinfection step. Section I of the Plan has the Rhode Island Department of Health's well disinfection procedures.
- Test the water.** After disinfecting and flushing, contact a state-certified laboratory to have the water tested for bacteria. If the sample is positive for **total Coliform**, repeat the disinfection and flushing procedure. If the sample is positive for **E. coli**, immediately issue a Boil Water Order and notify the RI Department of Health, Office of Drinking Water Quality at (401) 222-6867.
- Contact the RI Department of Health** when the contamination is resolved and the supply is safe for consumption. **Remove the Boil Water notice.**

**When Do I Issue a Boil Water Order?**

- If you cannot adequately flush and disinfect your water system.
- If any water samples are positive for *E. coli*.
- If there is a broken sewer line adjacent to a broken water line.

For specific guidance on issuing and lifting drinking water orders, see Rules and Regulation Pertaining to Public Drinking Water [R46-13-DWQ].

**Table: Responding to Flooding**

Use the table below to summarize the vulnerability assessment, identify immediate response actions, define what notifications need to be sent out, and describe important follow-up actions when responding to flooding.

Refer to Section 9 of the Guide on page 9-3 for an example of a completed table. In addition, see the flowchart in Section 6 of the Guide on page 6-5 for help indentifying actions to take during a flood. Table follows with plenty of room to write in.

<b>Assessment</b>	
<b>Immediate Actions</b>	
<b>Notifications</b>	
<b>Follow-up Actions</b>	

## Checklist: Responding to Contamination

A contamination event can occur from various sources, such as heavy rains, severe weather, a car accident, leaking tanks from a nearby commercial zone, or even intentional contamination.

### What to Do If the Water Supply is Contaminated?

*Each situation is unique. The order of actions below may change and the steps taken will be based on the severity of the contamination.*

- Inform the system owner, system operator, and board members of the situation.** Each is responsible for tasks identified in the water system's Emergency Response Plan in Section E.
- Assess the severity of the contamination.** Look for intentional contamination or any difference in color, clarity or smell to the supply. Determine if all water supplies are contaminated.
- Notify the RI Dept. of Health, Office of Drinking Water Quality, at (401) 222-6867.**
- Notify your customers.** If the water system cannot be adequately flushed and disinfected, customers must be notified with a press release to media outlets and posted Boil Water Order notices as soon as possible. Copies of these notices are in Section G and on the HEALTH website at [www.health.ri.gov/drinkingwaterquality/about/yourwater](http://www.health.ri.gov/drinkingwaterquality/about/yourwater). In addition, customers must be notified if they will be receiving highly chlorinated water.
- Disinfect and flush the system.** Flushing should occur to remove contamination such as sediment and other material or to remove highly chlorinated water. Depending upon the event, flushing could occur before and after the disinfection step. Section I of the Plan has the Rhode Island Department of Health's well disinfection procedures.
- Test the water.** After disinfecting and flushing, contact a state-certified laboratory to have the water tested for bacteria. If the sample is positive for **total Coliform**, repeat the disinfection and flushing procedure. If the sample is positive for **E. coli**, immediately issue a Boil Water Order and notify the RI Department of Health, Office of Drinking Water Quality at (401) 222-6867.
- If contamination is still present, contact HEALTH at 401-222-6867** for additional assistance.
- Contact the RI Department of Health** when the contamination is resolved and the supply is safe for consumption. **Remove the Boil Water notice.**

### When Do I Issue a Boil Water Order?

- If you cannot adequately flush and disinfect your water system.
- If any water samples are positive for *E. coli*.
- If there is a broken sewer line adjacent to a broken water line.

For specific guidance on issuing and lifting drinking water orders, see Rules and Regulation Pertaining to Public Drinking Water [R46-13-DWQ].

## Table: Responding to Contamination

Use the table below to summarize the vulnerability assessment, identify immediate response actions, define what notifications need to be sent out, and describe important follow-up actions when responding to contamination.

Refer to Section 9 of the Guide on page 9-3 for an example of a completed table. In addition, see the flowchart in Section 6 of the Guide on page 6-6 for help indentifying actions to take due to contamination.

<b>Assessment</b>	
<b>Immediate Actions</b>	
<b>Notifications</b>	
<b>Follow-up Actions</b>	



## Section G: Emergency Public Notification

**See Section 7  
of the Guide**

Use the tables in this section to identify emergency public contacts. This section also contains public notices for drinking water orders and an example press release.

