U. S. Environmental Protection Agency
Public Water System Supervision Program

Draft Report

Program Review for the State of New Jersey Department of Environmental Protection Division of Water Supply

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For
The Environmental Protection Agency
Office of Ground Water & Drinking Water
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List of Acronyms

ALE - Action Level Exceedance
ARRA - American Reinvestment and Recovery Act
CCR - Consumer Confidence Reports
CDS - Compliance Decision System
CDX - Central Data Exchange
CT - Contact Time
CWS - Community Water System
CWSRF - Clean Water State Revolving Fund
DBCP - Dibromochloropropane
DBPR - Disinfectants/Disinfection By-Products Rule
DWSRF - Drinking Water State Revolving Fund
EDB - Ethylene Dibromide
EDI - Electronic Data Interface
EPTDS - Entry Point to the Distribution System
FANLs - Facility Analyte Levels
FTP - File Transfer Protocol
GIS - Geographic Information System
GWUDI - Ground Water under the Influence of Surface Water
GWR - Ground Water Rule
HAA5s - Haloacetic Acids
IDSE - Initial Distribution System Evaluation
IESWTR - Interim Enhanced Surface Water Treatment Rule
IOC - Inorganic Chemicals
IT - Information Technology
LCR - Lead and Copper Rule
LIMS - Laboratory Information Management System
LT1ESWTR - Long-Term 1 Enhanced Surface Water Treatment Rule
LT2ESWTR - Long-Term 2 Enhanced Surface Water Treatment Rule
MCL - Maximum Contaminant Level
MDL - Method Detection Level
MOR - Monthly Operating Report
MRDL - Maximum Residual Disinfectant Level
NCWS - Noncommunity Water System
NOV - Notice of Violation
NRWA - National Rural Water Association
NTNCWS - Nontransient Noncommunity Water System
OCCT - Optimal Corrosion Control Treatment
ODS - Operational Data System
PE - Public Education (for the LCR)
PN - Public Notification
PR - Program Review
PWSS - Public Water System Supervision
RAA - Running Annual Average
RCAC - Rural Community Assistance Corporation
SDWB - Safe Drinking Water Branch
SDWIS/Fed - Federal Safe Drinking Water Information System

SDWIS/Fed Rep - SDWIS Federal Reporting System
SNC - Significant Non-Complier
SOC - Synthetic Organic Chemicals
SWAP - Source Water Assessment Program
SWTR - Surface Water Treatment Rule
SSWR1 - State Safe Drinking Water Information System Web Release Version 1
SSWR2 - State Safe Drinking Water Information System Web Release Version 2
TCR - Total Coliform Rule
TOC - Total Organic Carbon
TTHM - Total Trihalomethanes
VOC - Volatile Organic Compounds
WQP - Water Quality Parameters
XML - Extensible Markup Language

I. Introduction

A. Purpose of Review

During the week of November 16, 2009, a team consisting of a representative of EPA Region 2 (Region 2), Mike Lowy, and The Cadmus Group, Inc.; Valerie Meiers, Laurie Potter, Kim Clemente, and Jeffe Kennedy, conducted a Program Review (PR) in the State of New Jersey, Department of Environmental Protection (NJDEP), Division of Water Supply (DWS) offices located in Trenton. The PR serves a number of purposes:

- To verify whether information in the primacy agencies' databases and files is correctly represented in the Federal Safe Drinking Water Information System (SDWIS/Fed), Cadmus compared NJDEP's data to the most recently frozen data in SDWIS/Fed.

- To evaluate whether primacy agencies are determining compliance in accordance with the National Primary Drinking Water Regulations, Cadmus compared NJDEP's actions and policies to federally-mandated rules and policies;

- To identify specific actions that will improve the primacy agency's Public Water System Supervision (PWSS) program, Cadmus made recommendations to NJDEP that should improve its program;

- To determine whether the primacy agency has implemented recommendations identified in past reviews, Cadmus asked NJDEP staff to comment on the recommendations from the previous report and reviewed the answers against the current audit findings (Appendix A contains the list of recommendations and the state answers);

- To evaluate implementation of new requirements by the primacy agency, Cadmus asked questions and reviewed compliance information for regulations that have been implemented since the previous review; and

- To garner information on how EPA can assist primacy agencies in implementing the National Primary Drinking Water Regulations, Cadmus solicited feedback from NJDEP and made observations based on audit findings. This information should provide EPA with insight on how EPA's assistance has been most valuable and where additional assistance would be effective.

B. Description of Sample

Rather than reviewing every public water system (PWS) supervised by NJDEP, the team examined a sample of those systems, with the intention that they would provide a representative insight into the PWSS program. Table 1 identifies the SDWIS/Fed inventory for New Jersey and the number of

systems in the stratified, random sample reviewed by the team. The community water system (CWS) sample represents a 90-percent confidence level, with an error tolerance level of 7 percent. The noncommunity water system (NCWS) sample represents an 80 percent confidence level, with an error tolerance level of 10 percent. A detailed description of the sampling methodology can be found in Chapter 3 of the *EPA Protocol for Participation in a PWSS Program Review*, available from The Cadmus Group, Inc.

Table 1: Number of PWSs in SDWIS/Fed and Number Reviewed by the Team

	Number of CWSs	Number of NTNCWSs	Number of TNCWSs
SDWIS/Fed Inventory[1]	614	803	2,423
Number Reviewed By Size[2]	(25 total)	11	14
Small System	11		
Medium System	7		
Large System	6		
Very Large System	1		
Number Reviewed By Source[3]	(25 total)	(11 total)	(14 total)
SW/GU	1	0	0
Ground Water	21	11	14
SWP/GUP	3	0	0

[1]SDWIS/Fed inventory as of 10/13/09.

[2]Small: < 1,000 — Large: 10,001 - 50,000
Medium: 1,001 - 10,000 — Very large: > 50,000

[3]SW = Surface Water, GU = Ground Water Under the Direct Influence of Surface Water, P = Purchased

C. Regulations Reviewed

The team reviewed data primarily from NJDEP's Safe Drinking Water Information System State (SDWIS/State) Version 8.0 database, state-designed database applications, and hard copy files for the rules listed in Table 2.

The period of review for each of the regulations is shown in Table 2. Appendix B contains a table that summarizes any data discrepancies between state and federal records and errors in compliance determination that were identified during this review. Appendix C contains a detailed, system-specific list of each discrepancy identified during this review.

Table 2: Periods of Review

Category	Date
Inventory	Most recent
CCR	Year 2007, due 2008
Sanitary Survey	2 most recent surveys
Total Coliform Rule	Jul 1, 2008 - Jun 30, 2009
Lead & Copper Rule	2 most recent samples
Phase II/V (except nitrate)	2005 - 2007
Nitrate	2007, 2008
Stage 1 DBPR	Jul 1, 2008 - Jun 30, 2009
Revised Radionuclides	Initial and Grandfathered samples
SWTR	Jul 1, 2008 - Jun 30, 2009
IESWTR	Jul 1, 2008 - Jun 30, 2009
LT1ESWTR	Jul 1, 2008 - Jun 30, 2009
FBRR	Dec 8, 2003 - Jun 30, 2009
Public Notice	Per related violation

II. Primacy Agency Program Summary

This section outlines the program's organizational structure, its waiver program, assistance provided by the state to systems, the data system, and information about sample collection, analysis, and laboratories. Each section also outlines successes and challenges from the previous and current reviews, plus recommendations, if warranted, that may help the state improve its program.

