

# Annual Drinking Water Quality Report

## Town of Strasburg

### INTRODUCTION

This Annual Drinking Water Quality Report for calendar year 2022 is designed to provide you with valuable information about your drinking water quality. We are committed to providing you with a safe and dependable supply of drinking water, and we want you to understand the efforts we make to protect your water supply. The quality of your drinking water meets all state and federal requirements administered by the Virginia Department of Health (VDH).

If you have questions about this report, want additional information about any aspect of your drinking water, or want to know how to participate in decisions that may affect the quality of your drinking water, please contact:

Mr. Philip Gimple, Chief Operator, Strasburg Water Treatment Plant at 540-465-3008

You can obtain additional information from the Strasburg Town Hall or Jay McKinley, Director of Public Works, Monday-Friday at 540-465-9197 or visit the office at 174 E. King Street, Strasburg VA 22657.

### GENERAL INFORMATION

As water travels over the surface of the land or through the ground, it dissolves naturally occurring minerals and can pick up substances resulting from the presence of animals or from human activity. Substances (referred to as contaminants) in source water may come from septic systems, discharges from domestic or industrial wastewater treatment facilities, agricultural and farming activities, urban storm water runoff, residential uses, and many other types of activities. Water from surface sources is treated to make it drinkable while groundwater may or may not have any treatment.

All drinking water, including bottled drinking 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 can be obtained by calling the Environmental Protection Agency's Safe Drinking Water Hotline (800-426-4791) or visiting their website at EPA.gov. Some people may be more vulnerable to contaminants in drinking water than the general population. Immune-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 microbiological contaminants are available from the Safe Drinking Water Hotline (800-426-4791).

### SOURCES AND TREATMENT OF YOUR DRINKING WATER

Your drinking water is surface water obtained from the North Fork, Shenandoah River. Three booster pump stations, three storage tanks, one storage reservoir and variously sized distribution pipes distribute water throughout the Town. All water supplied to the Town is undergoes treatment. This treatment is accomplished at the Strasburg water treatment plant prior to distribution and consists of chemical addition, coagulation, flocculation, sedimentation, and filtration to remove turbidity; chlorination to disinfect the water; and fluoridation to aid in reducing tooth decay. Supplemental treatment is provided at the Town's mountain reservoir and consists of chlorination to disinfect the water prior to entering the distribution system.

### SOURCE WATER ASSESSMENTS

A source water assessment for the Town of Strasburg was completed by the Virginia Department of Health (VDH). This assessment determined that the Town's raw water source, North Fork, Shenandoah River, may be susceptible to contamination because it is surface water exposed to a wide array of contaminants at varying concentrations. Changing hydrologic, hydraulic and atmospheric conditions promote migration of contaminants from land use activities of concern within the assessment area. More specific information may be obtained by contacting the water system representative referenced within this report.

## QUALITY OF YOUR DRINKING WATER

Your drinking water is routinely monitored according to Federal and State Regulations for a variety of contaminants. The table on the next page shows the results of our monitoring for the period of January through December 31, 2022. Most of the results in the table are from testing done in 2022. However, the state allows us to monitor for some contaminants less than once per year because the concentrations of these contaminants do not change frequently. Some of our data, though accurate, is more than one year old.

### DEFINITIONS

In the table and elsewhere in this report you will find many terms and abbreviations you might not be familiar with. The following definitions are provided to help you better understand these terms:

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

**Level 1 Assessment:** A Level 1 Assessment is 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 2 Assessment:** A Level 2 Assessment is 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 (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 (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 (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 contamination.

**Nephelometric Turbidity Unit (NTU):** A measure of the clarity of water. Turbidity in excess of 5 NTU is just noticeable to the average person.

**Non-detects (ND):** Lab analysis indicates that the contaminant is not present

**Oocyst:** A hardy, thick-walled spore

**Parts per billion (ppb) or Micrograms per liter ( $\mu\text{g/L}$ ):** One part per billion corresponds to one minute in 2,000 years, or a single penny in \$10,000,000.

**Parts per million (ppm) or Milligrams per liter ( $\text{mg/L}$ ):** One part per million corresponds to one minute in two years or a single penny in \$10,000.

**Picocuries per liter ( $\text{pCi/L}$ ):** A measure of the radioactivity in water.

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

**Variations and exemptions:** State or EPA permission not to meet an MCL or a treatment technique under certain conditions.

## WATER QUALITY RESULTS

We constantly monitor for various contaminants in the water supply to meet all regulatory requirements. The tables list only those contaminants that had some level of detection. Many other contaminants have been analyzed but were not present or were below the detection limits of the lab equipment. Maximum Contaminant Levels (MCL's) are set at very stringent levels by the U.S. Environmental Protection Agency. In developing the standards EPA assumes that the average adult drinks 2 liters of water each day throughout a 70-year life span. EPA generally sets MCL's at levels that will result in no adverse health effects for some contaminants or a one-in-ten-thousand to one-in-a-million chance of having the described health effect for other contaminants.

Microbiological							
Contaminant	MCLG	MCL	Level Found	Unit Measurement	Violation	Date of Sample	Typical Source of Contamination
Total Coliform Bacteria (1)	NA	Presence of Coliform bacteria in > 1 sample per month	0	Presence or Absence	No	Monthly	Naturally present in the environment
Cryptosporidium (2), Pre-treatment raw water	NA	NA	0.1	Absence or oocysts per liter	No	2019 2020	Naturally present in the environment

- (1) Total Coliform: Coliforms are bacteria that are naturally present in the environment and are used as an indicator that other, potentially harmful, bacteria may be present.
- (2) Cryptosporidium: The highest level found in the raw untreated source water was 1 oocyst per 10 liters volume.