### Critical Customers and Contacts

#### Hospital Contacts

Hospital Name	Contact Name	Phone (Day) Phone (Night)	Email (if applicable)

#### Neighboring Water System Contacts (for emergency connection)

Water System	Contact Name	Phone (Day) Phone (Night)	Email (if applicable)

**Critical Customers List (e.g., shelters, hospitals, assisted living facilities and schools)**

**Critical Customer #1**

<b>Type:</b>	<b>Additional Information:</b>
<b>Location:</b>	
<b>Contact Name:</b>	
<b>Contact Number:</b>	

**Critical Customer #2**

<b>Type:</b>	<b>Additional Information:</b>
<b>Location:</b>	
<b>Contact Name:</b>	
<b>Contact Number:</b>	

Media Outlets			
Organization	Contact Name	Phone (Day) Phone (Night)	Email
Radio Station #1:			
Radio Station #2:			
TV Station #1:			
TV Station #2:			
Providence Journal		(401) 277-8100	Weekdays: <a href="mailto:breakingnews@providencejournal.com">breakingnews@providencejournal.com</a> Weekends: <a href="mailto:news@providencejournal.com">news@providencejournal.com</a>
Local Paper (specify):			
Local Patch* (specify):			

\* Patch.com is a website that provides communities with area-specific news, information, and events. Local news is published on the local Patch sites. Communities and towns in Rhode Island have individualized websites. To upload press releases, navigate to the Contact Us page within your community's local Patch.com site.

## Public Notice for Drinking Water Order: Boil Water for Loss of Pressure

This public notice is available in Microsoft Word format on the project website:  
[web.uri.edu/nemo/drinking-water/emergency-response](http://web.uri.edu/nemo/drinking-water/emergency-response)

### PUBLIC NOTICE

#### To all consumers of water supplied by

[Water System Name]

PWS# RI - [Number]

#### CONSUMERS SHOULD BOIL THEIR DRINKING WATER OR SEEK ALTERNATIVE WATER SUPPLIES

The [Water System Name] public water system consumers are advised as a **precaution** to boil their drinking water due to a dewatering of the water system.

**YOU ARE HEREBY ADVISED that boiled or bottled water should be used** for drinking, making ice, brushing teeth, washing dishes, food preparation, and bathing of infants until further notice.

Boiling kills bacteria and other organisms in the water. **Boil water vigorously for at least 1 minute and cool** before using for human consumption, including drinking and cooking.

Otherwise, seek an alternate source of water for human consumption purposes from a licensed bottled water and ice supplier.

**This health advisory will remain in effect until corrective actions are completed.** You will receive written notice when this requirement is rescinded.

If you have any questions or concerns, please contact:

[Water System Contact]

By telephone at: [Phone Number]

or, at this address: [Address]

## Public Notice for Drinking Water Order: Boil Water for Presence of E. coli

This public notice is available in Microsoft Word format on the project website:  
[web.uri.edu/nemo/drinking-water/emergency-response](http://web.uri.edu/nemo/drinking-water/emergency-response)

**DRINKING WATER WARNING**

[Water System Name] water is contaminated with E. coli.

**Boil your water before using.**

E. coli bacteria were found in the water supply on [Date]. These bacteria can make you sick, and are a particular concern for people with weakened immune systems.

What should you do?

- **Do not drink the water without boiling it first.** Bring all water to a boil, let it boil for one minute, and let it cool before using, or use bottled water. Boiled or bottled water should be used for drinking, making ice, brushing teeth, washing dishes, and food preparation **until further notice**. Boiling kills bacteria and other organisms in water.
- E. coli are bacteria whose presence indicates that the water may be contaminated with human or animal wastes. Microbes in these wastes can cause diarrhea, cramps, nausea, headaches, or other symptoms. They may pose a special health risk for infants, young children, some of the elderly, and people with severely compromised immune systems.
- The symptoms listed above are not caused only by organisms in drinking water. If you experience any of these symptoms and they persist, you may want to seek medical advice. People at increased risk should seek advice about drinking water from their health care providers.

What happened?

Bacterial contamination can occur when increased run-off enters the drinking water source (for example, following heavy rains). It can also happen due to a break in the distribution system (pipes) or a failure in the treatment process.

What is being done? [List what is being done]

**We will inform you when tests show no bacteria and you no longer need to boil your water. We anticipate resolving the problem within [Number] days.**

For more information, please contact:  
[Contact Name of Responsible Person]  
By telephone at [Phone Number]  
Or, at this address: [Address]

General guidelines on ways to lessen the risk of infection by microbes are available from EPA's Safe Drinking Water Hotline at 1 (800) 426-4791.