A. Program Organizational Structure

The NJDEP drinking water program is primarily centralized except for some enforcement activities conducted in three regional field offices (North, South, and Central) for CWSs and by County agencies for most NCWSs. Program activities are primarily conducted in the DWS Water Supply Operations (WSO) Section. Enforcement activities and sanitary surveys are conducted by NJDEP's Division of Compliance and Enforcement, Water Compliance and Enforcement (WC&E) Section. There are two bureaus under the WSO: the Bureau of Safe Drinking Water Technical Assistance (BSDWTA) and the Bureau of Safe Drinking Water Implementation (BSDWI).

There are three sections in the BSDWTA:

- The Data System Development and State Revolving Fund Section is responsible for New Jersey Environmental Management System (NJEMS), Data Imaging, Geographic Information Systems (GIS), SDWIS/State, technical assistance for the New Jersey Electronic Environmental (E2) Reporting System, and the Drinking Water State Revolving Fund (DWSRF);

- The Technical Support and Capacity Development Section is responsible for field sampling, operator certification and training, capacity development, and water system assistance;

- The Water Quality Support and Source Water Evaluation Section is responsible for private well testing, source water assessment, the state's drinking water quality institute, and drinking water certification for daycare facilities.

In the BSDWI, there are two sections:

- The Data System Implementation Section which is responsible for SDWIS/State implementation and compliance determination activities, private well testing support, E2 Reporting System, design, development, and testing assistance, E2 implementation, and NJEMS interface assistance; and

- The Public Water System Management and Security Section which is responsible for compliance in the northern and southern field offices and the water system security program.

Within the DWS's Water Supply Permitting Section, the Bureau of Water System and Well Permitting handles well permitting and regulation, drinking water construction permits, and technical support for those activities.

NJDEP tracks Lead and Copper Rule (LCR) compliance for all nontransient noncommunity water systems (NTNCWSs). The New Jersey Department of Health and Human Services (HHS) also

requires LCR sampling as part of their license renewal program for schools and childcare facilities. Schools or child care facilities that are too small to meet the definition of a PWS, and therefore not regulated by DWS, must still complete the HHS LCR sampling requirements. However, the state does not have additional requirements for schools and childcare facilities that are served water by a public water supply (PWS) and do not operate their own water system.

The NJDEP has approximately 78 filled full-time equivalent (FTE) positions within the drinking water program: 16 in the Bureau of Water System and Well Permitting, 48 FTEs in WSO, and 14 FTEs in WC&E.

New Jersey's DWS program is funded by PWSS grants, DWSRF set-asides, a state tax on water delivered to consumers, and annual operation fees. NJDEP's fee system is codified at NJAC 7:10-15.4. Annual operation fees for public community water systems are divided into four classes based on population. Fees vary from $60 for a system serving less than 100 persons which has no water treatment to $3,280 for a system serving 50,000 persons or more with water treatment, as illustrated below:

Class	Fee for System without Water Treatment	Fee for System with Water Treatment
Class 1 (25-999 people)	$ 60.00	$ 120.00
Class 2 (1,000 to 9,999 people)	$ 360.00	$ 720.00
Class 3 (10,000 to 49,999 people)	$ 790.00	$1,580.00
Class 4 (50,000 or more people)	$1,640.00	$3,280.00

Program Organizational Structure Successes and Challenges

- NJDEP has a centralized program structure that relies heavily on a combination of five new electronic data management systems to facilitate the program's efforts to ensure that water systems meet the requirements of the Safe Drinking Water Act, and to meet its obligations for reporting information to the EPA. These five systems include NJEMS, SDWIS/State Release 8.0, the NJEMS/SDWIS Interface, the SDWIS Federal Reporting System (SDWIS/FedRep) Release 1.1 application, and the web-based E2.

- To ensure regulatory consistency between the WSO, WC&E and county agencies, the WSO meets every two to three months with WC&E managers to discuss outstanding issues and offers compliance training to county agencies once or twice a year.

- NJDEP feels that the current program structure is efficient but could benefit from some minor revisions. For instance, communication between the central office and the regional

offices works well, but could be refined, perhaps by more frequent formal contact between the offices.

- While NJDEP is not seriously lacking in monetary resources, there is a lack of staff resources. NJDEP has staff positions that remain unfilled due to current state hiring policies and economic conditions. This means that less time is spent on activities that might increase compliance such as training and information development.

- NJDEP wants to streamline compliance actions. NJDEP may study other states to find out how restructuring within the program may help compliance determination, such as whether the current "generalist" structure is more efficient as opposed to the "rule manager" structure.

- Overall, program implementation has improved from the previous review as illustrated by an approximately 50 percent decrease in the number of discrepancies. NJDEP's use of its five complementary databases enhances the state's program management.

Recommendations

1. NJDEP should continue to pursue its efforts to determine the most efficient program organization in regards to compliance determination. The review has noted that, in general, the "rule manager" scenario works best for a centralized program, provided that sufficient backup is on hand in the event that the rule manager is unavailable. However, NJDEP may benefit from discussing different methods of organization with other states at national meetings or conferences.

2. NJDEP may wish to enhance communication between the central office and the regional offices, perhaps by initiating additional monthly or quarterly meetings with WC&E managers and providing additional county trainings. In addition, NJDEP may wish to look in to web-based training for county personnel to cut down on travel costs.

B. Waiver Information

New Jersey's waiver program was submitted to EPA as part of the original Phase II/V primacy package and approved by Region 2 in 1994. New Jersey does not currently have plans to modify its waiver program.

Inorganic chemical (IOC) waivers are available for asbestos only. The asbestos waivers are based on either the potential for asbestos contamination in the source water or the use of asbestos cement pipe for finished water distribution and the corrosive nature of the water. NJDEP does not allow the federally-permitted "waiver by rule", or monitoring reduction based on previous sampling, as NJDEP believes that more IOC monitoring provides assurance that drinking water meets applicable standards.

Volatile organic compound (VOC) waivers for ground water systems are based on susceptibility or sensitivity. A low, medium, or high ranking is assigned to each ground water source based on soil type, predominant land use, well construction, and well location. Susceptibility/sensitivity waivers are not available to surface water systems. Use waivers are also available. To determine use waivers, a questionnaire was required for all ground water sources to determine VOC use within a calculated fixed radius of the well.

Synthetic organic chemicals (SOC) waivers are available to systems based on their vulnerability questionnaire/land use survey for each source. To confirm the waivers, the state sponsored some special SOC sampling that focused on areas with high nitrates, intensive farming, and other susceptible land uses or areas with a history of problems. Approximately 100 wells were sampled in addition to raw water samples from all surface water sources. NJDEP sampled surface water systems at base flow, and ensured that samples were collected at specified frequencies that considered storm and chemical application. If surface water intakes were located close to each other, samples were taken at the most downstream point. The Department of Health's laboratory analyzed all the samples. The state's sampling efforts revealed that SOCs rarely occurred, even in raw water. These results made NJDEP confident that the SOC waivers they grant are legitimate. The state performs a similar sampling procedure every compliance period, also using the opportunity to target new pesticides or contaminants of concern. If a problem is discovered, additional sampling is conducted at nearby systems.

SOC waiver applications are entered and maintained in an Access database and original copies are filed in SOC-specific file drawers in a central location. Waiver determinations are indicated in the Access database and waiver letters are in NJEMS.

NJDEP also developed statewide waivers. The basis for the waiver is indicated in parenthesis after each compound: chlordane (past data), dalapon (use patterns), diquat (fate and transport), endothall (fate and transport), endrin (use patterns), glyphosate (fate and transport), heptachlor (fate and transport), heptachlor epoxide (fate and transport), lindane (use patterns), methoxychlor (use patterns), toxaphene (past data), 2,4,5-TP (past data), benzo(a)pyrene (fate and transport), hexachlorobenzene (fate and transport), hexachloropentadiene (fate and transport), polychlorinated biphenyls (fate and transport), and dioxin (fate and transport). County-specific waivers issued for dibromochloropropane, ethylene dibromide, and dinoseb were based on use patterns.