Turbidity <sup>1</sup>							
Contaminant / Unit of Measurement	MCLG	MCL	Highest Level Found	Lowest Monthly % <0.3 NTU	Violation	Date of Sample	Typical Source of Contamination
Turbidity NTU	NA	TT <sup>2</sup>	0.236	100%	No	Daily	Soil Runoff

<sup>1</sup> Turbidity is a measure of cloudiness. We monitor it because it is a good indicator of our water quality and the effectiveness of the filtration process.  
<sup>2</sup> Turbidity TT = 1 NTU Max; ≤ 0.3 NTU in at least 95% of all samples tested.

Inorganic Contaminants							
Contaminant / Unit of Measurement	MCLG	MCL	Level Found (Range)	Exceedance	Date of Sample	Typical Source of Contamination	
Barium ppm	2	2	0.031	No	2022	Discharge of drilling wastes; Discharge from metal refineries; Erosion of natural deposits	
Fluoride ppm	4	4	0.34 – 0.71	No	Daily	Erosion of natural deposits; Water additive to promote strong teeth	
Nitrate ppm	10	10	2.31	No	2022	Runoff from fertilizer use; Leaching from septic tanks, sewage; Erosion of natural deposits	
Sodium ppm	--	--	18.9	No	2022	Erosion of natural deposits; de-icing salt runoff; water softeners	

Radiological Contaminants							
Contaminant / Unit of Measurement	MCLG	MCL	Level Found	Violation	Date of Sample	Typical Source of Contamination	
Beta emitters pCi/L	0	50*	1.8	No	2017	Decay of natural and man-made deposits	
Combined Radium pCi/L	0	5	0.5	No	2017	Erosion of natural deposits	
Alpha emitters pCi/L	0	15	<0.44	No	2017	Erosion of natural deposits	

\*The MCL for beta particles is 4 mrem/yr. EPA considers 50 pCi/L to be the level of concern for beta particles.



Lead and Copper						
Contaminant / Unit of Measurement	MCLG	MCL	90 <sup>th</sup> Percentile # Samples > AL	Exceedance	Date of Sample	Typical Source of Contamination
Lead ppb	0	AL=15	<2.0 No samples exceeded the AL	No	2021	Corrosion of household plumbing systems; Erosion of natural deposits
Copper ppm	1.3	AL=1.3	<0.02 No samples exceeded the AL	No	2021	Corrosion of household plumbing systems; Erosion of natural deposits
Total Organic Carbon						
Contaminant (Measurement)	MCLG	MCL	Removal Ratio (Range)	Violation	Date of Sample	Typical Source of Contamination
Total Organic Carbon (Removal Ratio)	NA	TT	1.1 – 1.6	No	Monthly	Naturally present in the environment
Disinfection Byproducts						
Contaminant / Unit of Measurement	MCLG	MCL	LRAA, 4 quarter running average, ppb	Violation	Date of Sample	Typical Source of Contamination
Haloacetic Acids (HAA5) ppb	NA	60	Location 1: 27 Location 2: 30	No	Quarterly 2022	By-product of drinking water disinfection
Total Trihalomethanes (TTHM) ppb	NA	80	Location 1: 55 Location 2: 55	No	Quarterly 2022	By-product of drinking water disinfection
Disinfection Residual						
Disinfectant/Unit of Measurement	MRDLG	MRDL	Level Found (Range)	Violation	Date of Sample	Typical Source of Contamination
Chlorine ppm	4	4	1.80 (0.43 – 3.40)	No	Monthly	By-product of drinking water chlorination

### CRYPTOSPORIDIUM INFORMATION

Cryptosporidium is a microbial pathogen found in surface water throughout the US. Although filtration removes Cryptosporidium, the most commonly used filtration methods cannot guarantee 100 percent removal. Our monitoring indicates the presence of these organisms in our raw source water (before treatment). Current test methods do not allow us to determine if the organisms are dead or if they are capable of causing disease. Ingestion of Cryptosporidium may cause cryptosporidiosis, an abdominal infection. Symptoms of infection include nausea, diarrhea, and abdominal cramps. Most healthy individuals can overcome the disease within a few weeks. However, immune-compromised people, infants and small children, and the elderly are at greater risk of developing life threatening illness. We encourage immune compromised individuals to consult their doctor regarding appropriate precautions to take to avoid infection. Cryptosporidium must be ingested to cause disease and it may be spread through means other than drinking water.

### SODIUM INFORMATION

There is presently no established standard for sodium in drinking water. An EPA advisory recommends water containing 30 to 60 mg/L should not be used as drinking water due to esthetics such as taste and color. Water containing more than 20 mg/L should not be used by persons whose physician has placed them on severely restricted sodium diets.

### LEAD INFORMATION

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. The Town of Strasburg is responsible for providing high quality drinking water, but cannot control the variety of materials used in the plumbing components. When your water has been sitting for several hours, you can minimize the potential for lead exposure by flushing your tap for 30 seconds to 2 minutes before using water for drinking or cooking. If you are concerned about lead in your water, you may wish to have your water tested. Information on the lead in drinking water, testing methods, and steps you can take to minimize exposure is available from the Safe Drinking Water Hotline (800-426-4791) or at <http://www.epa.gov/safewater/lead>.

### VIOLATION INFORMATION

We were in full compliance with all monitoring, reporting, water quality requirements and no violations occurred during the calendar year 2022.

The waterworks owners prepared this Drinking Water Quality Report with the assistance and approval of the Virginia Department of Health (VDH). Please call if you have questions.

Signature: Philip E Duple

Date: March 29, 2023