**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 notice in a public place or distributing copies by hand or mail.

This notice is being sent to you by: [Water System Name]      PWS# RI-[Number]      Date posted: [Date]

Emergency Public Notification – Boil water notice due to E. coli contamination

## Public Notice for Drinking Water Order: Boil Water for Presence of Total Coliform bacteria

This public notice is available in Microsoft Word format on the project website:  
[web.uri.edu/nemo/drinking-water/emergency-response](http://web.uri.edu/nemo/drinking-water/emergency-response)

### IMPORTANT INFORMATION ABOUT YOUR DRINKING WATER

Tests show Coliform bacteria in water supplied by:

[Water System Name]

[Water System Street Address], [Water System Town, State, Zip]

PWS# RI -

The [Water System Name] water system recently exceeded the Microbiological Maximum Contaminant Level standard.

Although this is not an emergency, as our customers, you have a right to know what happened, what you should do, and what we are doing to correct this situation.

We routinely monitor for the presence of drinking water contaminants. One (1) sample for Coliform bacteria was collected on [Collection Date] and [Number of Samples] additional samples were collected on [Collection Date]. A total of [Number of Samples] samples showed the presence of Coliform bacteria. The standard is that no more than one (1) sample per month may do so.

#### What should you do?

- You must use **bottled water** or **boil the water** (for a minimum of one minute at a rapid boil) for all drinking or cooking.
- If you have specific health concerns, consult your doctor. People with severely compromised immune systems, infants, and some elderly may be at increased risk. General guidelines on ways to lessen the risk of infection by microbes are available from EPA's Safe Drinking Water Hotline at 1 (800) 426-4791.

#### What does this mean?

- Total Coliform bacteria are generally not harmful themselves. Coliforms are bacteria, which are naturally present in the environment and are used as an indicator that other, potentially harmful, bacteria may be present. Coliforms were found in more samples than allowed and this was a warning of potential problems.
- Usually, Coliforms are a sign that there could be a problem with the treatment or distribution system. Whenever we detect Coliform bacteria in any sample, we do follow-up testing to see if other bacteria of greater concern, such as fecal Coliform or *E. coli*, are present. **We did not find any of these bacteria in our subsequent testing.** Further testing will be conducted to determine when the water is again free of Coliform bacteria.

#### What happened? [List what happened]

#### What is being done? [List what is being done]

We are still detecting Coliform bacteria. We will inform you when our sampling shows that no bacteria are present. We anticipate resolving the problem within [Number] days.

For more information, please contact: [Contact Name of Responsible Person] at [Contact Information]

**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 notice in a public place or distributing copies by hand or mail.

This notice is being sent to you by: [Water System Name] PWS# RI-[Number] Date posted: [Date]

Emergency Public Notification – Boil water notice due to Coliform bacteria



## Public Notice for Drinking Water Order: Do Not Drink

This public notice is available in Microsoft Word format on the project website:  
[web.uri.edu/nemo/drinking-water/emergency-response](http://web.uri.edu/nemo/drinking-water/emergency-response)

Date: [Date]

### UNSAFE WATER ALERT

[Water System Name] water is possibly contaminated with [Contaminant Name]

**Do not drink your water.** Failure to follow this advisory could result in illness.

An unknown substance has been added to the drinking water supplied by the [Water System Name] due to a recent [intrusion; break-in] at [one of the wells; our treatment plant; storage tank; specific facility]. The Rhode Island Department of Health Office of Drinking Water Quality, and [Water System Name] water system are advising residents of [City, Town, System] to **NOT USE THE TAP WATER FOR DRINKING AND COOKING UNTIL FURTHER NOTICE.**

What should you do?

- **Do not drink your tap water. Use only bottled water.** Bottled water should be used for all drinking (including baby formula and juice), brushing teeth, washing dishes, making ice and food preparation until further notice.
- **Do not try and treat the water yourself.** Boiling, freezing, filtering, adding chlorine or other disinfectants, or letting water stand will not make the water safe.
- Optional: Potable water is available at the following locations: [List locations]  
Please bring a clean water container (5 gallons maximum capacity).

What happened? [List what happened]

What is being done? [List what is being done]

**We will inform you when tests show no bacteria and you no longer need to boil your water.**  
**We anticipate resolving the problem within [Estimated Time Frame].**

For more information, please contact:

[Contact Name of Responsible Person]

By telephone at [Phone Number]

Or, at this address: [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 notice in a public place or distributing copies by hand or mail.