NJDEP does not exempt consecutive systems from monitoring that is conducted outside the distribution systems. In addition, purchased water systems must conduct distribution monitoring (e.g., asbestos), unless they have a written agreement that the wholesaler will complete the sampling.

Waiver Program Successes and Challenges

- Waiver documentation was universally present in the file and is tracked in the state's database. The database gives the state the ability to track which systems have expiring waivers and makes it easy to notify them that they must re-apply.

- NJDEP appears to be following its waiver program. The team noted letters to systems regarding waivers in the files.

- The state has not recently conducted any analysis to determine if the waiver program reduces monitoring burden or costs to the systems. This analysis was conducted previously when the SOC program began in early 1980s.

- Maintaining the waiver program places a minimal burden on staff for VOCs, however, the SOC waiver program involves sample collection and analytical costs, plus staff resources compiling data, analyzing data, and issuing waiver letters once every three years.

- NJDEP's approach to granting waivers is to issue waivers whenever the data (source water assessments, questionnaires, monitoring data) support the decision. NJDEP notes that for SOCs, almost 99 percent of systems receive waivers. Information regarding VOC and IOC waivers was not available at the time of the review.

- NJDEP uses source water assessments in addition to vulnerability criteria for selecting SOC screening sampling sites as part of the waiver program.

- NJDEP believes that its waiver program is useful, and has no plans to change it.

Recommendations

1. NJDEP may wish to re-evaluate the current waiver program, as it has been many years since its inception and further waivers may result in cost savings for the systems and the program with no loss in public health protection. In particular, IOC "waiver by rule" may be feasible based on nearly 20 years of sampling history.

C. State Assistance

NJDEP field staff works closely with water system operators to address issues identified by sanitary surveys, investigate complaints, and offer compliance assistance.

State Assistance Successes and Challenges

- NJDEP encourages water systems to take advantage of training offered by the New Jersey chapter of the American Water Works Association (NJAWWA) and EPA. In addition, the state provides a significant amount of training to systems. NJDEP sponsors an annual safe drinking water course at Rutgers University for water system operators and county health departments. Also, the state has sponsored three sessions with New Jersey Rural Water Association (NJRWA) for county health departments on the ground water rule (GWR). NJDEP also does significant training at water conferences throughout the year to train

WC&E offices on drinking water data, and how to use SDWIS/State and Drinking Water Watch.

- NJDEP provides speakers for the NJAWWA, NJRWA, and Rutgers University Continuing Education Safe Drinking Water Act (SDWA) course on drinking water-related topics. Historically, the state has also produced newsletters to provide training information.

- In the future, NJDEP would like to see EPA provide training on sanitary surveys for central office compliance staff, WC&E program staff, and county staff. Training would be beneficial to all groups. The program finds that technical training is the most useful. The Implementation staff would like more training on field knowledge, technical knowledge, and operation and design of water systems.

- NJDEP maintains a comprehensive web site where systems can locate information on compliance, emergency response, and sampling schedules. Sampling schedules were placed on the Division's website in 2007. Beginning in 2009, schedules were available via a public version of Drinking Water Watch.

- NJDEP has provided sampling reminder letters or postcards at times in the past, but currently does not have the resources to do so.

- NJDEP also has a Small Water System Technical Assistance group in its capacity development program that can provide treatment installation assistance if needed. In general, however, water systems are encouraged to be independent when solving problems.

- Small Water System Technical Assistance staff and regional managers work with systems to maintain compliance on a case-by-case basis, but assistance is typically limited. WC&E may perform compliance assistance visits to CWSs and federal and state NCWSs in some cases such as after a violation if a system is a significant noncomplier (SNC). For NCWS SNCs, county health departments may inspect the system.

- NJDEP does not have any formal internal standard operating procedures (SOPs) at this time. The program has issued guidance letters in the past, but normally relies on the drinking water rules and federal guidance as references. NJDEP does have data entry SOPs and policy memos. The WC&E maintains a compliance inspection manual. SOPs are provided to staff as needed and NJDEP is currently working on combining all memos, guidance, and documentation into a single document so references will be easier to find.

- If a system has an MCL exceedance, NJDEP provides a notice of violation (NOV) letter that is customized for each rule, and attaches an example of an appropriate Public Notification (PN) form that the systems can fill out and forward to customers.

- NJDEP has not documented whether the provided trainings and educational opportunities have improved compliance with the rules.

Recommendations

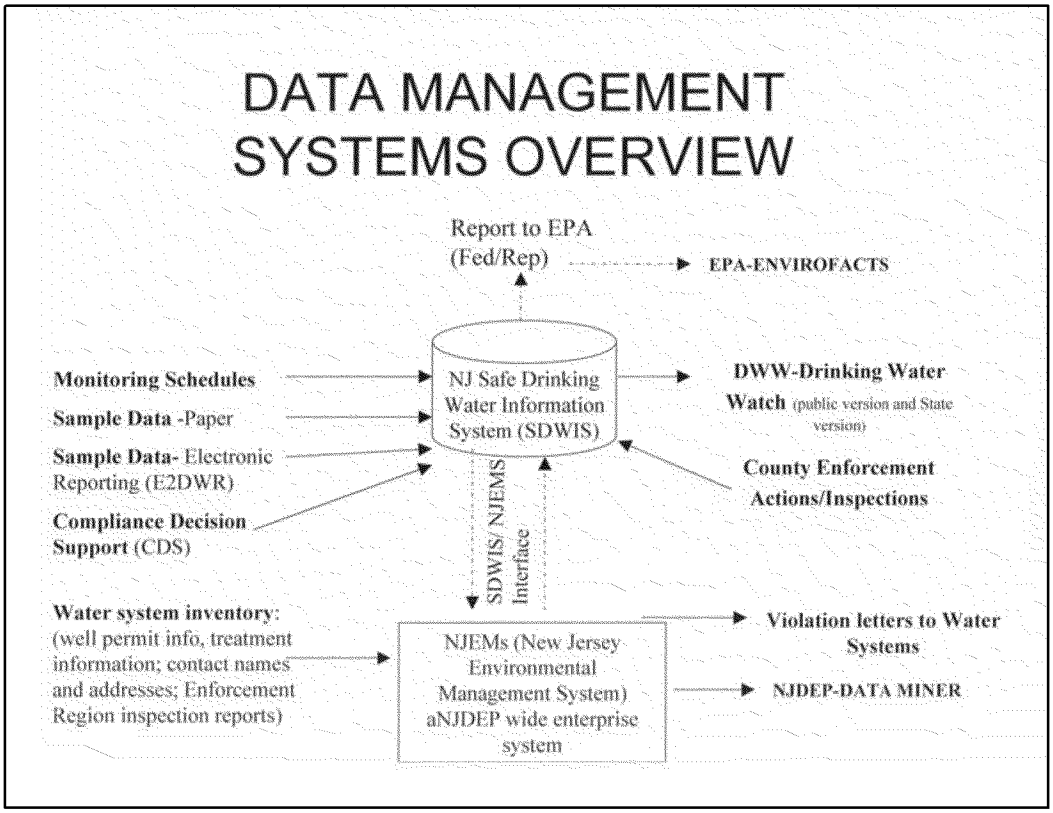
1. Region 2 and NJDEP should continue to explore every opportunity for additional rule training whenever possible.

2. NJDEP should continue to coordinate the gathering of its SOPs into a single comprehensive guidance document for ease of reference.

D. State Data System

As noted in Section II.A. NJDEP relies on a combination of five new electronic data management systems to facilitate the program's efficacy. These five systems include NJEMS, SDWIS/State, the NJEMS/SDWIS Interface, SDWIS/FedRep, and the E2 Reporting System for data storage and compliance determination. NJDEP's data management systems' relationships are somewhat complicated, and may be better understood by viewing the illustration below.

