

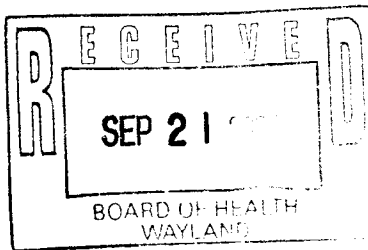
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COMMONWEALTH OF MASSACHUSETTS
EXECUTIVE OFFICE OF ENVIRONMENTAL AFFAIRS
DEPARTMENT OF ENVIRONMENTAL PROTECTION
ONE WINTER STREET, BOSTON, MA 02108 617-292-5500

MITT ROMNEY
Governor

KERRY HEALEY
Lieutenant Governor



ELLEN ROY HERZFELDER
Secretary

ROBERT W. GOLLEDGE, Jr.
Commissioner

Wayland Water Department
Town Office Building/41 Cochituate Road
Wayland MA 01778

Attn: Donald W. Hollender, Superintendent

September 17, 2004

RE: WAYLAND
Wayland Water Department
PWS ID# 3315000
Program: Enforcement
Action: NON
Activity No.: NON-NE-04-5D030

NOTICE OF NONCOMPLIANCE

Dear Mr. Hollender:

The Department of Environmental Protection (the "Department") has determined that you are operating a Public Water Supply System as defined by the Drinking Water Regulations of Massachusetts, 310 CMR 22.00.

Department records indicate that your Public Water Supply System is in noncompliance with one or more laws, regulations, orders, licenses, permits or approvals enforced by the Department, i.e., Coliform MCL Violation.

Attached hereto is a written description of (1) each activity referred to above, (2) the requirements violated (3) the action that the Department now wants you to take, and (4) the deadline to take such action. A civil administrative penalty may be assessed for every day that you are in noncompliance with the requirements referred to in this notice as provided in G.L.C. 21A, §16.

Notwithstanding this Notice of Noncompliance, the Department reserves the right to exercise the full extent of its legal authority in order to achieve full compliance with all applicable requirements including, but not limited to, criminal prosecution, court-imposed civil penalties, or civil administrative penalties.

Please note that the Signature on this cover letter indicates formal issuance of the attached document. If you have any questions regarding this letter, please contact Jack Mullins @ 617.654.6529.

Very truly yours,
Madelyn Morris

Madelyn Morris
Deputy Regional Director
Bureau of Resource Protection

MM/cm/jtm
cc DEP/DWP/WQA, 1 Winter St. Boston
Bd. of Health, 41 Cochituate Road, Wayland MA 01778

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This information is available in alternate format. Call April McCabe, ADA Coordinator at 1-617-556-1171. TDD Service - 1-800-298-2207.

DEP on the World Wide Web: <http://www.mass.gov/dep>

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**NOTICE OF NONCOMPLIANCE
NONCOMPLIANCE SUMMARY**

NAME OF ENTITY IN NONCOMPLIANCE:

Wayland Water Department

LOCATION WHERE NONCOMPLIANCE OCCURRED OR WAS OBSERVED:

Wayland, MA

DATE WHEN NONCOMPLIANCE OCCURRED OR WAS LAST OBSERVED:

August 2004

DESCRIPTION OF NONCOMPLIANCE:

1. Four (4) routine distribution system samples, collected in August 2004, showed the presence of total coliform bacteria.
2. Failure to collect required repeat distribution system samples.
3. Failure to conduct required Chlorine Residual analysis on all distribution system samples collected.

DESCRIPTION OF REQUIREMENTS NOT COMPLIED WITH:

1. 310 CMR 22.05(8)(a)2. —For a system which collects fewer than 40 routine samples per month, if no more than one sample collected during a month is total coliform positive, the system is in compliance with the Maximum Contaminant Level (MCL) for total coliform.
2. 310 CMR 22.05 (2) (a) —If a routine sample is total coliform-positive, the public water system must collect a set of repeat samples within 24 hours of being notified of the positive result.
3. 310 CMR 22.07E (7)(c) 1.a. —Water systems that use chlorine or chloramines shall measure the residual disinfection level in the distribution system at the same point in the distribution system and at the same time as total coliforms are sampled.

ACTION TO BE TAKEN, AND THE DEADLINE FOR TAKING SUCH ACTION:

1. **By September 30, 2004**, in compliance with 310 CMR 22.16 (3) (c) 1. a. and b., you must notify persons served by your public water system of the violation noted above by:

a. Mail or other direct delivery to each customer receiving a bill, and, to other service connections to which water is delivered by the public water system, and,

b. Any other method reasonably calculated to reach other persons regularly served by the system if they would not normally be reached by the notice required in Paragraph 1.a., above, e.g., publication in a newspaper of general circulation serving the area.

2. **By September 22, 2004** you must submit to the Department at the letterhead address or by fax (617.292.5850, Attn: Jack Mullins) a **draft** public notice. Enclosed is a form notice that contains the required information for the public notice. Adapt this notice to your violation and submit to the Department for review and approval.

3. **By October 8, 2004** you must submit to the Department and to the Wayland Board of Health a signed copy of the enclosed Certification Form, filled out in its entirety, accompanied by a copy of the public notice as published/ delivered.

Date: 9/17/04

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