This notice is being sent to you by: [Water System Name]      PWS# RI-[Number]      Date posted: [Date]

Emergency Public Notification – Do not drink notice

## Public Notice for Drinking Water Order: Do Not Use

This public notice is available in Microsoft Word format on the project website:  
[web.uri.edu/nemo/drinking-water/emergency-response](http://web.uri.edu/nemo/drinking-water/emergency-response)

Date: [Date]

### UNSAFE WATER ALERT

[Water System Name] water is possibly contaminated with [Contaminant Name]

**Do not use your water.** Failure to follow this advisory could result in illness.

An unknown substance has been added to the drinking water supplied by the [Water System Name] due to a recent [intrusion; break-in] at [one of the wells; our treatment plant; storage tank; specific facility]. The Rhode Island Department of Health Office of Drinking Water Quality, and [Water System Name] water system are advising residents of [City, Town, System] to **NOT USE THE TAP WATER FOR DRINKING, COOKING, FOOD PREPARATION, HANDWASHING, OR BATHING UNTIL FURTHER NOTICE.**

What should you do?

- **Do not drink your tap water. Use only bottled water.** Bottled water should be used for all drinking (including baby formula and juice), brushing teeth, washing dishes, making ice and food preparation, hand washing, and bathing until further notice.
- **Do not try and treat the water yourself.** Boiling, freezing, filtering, adding chlorine or other disinfectants, or letting water stand will not make the water safe.
- Optional: Potable water is available at the following locations; [List locations]  
Please bring a clean water container (5 gallons maximum capacity).

What happened? [List what happened]

What is being done? [List what is being done]

**We will inform you when tests show no bacteria and you no longer need to boil your water. We anticipate resolving the problem within [estimated time frame] days.**

For more information, please contact:

[Contact Name of Responsible Person]

By telephone at [Phone Number]

Or, at this address: [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 notice in a public place or distributing copies by hand or mail.*

This notice is being sent to you by: [Water System Name] PWS# RI-[Number] Date posted: [Date]

Emergency Public Notification – Do not use notice



## Public Notice for Drinking Water Order: Do Not Give Water to Infants

This public notice is available in Microsoft Word format on the project website:  
[web.uri.edu/nemo/drinking-water/emergency-response](http://web.uri.edu/nemo/drinking-water/emergency-response)

**DRINKING WATER WARNING**

[Water System Name] water has high levels of nitrate.

**Do not give the water to infants under six months old or use it to make infant formula.**

Water sample results received [Date] showed nitrate levels of [Amount] milligrams per liter (mg/l).

This is above the nitrate standard, or maximum contaminant level (MCL), of 10 mg/l. Nitrate in drinking water is a serious health concern for infants less than six months old.

What should you do?

- **Do not give the water to infants.** Infants below the age of six months who drink water containing nitrate in excess of the MCL could become seriously ill and, if untreated, may die. Symptoms include shortness of breath and blue baby syndrome. Blue baby syndrome is indicated by blueness of the skin.

Symptoms in infants can develop rapidly, with health deteriorating over a period of days. **If symptoms occur, seek medical attention immediately.**

**Water, juice, and formula for children under six months of age should not be prepared with tap water.** Bottled water or other water low in nitrates should be used for infants until further notice.

- **Do not boil the water.** Boiling, freezing, filtering, or letting water stand does not reduce the nitrate level. Excessive boiling can make the nitrates more concentrated, because nitrates remain behind when the water evaporates.
- Adults and children older than six months can drink the tap water (nitrate is a concern for infants because they can't process nitrates in the same way adults can). However, if you are pregnant or have specific health concerns, you may wish to consult your doctor.

What happened? Nitrate in drinking water can come from natural, industrial, or agricultural sources (including septic systems and run-off). Levels of nitrate in drinking water can vary throughout the year. We'll let you know when the amount of nitrate is again below the limit.

What is being done? [List what is being done]

For more information, please contact:  
[Contact Name of Responsible Person]  
By telephone at [Phone Number]  
Or, at this address: [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 notice in a public place or distributing copies by hand or mail.*

This notice is being sent to you by: [Water System Name]      PWS# RI-[Number]      Date posted: [Date]

Emergency Public Notification – Do not give water to infants

## Sample Press Release

This press release is available in Microsoft Word format on the project website: [web.uri.edu/nemo/drinking-water/emergency-response](http://web.uri.edu/nemo/drinking-water/emergency-response)

**FOR IMMEDIATE RELEASE**

Date: [Date]

Contact: [Contact Name]

Contact Phone Number(s): [Contact Phone Number]

### Drinking Water Warning

**The consumers served by the [Water System Name] public water system are under a Boil Water Advisory.**

Consumers of the [Water System Name] Public Water System are advised to boil water before drinking it. The RI Department of Health suggests all water be boiled for one minute, and allowed to cool before using. Boiling kills bacteria and other organisms in the water. Bottled water can also be used. Boiled or bottled water should be used for drinking, making ice, brushing teeth, food preparation, and bathing of infants until further notice.