As shown in the illustration, all compliance data are entered into SDWIS/State and all inventory



information is entered into NJEMS. The SDWIS/NJEMS Interface transfers information back and forth between SDWIS/State and NJEMS. Reporting of compliance and inventory information is completed from SDWIS/State. NJEMS is used to produce, among other things, violation letters. SDWIS/State is used to produce the state's version of Drinking Water Watch, which the review found to be an excellent interface for working with the state's data.

Compliance determination is automated for the Total Coliform Rule (TCR), Phase II/V rules including nitrate and arsenic, the Revised Radionuclides Rule, the LCR, Surface Water Treatment Rules (SWTRs), Total Trihalomethanes and Haloacetic Acids (TTHM/HAA5s), maximum residual disinfectant levels (MRDLs), Total Organic Carbon (TOC), Consumer Confidence Report Rule (CCR), and the PN Rule. Compliance is not automated for the Filter Backwash Recycling Rule (FBRR).

Data are transferred to SDWIS/Fed using the Exchange Network Node. Updates are transmitted as required for federal reporting, or every 45 days, to allow NJDEP adequate time to evaluate, update, or correct errors, where needed, before the final quarterly submissions are due to EPA.

NJDEP reports violations to SDWIS/Fed by source or entry point rather than by system.

NJDEP microfilms hard copies of analytical results and correspondence periodically, however any electronically reported results are electronically archived. All records are retained with no time limit.

Data System Successes and Challenges

- Files and database information were complete and contained detailed documentation and correspondence with systems, particularly when discussing requirements of new rules.

- Over the past two years, NJDEP has been moving toward electronic data reporting from laboratories. As of July 2009, all sample data for Transient Noncommunity Water Systems (TNCWSs) must be reported electronically. CWSs and NTNCWSs will be required to submit data electronically beginning April 1, 2010. Some of these systems are already reporting electronically. Currently, the E2 reporting system can receive the following data electronically: asbestos, lead, copper, total and fecal coliform and *E. coli*, nitrate, nitrite, and total nitrite/nitrate, secondary compounds, HAA5s, TTHMs, IOCs, VOCs, SOCs, iron, manganese, and water quality parameters. These data can be submitted to the state daily.

- There are several parameters that cannot be reported electronically at this time due to the limitations of the first phase of design for NJDEP's E2 reporting system. E2 does not capture summary data or the analytes listed below due to the complexity of the reporting requirements: radiologicals, DBP precursors (alkalinity, TOC), chlorite disinfection residuals (chlorine residual, chloramine residual), chlorine dioxide individual filter assessments, Interim Enhanced Surface Water Treatment Rule (IESWTR) turbidity individual filter exception reports, monthly operating reports (MORs) for ground water

systems Initial Distribution System Evaluation (IDSE) data, and MORs for surface water treatment plants.

- NJDEP believes that electronic data submission greatly assists in compliance determination.

- NJDEP would like to develop custom reports for its databases, including those that prompt for new monitoring schedules when needed. SDWIS/State's report for this purpose is not very user-friendly. The program also has difficulty with generation of violation or correspondence letters for the LCR and Disinfectants/Disinfection By-Products Rule (DBPR). These rules require determination of compliance for major and minor violations and may include multiple violation types under one category, so letters cannot be efficiently produced. In addition, the program would like to develop customized reports to assist with quality assurance (QA).

- NJDEP's web site which contains annual compliance schedules is very useful for compliance tracking and providing compliance information for systems.

- NJDEP has no problems or issues reporting data to SDWIS/Fed and uses the SDWIS/FedRep error checking routines. NJDEP receives and reviews the SDWIS/FedRep job and error reports, and in general finds them helpful in identifying errors, but has noted that sometimes staff does not know how to use the reports. NJDEP corrects errors on a limited basis, within available time constraints.

- NJDEP finds that its biggest data management problem is maintaining data quality and ensuring data synchronization within its various data management systems.

Recommendations

1. NJDEP should continue with efforts to require all PWSs to report any applicable data electronically, particularly the further development of the E2 reporting system. This effort will greatly reduce the late submission of data and improve the program's monitoring and reporting (M/R) compliance rates.

2. NJDEP should continue in its efforts to develop customized applications for its databases, specifically those that assist in compliance tracking and QA activities.

3. NJDEP is encouraged to contact other states to discuss obtaining ideas for tips and short cuts for reporting data to the E2 reporting system. Several states have developed excellent electronic forms (i.e., for surface water MORs) and may be willing to share them.

4. The state and Region 2 should discuss any difficulties understanding how to address errors detected by SDWIS/FedRep reports, if the state is uncertain what the reports indicate.

E. Sample Collection, Analysis, and Laboratory Certification

PWSs in New Jersey are required to complete all compliance sampling. NJDEP does not offer systems any sampling assistance and systems must complete and pay for analysis of all sampling. Systems are responsible for delivering all samples to their chosen laboratory. NJDEP may collect samples for investigative purposes only. The state collects "profile" samples at CWSs and NTNCWSs every few years, for example, which are check samples to confirm what the system is reporting. The state may also do special sampling (i.e. sampling NTNCWSs for radionuclides).

Both the state laboratory (the New Jersey Department of Health and Senior Services Laboratory) and state-certified commercial laboratories provide analytical services to water systems. The state laboratory does a small number of nitrate and coliform samples, but mainly completes analysis for radionuclides. About 20 percent of systems' radionuclides samples are analyzed by the state lab; for other compounds, less than one percent of analyses are completed by the state lab.

New Jersey's laboratory certification program also resides under the NJDEP in the Division of Environmental Safety and Health, Office of Quality Assurance (OQA). Frequent contact and discussion of issues is maintained between NJDEP and the OQA. DWS personnel include staff trained under the OQA. In fact, the technical support section is certified for sampling by the laboratory.

Both routine and confirmation samples are delivered to laboratories via hand delivery or shipped by U.S. mail or commercial courier. Data are received by NJDEP on state forms and are entered into SDWIS/State at the central office or electronically via the E2 reporting system.

Inventory and sanitary survey data are stored in hard copy files in the central office. In addition, sanitary surveys for CWSs are stored both in SDWIS/State and NJEMS. CCR information from 2007-2009 is stored in hard copy files in the central office. Hard copies of CCRs and CCR certifications before 2007 are stored in the NJDEP's warehouse facility located in Trenton, NJ. Analytical results and correspondence for the rules is stored both in hard copy files in the central office and in SDWIS/State.

Central office Data System Implementation Section staff completes M/R compliance and the PWS Management and Security completes MCLs. Implementation staff complete M/R compliance using SDWIS/State and send NOVs directly to systems. For MCL exceedances and LCR action level exceedances (ALEs) the implementation staff identify MCLs and make hard copies of the result. Copies are then forwarded to regional managers and their supervisors. Regional managers prepare MCL NOVs that require corrective actions including public notice to be performed. For QA purposes, all MCL NOVs must be signed by a supervisor. All violations are stored and tracked in both SDWIS/State and NJEMS. NJDEP depends mostly on the activity tracking function in NJEMS to track violations.

Hard copy chemical analyses are received by the NJDEP and are entered into SDWIS/State or received electronically via the E2 reporting system. Chemical violations are assigned and tracked in the same manner as for the TCR.

Sample Collection, Analysis, Laboratory Certification Successes and Challenges

- As noted earlier in the report, NJDEP is working toward expanded electronic reporting of laboratory results via the E2 reporting system.

- Currently, NJDEP rescinds or invalidates violations if systems send sample results to the state before the state runs compliance, but more than 10 days after the end of the compliance period. The review noted that this policy was responsible for many of the discrepancies found during the review.

Recommendation

1. NJDEP is required to assign violations to systems that submit results more than 10 days after the end of the compliance period.

   NJDEP notes in comments on the recommendations from the previous report that, *Yes, it is still our policy to revise the status of validated violations to "rejected" should the sampling results be submitted rather than return them to compliance. Because EPA has never distinguished between failure to sample versus a late submittal, NJ continues to believe this policy is appropriate. It should be noted that a number of CWSs were penalized for chronic late submittals which was easy to determine under our procedure. However, please note with electronic reporting now required for TNCWSs and to be required in April, 2010 for CWSs and NTNCWSs, this issue is becoming less prevalent and we expect this issue to virtually disappear by next year. We anticipate ending the practice of rejecting violations no later than July 1, 2010.*

2. The team supports the state's initiative to have universal electronic reporting, to avoid data entry delays that may limit NJDEP's ability to make timely compliance decisions.

III. Program Implementation

This section outlines program implementation, successes and challenges from the previous and current reviews, and recommendations that may help the state improve its program.

A. General Program

New Jersey's primacy status is shown in Table 3. As the table describes, approval of the primacy application packages for the most recent rules is imminent and the state is up-to-date on most approvals.

In some instances, NJDEP's state requirements are more stringent than federal requirements, including several MCLs, monitoring frequencies for coliform, and mandatory monitoring for secondary contaminants.

VOCs and SOCs with more stringent MCLs include benzene, carbon tetrachloride, chlordane, 1, 2-dichloroethane, 1,2-dichloroethylene, methylene chloride, monochlorobenzene, tetrachloroethylene, 1,2,4-trichlorobenzene, 1,1,1-trichloroethane, 1,1,2-trichloroethane, and trichlorethylene and xylenes. VOCs that have state MCLs but no federal MCLs are meta-dichlorobenzene, 1,1-dichloroethane, methyl tertiary butyl ether, naphthalene, and 1,1,2,2-tetrachloroethane.

The only inorganic contaminant with an MCL more stringent than the federal MCL is arsenic.

The federal rules do not expressly require disinfection by CWSs using only ground water as a source. The state SDWA rules require all public CWSs using only ground water as a source to disinfect, with the exception of those that serve 100 or fewer dwellings or properties. However, those serving 100 or fewer dwellings or properties must increase the number of microbiological samples collected, which is also more stringent than the federal rules.

Table 3: Primacy Status in New Jersey

Rules	Primacy Revision Application or Program Update	
	Status	Comments
New PWS Definition	Primacy	
Administrative Penalty Authority	Primacy	
CCR	Primacy	
TCR	Primacy	
Phase II/V	Primacy	
LCR	Primacy	
SWTR	Primacy	
Interim Enhanced SWTR	Primacy	
Stage 1 DBPR	Primacy	
LCR Minor Revisions	Interim	Submitted to Region 2 in June 2009. Approval imminent.
PN	Primacy	
Revised Radionuclides	Primacy	
Arsenic	Interim	Submitted to Region 2 in June 2009. Approval imminent.
FBRR	Primacy	
LT1ESWTR	Primacy	
Variances and Exemptions	Primacy	
Operator Certification Program	Primacy	
Operator Certification Expense Reimbursement Grant (ERG)	Interim	Extension signed by Region 2 on August 25, 2009
Stage 2 DBPR	Extension	Extension submitted to Region 2 in May 2009. New primacy application deadline January 4, 2010
LT2ESWTR	Extension	Extension submitted to Region 2 in May 2009. New primacy application deadline January 4, 2010
GWR	Extension	Extension submitted to Region 2 in May 2009. New primacy application deadline January 4, 2010
LCR STR	Extension	Extension submitted to Region 2 in May 2009. New primacy application deadline January 4, 2010

Additionally, the state SDWA rules contain microbiological monitoring requirements more stringent than those contained in the federal rules since state microbiological sampling frequency cannot be reduced to less than one sample per month for a PWS serving 25 to 1,000 persons, as is permitted under the federal rules.

The NJ SDWA rules also include more stringent requirements for some secondary contaminants, i.e., those that affect the taste, and odor, or aesthetics of the drinking water or affect the aesthetics of the

drinking water. Specifically, the federal rules at 40 CFR 143.4 only recommend monitoring of secondary contaminants. The NJ SDWA rules require the monitoring of secondary contaminants.

General Successes and Challenges

- Primacy for arsenic is currently under review by EPA Region 2. The application was sent in June 2009. NJDEP is currently working on the primacy application for the Stage 2 DBPR, Long-Term Enhanced Surface Water Treatment Rule (LT2ESWTR), LCR Short Term Revisions (LCR STR), and GWR. The state received an extension to complete the primacy application for these rules and anticipates the application for these rules to be submitted to EPA in January 2010.

- Although NJDEP tracks all violations, both federal and state, and reports all violations of the federal requirements to SDWIS/Fed, the state does not typically report violations of state requirements to SDWIS/Fed.

- NJDEP does not employ any variances or exemptions.

- NJDEP has approximately 56 water system operators that operate more than five PWSs. According to New Jersey Administrative Code 7:10A-1.10(h), a licensed operator must demonstrate the capability to operate if he is planning to serve as the operator for more than 10 public water systems.

- One contract operator operates approximately 70 systems, but more than one operator may work on a particular system under this contract. If a system under a contract operator experiences problems or issues that cause violations, NJDEP will evaluate whether the operator is working efficiently and encourage them to make adjustments. NJDEP does not limit the number of water systems a single operator can operate.

- NJDEP does not have a written "new system" policy, but is currently in the process developing one. Most new systems are discovered by the county health departments. The system is assigned an identification number by the central office and sent a letter notifying them of their monitoring requirements. The system must begin monitoring as soon as the letter is received, although NJDEP notes that there has been a recent lag in assignment of identification numbers, which creates problems as the number is required for NJDEP to process any sampling results. NJDEP is trying to eliminate the delays.

Recommendations

1. New systems should be assigned violations if they fail to sample on the schedule created by the state.

B. Inventory

NJDEP's inventory information is maintained both in NJEMS and SDWIS/State. NJDEP obtains inventory information mainly from sanitary surveys. Data from the state's legacy system was transferred into NJEMS in the early 2000s, and NJEMS is the official location of inventory data. Recently, the same inventory information was transferred to SDWIS/State, overwriting the previous information. Until 2007, monitoring schedules were mailed out to systems along with inventory confirmations and some systems notified the state of needed revisions. However, this practice is no longer used and NJDEP relies solely on sanitary surveys and system correspondence for inventory updates.

Regional managers within BSDWI are responsible for entering inventory information into NJEMS from sanitary survey forms, as received. NJEMS data is mirrored in SDWIS/State via the SDWIS/NJEMS interface.

Service connections and population are determined based on documentation provided by the water supplier. In the absence of verifiable data, the state uses a 2.5 multiplier.

Inventory Successes and Challenges

- In the past, NJDEP had some issues with grant eligibility data not being correctly transferred to SDWIS/Fed. These issues have been corrected and QA of grant eligibility information is ongoing. NJDEP noted that this information is now provided to SDWIS/Fed on a quarterly basis. The problem was confined to a very small number of water systems overall and was determined to be related to how or whether the interface application managed this data between the NJEMS and SDWIS/State systems. Some problems continue to be found and are corrected on a regular basis when NJDEP checks the grant eligibility report.

- In 2006, one NTNCWS had become a CWS and another had become a TNCWS and neither had been updated in SDWIS/Fed. Two CWSs showed incorrect source types, and one NTNCWS showed a number of service connections that was greater than 10 percent different from the value in SDWIS/Fed.