**The Problem:** [Define the problem and include significant dates and times.]

**The Solution:** [Define what actions are being taken to resolve the issue.]

If E. coli is present include the following: The presence of E. coli bacteria indicates that the water may be contaminated with human or animal wastes. Microbes in these wastes can cause diarrhea, cramps, nausea, headaches, or other symptoms. They pose a special health risk for infants, young children, and people with severely compromised immune systems.

If residents experience any of these symptoms, even if tap water has been avoided, they may want to seek medical advice. Those at increased risk should seek advice about drinking water from their health care providers.

For more information, please contact:

[Contact Name of Responsible Person]

By telephone at [Phone Number]

Or, at this address: [Address]

Information is also available during business hours from the Rhode Island Department of Health, Office of Drinking Water Quality at (401) 222-6867, after hours at (401) 272-5952. For general information on water supply bacterial contamination problems go to [www.health.ri.gov/news/drinkingwaterquality/index.php](http://www.health.ri.gov/news/drinkingwaterquality/index.php). Guidelines on ways to lessen the risk of infection by microbes are available from the EPA Safe Drinking Water Hotline at 1 (800) 426-4791.

[Define the area affected] residents are asked to contact neighbors who may not be aware of this water problem.

## Section H: Assessing Vulnerabilities

**See Section 8  
of the Guide**

Use the tables in this section to take inventory of tool, equipment and parts that should be available on-site in the case of an emergency. There are tables to identify service providers, contractors and state-certified analytical laboratories. Also, you will find a worksheet for sizing a back-up generator.

### Equipment and Spare Parts Inventory

Response Tools and Equipment				
Item	Quantity	Location		Additional Information
Tool kit		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
Flashlights/Lamps		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
Additional batteries		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
Water sampling equipment		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	

Replacement Parts					
Item	Description <i>(Dimensions, Capacity)</i>	Quantity	Location		Additional Information
Electricity Meters			<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
Well Pipes			<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
Replacement Pump			<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
Backflow Preventer			<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
Hydrants			<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	

Spare Parts for Piping Network				
Item	Quantity	Location		Additional Information
Pipes		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
Couplings		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
Fittings		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
Valves		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	

Emergency Response Tools and Equipment				
Item	Quantity	Location		Additional Information
Tool kit <i>including cordless drill</i>		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
Flashlights Head lamps		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
Extra batteries <i>D batteries for flashlights</i> <i>A batteries for head lamps</i> <i>Spare battery for electric drill</i> <i>Truck battery</i>		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
Water sampling equipment		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
Treatment Screens		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
Chlorine for Treatment		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
Chlorination Equipment		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	

Communication Equipment				
Item	Quantity	Location		Additional Information
Radios		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	

Back-Up Generator				
Make and Model	Voltage/ Amps	Fuel Type	Tank Capacity	Location Stored
		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	

Vehicles			
Make and Model	Location of Keys	Fuel Type	Tank Size

Personal Safety Equipment		
Item	Location on Property	Contact Information For Trained Staff Member
Evacuation Plan		
Personal Protective Equipment		
First Aid Kit		



Other Equipment, Tools, and Resources				
Item	Quantity	Location		Additional Information
		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	
		<input type="checkbox"/> On-site	<input type="checkbox"/> Need to acquire	

## Service Contractors and Supply Contacts

Service Contractors and Suppliers			
Service	Contact Name	Phone (Day) Phone (Night)	Email
Electrician			
Plumber			
Pump Specialist			
Pump Supplier			
Pipe Supplier			
Soil Excavator/ Backhoe Operator			
Well Driller			
Dig Safe		811	
Equipment Repair			

For Dig Safe's *How It Works* Information, to go: [www.digsafe.com/how\\_it\\_works.php](http://www.digsafe.com/how_it_works.php)

Service Contractors and Suppliers			
Service	Contact Name	Phone (Day) Phone (Night)	Email
Tool Rental Service			
Control System Repair Specialist			
Power Generator Rental			
Bulk Water Hauler*			
Bulk Water Hauler*			
Bottled Water Company			
Bottled Water Company			
Other ( <i>specify</i> )			

\* Refer to the Rhode Island Department of Health's bulk water hauling policy in Section I on page I-4.