- During the current review, two inventory discrepancies were identified: one for a TNCWS that should have been listed as an NTNCWS and one system with an incorrect name in SDWIS/Fed. NJDEP notes that one of the discrepancies is due to mishandling of data in the SDWIS/NJEMS interface, which they have been trying to correct for some time.

- In 2006 90.9 percent of NJDEP's systems were grant eligible. In 2009, 99.7 percent of systems were grant-eligible.

Recommendations

1. NJDEP should ensure that the communication of inventory data via interface between NJEMS and SDWIS/State is checked regularly to prevent mishandling of data.

C. Sanitary Survey

Sanitary surveys are performed by WC&E program personnel in the three regional field offices. The WC&E personnel complete annual CWS inspections plus inspections for federal and state NCWSs, amounting to approximately 25 percent of the TNCWSs and 50 percent of the NTNCWSs. County health department personnel are responsible for the remainder of sanitary surveys and inspections for NCWSs.

The information collected during sanitary surveys is entered into the NJEMS tracking system and is available to all staff in the Department. NJEMS is used for entry and tracking of sanitary survey compliance schedules and is linked to follow-up actions to ensure that flagged deficiencies are corrected. Regional office supervisors are responsible for review of all sanitary surveys, including those performed by county personnel. Surveyors are responsible for identification of deficiencies and for producing a schedule for correction of any noted items.

NJDEP normally does not give systems any advance notice of a sanitary survey unless advance notice is required to ensure that the correct facility representative will be present at the inspection. Before conducting a sanitary survey, inspectors conduct a review of NJ's Drinking Water Watch to note any outstanding violations or NOVs. The inspectors also produce an inspection checklist from NJEMS to use on-site and then enter gathered data back into NJEMS.

The format of NJDEP's sanitary surveys conforms to the eight required elements set out in the IESWTR and is currently being modified to include significant deficiencies. The same approach to sanitary surveys is used for both surface and ground water systems. NCWS sanitary surveys are generally less detailed than those for CWSs. NJDEP notes that as surveys are improved for both CWSs and NCWSs, the difference in detail will likely remain as most NCWSs have little treatment or storage and many elements of the CWS sanitary survey do not apply.

Surveyors normally inform the systems of sanitary deficiencies while on-site and via letter within 30 days or less of the survey site visit. If warranted, a NOV may be issued by the inspector at the time of the sanitary survey. The letter includes a schedule with dates for correction of deficiencies. Systems notify NJDEP that deficiencies have been corrected in writing, via phone call, or during site visits, depending on the system and severity of the deficiency.

Sanitary deficiencies are entered into the inspection checklist stored in NJEMS. Deficiencies are not tracked by system type and/or size. NJDEP previously tracked which deficiencies are most common and hopes to return to tracking this information in the future. Although not tracked, NJDEP knows that

the most common deficiencies are violations for sampling and reporting, insufficient storage or undersized water mains, and licensed operator issues such as incorrect operator classification.

The average time it takes to correct significant deficiencies is not specifically tracked since correction time varies greatly depending on the deficiency and whether construction is needed to correct the problem. If a system fails to correct a deficiency, NJDEP has the ability to issue a NOV or an Administrative Penalty.

Sanitary Survey Successes and Challenges

- The state's sanitary survey frequency goals are annually for CWSs, every two years for NTNCWSs, and every four years for TNCWSs. Survey frequency has not changed over the past five years. The frequency for consecutive systems does not differ from non-consecutive systems. NJDEP reviews the progress of its sanitary survey goals every year.

- NJDEP completes its survey with the same number of staff that it had five years ago. In addition to drinking water sanitary surveys, inspectors also perform inspections for National Pollutant Discharge Elimination System and the Water Allocation Program. Some county personnel also complete hazardous waste, air, underground storage tank, ocean beach monitoring, and possibly food service inspections.

- NJDEP notes that inspection staff has more responsibilities in the field than five years ago; therefore, they have less time to gain experience and training to be 100 percent effective in completing sanitary surveys.

- NJDEP does not require that TNCWSs have a licensed operator unless the system has treatment. If a system has treatment, they must employ a licensed operator. NJDEP maintains a very small system operator classification that TNCWSs with treatment may employ.

- NJDEP does not assign violations to PWSs for failure to have a sanitary survey because the state schedules and conducts the surveys.

- The NJEMS tracking system tracks sanitary survey progress minutely in order to ensure consistency in program implementation and sanitary surveys performed across the state. The tracking system even tracks how long it takes to complete surveys and reports.

- NJDEP does not require certification to conduct sanitary surveys. While periodic training is provided by EPA, NJDEP depends mostly on mentoring to train staff; new inspectors accompany an experienced inspector on surveys. NJDEP would like to develop a training/certification program but has not made the final decision to initiate a program at this time.

- While source water assessments are not updated during a sanitary survey, survey personnel may refer a system to the Water Quality Support and Source Water Evaluation Section if the system could benefit from the program's expertise.

- NJDEP is just beginning to develop a list and protocol to identify "significant" deficiencies. NJDEP has researched what other states have done, but has not completed a policy at this time. As noted above, if a deficiency is serious, a NOV may be issued during the field visit.

- During the 2006 review, one sanitary survey discrepancy was identified for one NTNCWS. The system had sanitary surveys conducted more than five years apart.

- During the 2009 review, one sanitary survey discrepancy was identified. The TNCWS had sanitary surveys done more than five years apart.

Recommendations

1. NJDEP must assign and report sanitary survey violations to EPA for non-Subpart H (ground water) systems if surveys are not conducted at the proper intervals and the system collects fewer than five routine samples. (The TCR requires that systems either collect five routine samples or conduct sanitary surveys on a five-year frequency.)

2. NJDEP should continue its efforts to identify of "significant" deficiencies and develop a protocol for assigning them.

D. Consumer Confidence Report Rule

CCR information is stored and tracked in MS Excel spreadsheets. Hard copies of CCRs and CCRs certifications are date stamped and logged into the MS Excel Spreadsheets and the spreadsheets are stored on the NJDEP's electronic shared computer network.

Violations are managed by the NJDEP's WC&E and all follow-up is conducted through that Office. WC&E does enforcement for all other environmental programs as well. The Drinking Water program can issue M/R and MCL violations within the program, while most other programs have enforcement do all violations. WC&E also does consent orders and all other actions.

Consumer Confidence Report Successes and Challenges

- Violations are assigned by NJDEP if CCRs are not received by July 1st, and if CCR Certifications are not received by October 1st of each year.

- NJDEP does not currently assign and report violations to SDWIS/Fed if a CCR is determined to be inadequate. In addition, the accuracy and completeness of CCRs is not verified for all CCRs.

- During the 2006 review, thirteen CCR discrepancies were identified for eleven communities that failed to send their CCR by the July 1 or certify by the October 1 deadline.

- During the current review, 16 CWSs had 20 discrepancies for failure to submit CCR materials by the appropriate deadline.

- NJDEP notes in comments on the CCR discrepancies that, *the state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.*

Recommendations

1. NJDEP must report CCR violations to SDWIS/Fed for systems that fail to send CCRs to consumers by July 1 or submit certification to the state by October 1. As noted above, the state intends to begin assigning violation during 2009.

E. Total Coliform Rule

If a total coliform positive sample is detected, NJDEP is normally informed when the result on the reporting form is being data entered into SDWIS/State or comes into the E2 reporting system. If the result is fecal or *E. coli* positive, then the lab must immediately notify the water system the same day or the next business day if the system is closed. The laboratory or water system may call or send an email or a fax to NJDEP. Laboratories are only required to notify NJDEP of fecal or *E. Coli* results. Systems have the responsibility to notify the state of MCL violations but labs usually complete the notification. In both instances, NJDEP validates the result in SDWIS/State and creates the schedules for repeat and temporary increase to five routine samples in the next month. If systems fail to take five samples in the month following a positive result, an M/R violation is created by SDWIS/State.

Data Implementation staff run compliance in SDWIS/State and validate M/R violations. Regional managers in the BSDWI validate MCL violations. If an MCL violation is determined, regional managers must issue an NOV for acute coliform MCL violations within two days of becoming aware of the results and within 30 days for monthly coliform violations as per their Performance Evaluation Agreement. Regional managers must also validate positive coliform results in SDWIS/State daily. Data Implementation staff provide hard copies of results that show positive coliform results after entry into SDWIS/State.

To request invalidation of a sample, the laboratory must prepare an invalidation request that is forwarded to NJDEP's Quality Assurance/Quality Control (QA/QC) coordinator for review and

preparation of a response. All other invalidation requests are handled by regional managers with their supervisors signing the letter denying or giving their approval. Invalidation approval is documented in writing via a letter to the system or laboratory.

Total Coliform Rule Successes and Challenges

- NJDEP notes that the state attempts to adhere to the 24 hour limit for repeat sample collection, but it is difficult for laboratories to contact system owners or operators, particularly around weekends and holidays. However, if a system is essentially closed over the weekend, then the public health risk is not present and NJDEP will allow an extension beyond 24 hours. If repeats are submitted very late, or as much as seven days later, the state will not accept the results and create an M/R violation.

- Regional managers and sometimes staff from the Small Water System Technical Assistance group are responsible for working with systems that have TCR problems. The amount of assistance provided is on a case-by-case basis, and quite limited.

- TCR sampling plans are initially reviewed for CWSs when systems are established. In addition, plans may be reviewed during inspections and at other times when issues arise.

- The state's SOPs for compliance determination and TCR are as described above. NJDEP routinely provides systems with draft public notice attached to the MCL Notice of Noncompliance (NON) letter.

- In the 2006 review, the team noted that the state accepted TCR samples after the reporting deadline for 16 systems (which received a total of 46 discrepancies), but failed to assign a violation. One system had an MCL exceedance, but the state did not report the violation to SDWIS/Fed. One M/R violation was assigned by NJDEP but was not reported to SDWIS/Fed. The team confirmed 10 M/R violations and one MCL violation that were assigned by the state and reported to SDWIS/Fed.

- During the current review, 42 compliance determination discrepancies were identified. Twenty two discrepancies were due to two systems serving more than 4,900 persons taking all TCR samples on the same day rather than on different days throughout the month. Sixteen discrepancies were assigned because NJDEP received system's TCR samples more than 10 days after the end of the month: SDWIS/State assigned violations that were later invalidated when NJDEP received the results. One system had a discrepancy for a violation that had not been reported to SDWIS/Fed in the quarter after it occurred, or late compliance determination. One discrepancy was assigned for a system that failed to take five samples in the month following a positive result and two discrepancies were assigned to systems that failed to take sufficient repeat samples.

- NJDEP correctly determined and reported nine TCR violations.

Recommendations

1. NJDEP must report violations to SDWIS/Fed in the quarter after they occur.

2. NJDEP is required to assign violations to systems serving 4,900 persons or more that do not complete TCR sampling on different days throughout the month.

3. NJDEP is required to assign violations to systems that submit results more than 10 days after the end of the compliance period.

4. Systems that fail to take all or adequate repeat samples or additional routine samples in the month after a positive sample should be assigned M/Rs.

F. Phase II/V Rule

Analytical results are stored in SDWIS/State. See Section II.E. for a more detailed explanation of Phase II/V compliance determination.

Phase II/V Rules Successes and Challenges

- NJDEP does believe that point of use (POU) or point of entry (POE) devices are protective of public health. The state would not typically approve the use of these devices.

- NJDEP has approximately a dozen non-community water systems that it allows to meet the 20 mg/L nitrate MCL.

- NJDEP does not issue exemptions or variances. NJDEP does maintain many state MCLs that are more stringent than federal requirements as noted in Section III.A.

- During the 2006 review, the team found a total of 42 discrepancies. Reasons for discrepancies included:

    - System did not provide results and no violations were assigned;
    - Results were reported but no entry point or an incorrect entry point was noted;
    - State reported a violation to SDWIS/Fed, although the result was found and it was received before the reporting deadline;
    - IOC M/R violation was incorrectly reported to SDWIS/Fed; data was found and the results were submitted on time;
    - VOC discrepancies were identified (laboratory did not use the correct detection limit, M/R was assigned incorrectly);
    - SOC discrepancies were identified: (four samples did not meet the Regional Achievable Detection Levels one system did not sample and the state believed they

had a waiver but could not find the documentation, and a discrepancy occurred when a system with a population greater than 3,300 did not sample in two quarters in the same year).

- In 2009 review, 12 discrepancies were found:
  - Five nitrate discrepancies were found: one discrepancy was assigned for a violation that was incorrectly present in SDWIS/Fed and four discrepancies assigned for results received more than 10 days after the end of the compliance period where violations were assigned and later rejected when results were received.
  - Three IOC discrepancies were identified for results received more than 10 days after the end of the compliance period where violations were assigned and later rejected when results were received.
  - Four VOC discrepancies were identified; one discrepancy was assigned for a violation that was incorrectly present in SDWIS/Fed and four discrepancies assigned for results received more than 10 days after the end of the compliance period where violations were assigned and later rejected when results were received.

- NJDEP correctly assigned and reported two nitrate/nitrite, two IOC, and one VOC violations to SDWIS/Fed, for a total of five.

- The team noted that all previous recommendations from the 2006 review were addressed.

- The team noted significant improvement in compliance for the Phase II/V rules.

Recommendations

1. As noted in previous sections, NJDEP should assign violations to systems that submit results more than 10 days after the end of the compliance period.

2. NJDEP should ensure that incorrect violations are removed from SDWIS/Fed in a timely manner.

G. Filter Backwash Recycling Rule

NJDEP has fewer than 20 systems in the state that are subject to the FBRR. There were only one or two systems that were required to complete capital improvements and the systems complied. Copies of the system's FBRR notification is on file in the central office and the system's FBRR records are reviewed during its sanitary survey.

FBRR Successes and Challenges

- NJDEP's identification of systems subject to the FBRR was a one-time effort and the state is not aware of any treatment technique (TT) violations. FBRR information from the beginning of the rule is now stored in the warehouse or on microfilm.

- There were no systems reviewed that were subject to FBRR requirements during 2006. During the 2009 review, no FBRR discrepancies were identified.

Recommendations

1. None.

H. Stage 1 and Stage 2 Disinfectant and Disinfection By-Products Rules

All systems in New Jersey began monitoring and reporting results to the state on time for DBPR. Chlorine residual data are entered from summary forms submitted by the systems into SDWIS/State. NJDEP uses the SDWIS/State Compliance Decision System (CDS) to calculate some monthly and quarterly averages, but not all.

As for all other rules, regional managers must issue an NOV for DBPR MCL violations within 30 days of becoming aware of the results as per their Performance Evaluation Agreement. Implementation provide a hard copy of results that show MCL exceedances after entry into SDWIS/State.

No TNCWSs in the state use chlorine dioxide for disinfection.

NJDEP initially reviews monitoring plans when a system is established. Monitoring plans may also be reviewed during regular inspections and at other times when issues arise.

New Jersey regulates consecutive systems under Stage 1and Stage 2 DBPR and requires all consecutive systems to monitor for DBPR. NJDEP is not aware of any particular issues or challenges that effect small or consecutive systems regarding the DBPRs.

For TTHM/HAA5 sampling, water systems are allowed to sample in the third quarter. If the system doesn't monitor in that time frame, a violation is assigned. Violations are tracked manually outside of SDWIS/State.