Utilities and Fuel Suppliers Specify the company your water system uses.			
Company	Contact Name	Phone (Day) Phone (Night)	Email (if applicable)
<b>Electric Company:</b> National Grid <b>Account Number:</b>		800-465-1212	
<b>Gas Company:</b> <b>Account Number:</b>			
<b>Telephone Company:</b> <b>Account Number:</b>			
<b>Fuel Supplier:</b> <b>Account Number:</b>			

**State-Certified Analytical Laboratories**

Laboratory	Contact Name	Phone (Day) Phone (Night)	Email (if applicable)
<p><b>Physical Address:</b>  <b>Analysis for:</b> <input type="checkbox"/> Pathogens   <input type="checkbox"/> Chemical   <input type="checkbox"/> Radiological   <input type="checkbox"/> Other: _____</p>			
<p><b>Physical Address:</b>  <b>Analysis for:</b> <input type="checkbox"/> Pathogens   <input type="checkbox"/> Chemical   <input type="checkbox"/> Radiological   <input type="checkbox"/> Other: _____</p>			
<p><b>Physical Address:</b>  <b>Analysis for:</b> <input type="checkbox"/> Pathogens   <input type="checkbox"/> Chemical   <input type="checkbox"/> Radiological   <input type="checkbox"/> Other: _____</p>			

Chemical Supplier Information			
Company	Contact Name	Phone (Day) Phone (Night)	Email (if applicable)
<b>Physical Address:</b> <b>Company supplies:</b>			
<b>Physical Address:</b> <b>Company supplies:</b>			
<b>Physical Address:</b> <b>Company supplies:</b>			

## Emergency Power - Sizing a Generator

### Emergency Generator Information Form

This worksheet should be filled out by the water system operator with the sole intent of determining the needs for a generator or for describing an existing generator. Information on this form will be completed and used by a licensed electrician. A copy of the completed form should be included in the Emergency Response Plan.

#### System Information

System Name: \_\_\_\_\_

EPA#: \_\_\_\_\_ Town: \_\_\_\_\_

Max. daily demand in (MGD): \_\_\_\_\_ Avg. daily demand in (MGD): \_\_\_\_\_  
*MGD is million gallons per day*

#### Generator Needs

Location (Name): \_\_\_\_\_

Existing transfer switch:  Yes  No

Existing "add-a-phase" or "roto-phase" unit:  Yes  No

*These units convert a single phase line to a three phase line.*

Size of electrical main breaker: \_\_\_\_\_ Amps

System Voltage: \_\_\_\_\_ 240 volt single phase \_\_\_\_\_ 240 volt three phase  
 \_\_\_\_\_ 208 volt three phase \_\_\_\_\_ 480 volt three phase

Major motors used at facility for operation:

<i>Example:</i>	<u>75</u> HP	<u>2</u> Quantity	<u>460</u> Volts	<u>3</u> Phase
	_____ HP	_____ Quantity	_____ Volts	_____ Phase
	_____ HP	_____ Quantity	_____ Volts	_____ Phase
	_____ HP	_____ Quantity	_____ Volts	_____ Phase
	_____ HP	_____ Quantity	_____ Volts	_____ Phase

Existing concrete pad to locate generator:  Yes  No

Distance of concrete pad to connection point \_\_\_\_\_

Size and number of motors needed for critical processes: \_\_\_\_\_

System meter kilowatt reading: \_\_\_\_\_

Is this system a member of WARN? :  Yes  No

Additional Comments: \_\_\_\_\_

\_\_\_\_\_

### Existing Generator Capacity

Existing generator on-site:  Yes  No

On-site generator location(s): \_\_\_\_\_

\_\_\_\_\_

Is your on-site generator portable for use elsewhere:  Yes  No

If your facility has an off-site generator ready for use in an emergency, what is the source or location:

\_\_\_\_\_

Existing transfer switch:  Yes  No

If yes, is the transfer switch manual or automatic: \_\_\_\_\_

If automatic, what brand is the ATS and how many wires are required to start: \_\_\_\_\_

\_\_\_\_\_

Size of generator: \_\_\_\_\_ kilo Volt Amps (kVA) \_\_\_\_\_ kilowatts (kW)

Configuration (Wye or Delta): \_\_\_\_\_

*A Wye configuration is in the shape of a "Y", while a Delta configuration is in the shape of the Greek letter delta "Δ"*

Load cable length: \_\_\_\_\_ feet

Load cable size: \_\_\_\_\_ Thousand Circular Mills (MCM)

\_\_\_\_\_ American Wire Gauge (AWG)



Ground cable length: \_\_\_\_\_ feet

Ground cable size: \_\_\_\_\_ (MCM or AWG)

Generator connection point: \_\_\_\_\_

Fuel tank size: \_\_\_\_\_

Fuel type:  Diesel  Gasoline  Natural gas  Propane gas  Other

Fuel available on site:  Yes  No

If yes, how much: \_\_\_\_\_ How is fuel stored: \_\_\_\_\_

Is there a maintenance plan in place:  Yes  No

Who provides generator maintenance and testing service: \_\_\_\_\_

How often is the generator tested: \_\_\_\_\_ Last test completed on: \_\_\_\_\_

Does the water system have access to an electrician:  Yes  No

Who is the electrician? \_\_\_\_\_

Number of power company transformers: \_\_\_\_\_

Transformer size(s) painted on front of the units: \_\_\_kVA \_\_\_kVA \_\_\_kVA \_\_\_kVA

Additional comments: \_\_\_\_\_

\_\_\_\_\_

\_\_\_\_\_

Person completing form: \_\_\_\_\_

*Signature*

*Title*

Person completing form: \_\_\_\_\_

*Signature*

*Title*



## Section I: Response Actions and Procedures

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**See Section 10  
of the Guide**

*This section contains the Rhode Island Department of Health's Well Disinfection Procedure and Policy on Bulk Water Hauling.*

### Well Disinfection Procedure

1/30/2014

Follow the procedures below and save this completed checklist for reference during compliance inspections. Please read all instructions before you begin.

Date and reason for well disinfection: \_\_\_\_\_

---

1. Shut off all power to well to avoid potential electrical shock while adding disinfectant to wellhead. Ensure that power switches will not be inadvertently turned on (Please refer to OSHA 29 CFR 1910.147 "lock out, tag out" procedure). Power should not be turned back on until Step 5, after the chlorine solution has been placed in the well.
  - Power shut off and secured**
  
2. Following instruction below, for shallow wells (<100ft.), introduce into the well one (1) pint of unscented liquid household bleach (5.25% available chlorine) or a proportionately smaller amount of a stronger solution. Do NOT use bleach solids/tablets. Note: For deeper wells and/or systems with large storage tanks, additional disinfectant may be necessary to achieve the desired effect. Refer to the attached Table or contact the Office of Drinking Water Quality for assistance determining well volume, the amount of chlorine needed, and guidance when disinfecting storage tanks.
  - Type and amount of bleach used:** \_\_\_\_\_
  
3. Fill a clean 5-gallon bucket approximately halfway with clean water. Slowly pour the appropriate amount of bleach for your system into half full bucket and then carefully fill remainder with clean water. Appropriate personal protective equipment, including but not limited to, gloves and eyewear, should be used when working with chemicals.

4. If the well cap has the discharge pipe coming out the top of the well, well disinfection should be performed by a well professional. If the well cap is a “pitless adapter” type (the discharge pipe is underground), remove well cover/cap by removing the bolts or loosening the set screws, but be careful not to drop parts into the well. Ensure that no visible insects or debris exists within the wellhead.

**Well cover/cap and opening inspected for insects and debris.**

**Findings:** \_\_\_\_\_

5. Pour bleach and water solution into well making sure to cover all surfaces within the wellhead and interior of the casing. Turn on the power to the pump. Spray or hose down the interior of the well with chlorinated water by attaching a hose to the nearest tap downstream, prior to any unpressurized storage reservoirs (if this is not possible contact DWQ or a water system maintenance professional for further technical consultation). Recirculate water from the tap back into the well for approximately 15 minutes Use caution to avoid electrical wires when applying solution to prevent corrosion of wire sheathing.

**Solution introduced as noted above**

**Notes:** \_\_\_\_\_

6. Turn off the power to the pump. Remove the hose and ensure the well cover/cap is properly secured. Turn power back on to pump. To disinfect the distribution system in addition to the well, operate the well pump until the entire distribution/piping system is full of chlorinated water from within the well. **Chlorinated water must be supplied to each plumbing fixture/faucet until an odor of chlorine is detected to insure that all potential sources of contamination are disinfected.**

**Well cover/cap secured**

**Procedures completed as above**

**Notes:** \_\_\_\_\_

7. Allow the chlorinated water to remain in the well and piping system (if disinfecting the distribution system as well) overnight.

**Completed**

**Notes:** \_\_\_\_\_

8. Pump the water to waste and/or use the water for non-consumption purposes until no odor of chlorine is detected. Note: Chlorinated water should not be discharged to surface water or a storm water system. If either are nearby, contact RIDEM’s RIPDES Program to obtain discharge requirements.

**Completed**

**Notes:** \_\_\_\_\_

9. After allowing time for conditions to stabilize, and ensuring a zero chlorine residual, collect the number of Coliform samples required by HEALTH and arrange for sample collection with the HEALTH or a commercial laboratory licensed by the State of Rhode Island for water testing to ensure the disinfection procedure was successful.

**Completed**

**Notes:** \_\_\_\_\_

[**Warning:** Bleach used in this disinfection process must be flushed thoroughly from all service lines. This procedure is for shock disinfection only, and should not to be used on a regular basis. Bleach contains chlorine and is harmful to organisms living in water and soil. Human exposure to strong bleach solutions (over 4 ppm chlorine) may cause severe irritation to eyes and skin. Bleach solutions over 4 ppm chlorine can be harmful if swallowed. Please use appropriate protection and precautions when handling bleach, and provide notification to any customers who may be receiving highly chlorinated water before the system is flushed.] For additional assistance contact the Office of Drinking Water Quality at (401) 222-6867.

For more detailed guidance, a good source of information is the Minnesota Department of Health's Well and Water System Disinfection document at [www.health.state.mn.us/divs/eh/wells/waterquality/disinfection.pdf](http://www.health.state.mn.us/divs/eh/wells/waterquality/disinfection.pdf).

## Bulk Water Delivery Policy

RI Department of Health, Office of Drinking Water Quality

April 27, 2005

All Bulk Water transportation, transfer and storage shall be conducted in accordance with Section 11.0 Bulk Water of the *Rules and Regulations for Bottled Water (R21-23-BB)*.

1. Sources must be approved by the HEALTH and must meet the requirements in Section 2 of the Regulations.
2. All truck tanks, transfer lines and on-site storage tanks must be dedicated to potable water use only and sanitized prior to use in accordance with Section 11.1.3.
3. All on site storage tanks must be secured against unauthorized entry or tampering at hatches, valves or piping connections.
4. Sampling of water from Bulk Water System (i.e. tank truck, water buffalo, storage tank, transfer line, etc.) shall be conducted and analyzed as directed by HEALTH. After initial sampling shows the delivered water to be Coliform free, subsequent sampling may be waived provided that a minimum concentration of 0.5 ppm chlorine is maintained in the system at all times and all other aspects of this policy are complied with.
5. HEALTH will determine the frequency and methodology of chlorine residual monitoring, if necessary.
6. Records of each delivery shall be maintained by the hauler and on-site user in accordance with Section 11.1.5. Specifically, a log or data sheet shall be maintained for each delivery, indicating the date, time and location of delivery, the number of gallons, the amount of chlorine (sodium hypochlorite) added and the original strength of the sanitizing solution, the measured residual, the name of the Bulk Hauling Company, the source of the water and the truck used.
7. Records shall also be maintained by the on-site user for each bulk storage tank, noting whether it is a dedicated potable water tank, the sanitizing procedure utilized, any available sampling results showing it to be Coliform-free at the time it was put into service or at the point of first filling on site, and/or any measurements of chlorine residual to confirm that an 0.5 ppm chlorine residual is being maintained, if deemed necessary.
8. These records must be available for inspection by HEALTH personnel.
9. The on-site user must also obtain approval from the local building inspector or plumbing authority prior to use. Elimination of any cross connection with the public water supply may be required.

For more information call the RI Department of Health, Office of Drinking Water Quality at (401) 222-6867 or Office of Food Protection at 222-2750. Contact the RI Department of Health for updates to this policy.

## Section J: Water Conservation During an Emergency

**See Section 11 of the Guide**

*Use the table below to record water conservation measures that either the system needs to implement or that you want customers to do. Identify actions that need to be taken to implement the practice and who is responsible for doing it.*

Water Conservation During an Emergency	
Water Conservation Measures	Actions and Responsible Person
Restrict outdoor lawn watering until further notice.	Send notice to customers that lawn watering is restricted until further notice.





## Section K: Returning to Standard Operations

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See Section 12  
of the Guide

Use the table below to list what must be done to return the system to standard operations and who is responsible for making sure it is done.

Returning Water System to Standard Operations	
Action	Description and Responsible Person