NJDEP does not have a standard description of significant treatment changes that would require profiling and benchmarking, but deals with this situation on a case-by-case basis. NJDEP does not specifically track systems that have results close to MCLs.

NJDEP requires that systems report to the state on standardized reporting forms. Systems are required to submit summary data for chlorine residuals and all data for TTHMs and HAA5s. Running annual averages for TTHM and HAA5 compliance are calculated by the systems, and then checked by regional managers. The same process is used for TOC compliance. If a system does not complete compliance calculations or completes them incorrectly, NJDEP will follow up with the system and assign a violation if necessary.

Stage 1 and Stage 2 Disinfectant and Disinfection By-Products Rules Successes and Challenges

- NJDEP performed test TTHM and HAA5 compliance calculations for the systems in the review sample; however, the state is not completing TTHM and HAA5 compliance universally at this point.

- RAAs are not calculated for MRDLs, as the current reporting form only requires that systems calculate a monthly average of results. NJDEP notes in comments on the exhibits to the report, that: *the RAA value in SDWIS/State defaults to 0. NJDEP is not entering a running annual average even if it is reported on the form because many errors were observed in the past. The form needs to be redesigned. As of the time of the review, compliance has not been run for chlorine residuals. However, the concern of exceeding 4.0 mg/L as an annual average is non-existent.*

- NJDEP does not maintain individual samples for distribution system chlorine residual. Systems supply summaries to NJDEP containing the number of samples collected and the average for each month. NJDEP hopes to receive all chlorine residual results electronically in the E2 Reporting System beginning in April 2010. The state plans to compare samples with TCR at that time for QA purposes.

- As noted above, NJDEP does not track systems that may be close to the MCLs. The state does have a Small Water System Technical Assistance group but they would not normally be engaged with systems under this rule. The regional managers from the BSDWTA and engineers from the Bureau of Water System and Well Permitting would be involved with the water system if there were issues. In addition, there may be input from the WC&E inspector. The amount of assistance offered would vary on a case-by-case basis, but generally is quite limited.

- Several issues were noted during the previous review and were addressed by NJDEP:

    - The 2006 review recommended that NJDEP ensure that systems that fail to monitor for or submit required compliance calculations for distribution system chlorine residual, TTHMs, and HAA5s receive violations and report them to SDWIS/Fed. NJDEP responded to the recommendation by noting that: *Compliance was just recently run for five years of DBPs. Violations were validated and NOVs issued. Compliance has not yet been run for distribution system chlorine residuals.* The

review found this to be correct, although this review reflects discrepancies due to late compliance determination.

- It was recommended that the state ensure that systems collect the same number of MRDL samples as TCR samples, unless otherwise outlined in a system's DBPR sampling plan. Systems that fail to do so should be assigned violations and those violations should be reported to SDWIS/Fed. NJDEP notes that: *No efforts were placed on this issue since the last audit. However, the 2006 and the 2009 audits did not uncover any systems with different numbers of chlorine residual samples versus TCR samples except a few systems that elected to take more chlorine residuals which NJDEP believes is acceptable and does not constitute a violation.* The review agrees with this approach as long as the system designates where it takes the extra samples in its required sampling plan.
- It was further recommended that NJDEP ensure systems collect TTHM and HAA5 samples at every water treatment plant and use the results from all plants to calculate the RAA. Systems that fail to calculate their RAA correctly should be assigned a violation, which should be reported to SDWIS/Fed. NJDEP notes that: *All applicable results are used to calculate the RAA. Since SDWIS/State calculates the RAA, we would not assign violations if systems fail to calculate the RAA or fail to calculate it correctly. Violations are assigned and NOVs issued. RAA violations for TTHMs/HAA5s are rare. Very few have been reported over the years.* The review agrees that the system does not receive an M/R if the state calculates a different RAA value and uses its calculations for compliance. However, if no calculation is completed, a violation must be assigned and reported.

- In 2006, the review found 192 compliance determination discrepancies: The majority (128) were for failure to monitor or report the MRDL. In addition, 10 discrepancies were identified for missing RAA calculations for MRDLs; eight discrepancies were identified because systems submitted their MRDLs late; and 11 discrepancies were identified because systems did not collect their MRDLs at the same time and place as TCR. Thirty-five discrepancies were assigned for failures to sample for TTHMs or HAA5s, or for missing RAA calculations.

- During the current review, 42 discrepancies were assigned, representing an improvement over the previous review. Most discrepancies (14) were assigned for systems failing to sample and violations assigned but not reported to SDWIS/Fed in the quarter after they occurred; another 11 discrepancies were assigned for systems that failed to calculate and/or report RAAs for MRDLs. Other reasons for discrepancies were noted when systems recorded more or fewer chlorine residual samples than TCR samples; a system failed to submit proof that samples were collected at the same time and place as TCR samples; sample dates for MRDLs could not be identified; and one system that was misclassified as a TNC should have been monitoring as a NTNC.

Recommendations

1. NJDEP must report DBPR violations to SDWIS/Fed in the quarter after they occur.

2. NJDEP should ensure that MRDL samples are taken at the same time and place as TCR routine compliance samples, and that all values are included in the monthly average and RAA. If additional MRDL samples are taken, these samples must be designated in the system's sampling plan.

3. For MRDL calculations, federal rules require systems to report the number of samples taken each month, monthly arithmetic average of all samples taken in each month for the last 12 months, the running annual average of all monthly averages for the last 12 months, and whether the MRDL was exceeded.

4. NJDEP should re-design its MRDL reporting form to ensure that systems can report the RAA, which would help systems comply with federal reporting requirements (see recommendation number 3).

I. Radionuclides Rule

Radionuclides data flow and compliance determination are the same as for the Phase II/V rules and are described in Section II.E. Response to M/R and MCL violations also adheres to the same policies as for other rules; the state provides the violating systems a NOV letter with instructions for follow-up, including completion of public notice and request for a corrective action plan. The state provides limited assistance to water systems; however, many systems hire their own consultants and decide how to handle any issues that may arise. Violations are managed by the NJDEP's WC&E and all follow-up is conducted through that Office. The Drinking Water program issues M/R and MCL violations within the program, while WC&E completes consent orders and all other actions.

There are no systems in New Jersey that were determined to be vulnerable to gross beta contamination. NJDEP is unsure of how the determinations were made, because it was so long ago. However, the Bureau of Nuclear Engineering monitors pathways for entry of radioactivity into the environment in order to identify potential exposures to the population from routine and accidental releases of radioactive effluent from the two nuclear sites in New Jersey – Oyster Creek and Salem/Hope Creek Nuclear Generating Stations. Air and potable water samples are collected. Other media are also collected. Direct gamma radiation levels are assessed by deploying, collecting and analyzing TLD badges. A real-time remote network of radiation detectors monitors ambient radiation levels in the environment around the nuclear generating stations. In 2008, surface water samples were taken monthly and potable well water samples were taken quarterly. All water samples were analyzed for gamma-emitting radionuclides and tritium. No fission or activation products that emit gamma radiation (radionuclides of cobalt, iodine or cesium) were found in any sample analyzed. In addition, no tritium was found in either potable well water or surface water samples in the environs of either nuclear

plant. NJDEP is unsure how the gross beta results are reported, as the systems monitor and report to the Bureau of Nuclear Engineering.

New Jersey has 24 systems that have installed treatment for radionuclides, split between gross alpha, Radium 226/288, and uranium. Two systems that are in violation of the uranium standard are required to install treatment, but have not done so yet. The most common treatment process used for radionuclides is the resin process, using Dow resin in a vessel to capture radionuclides. The vessel is then disposed of as low-level radioactive waste. The low-level waste is shipped to facilities in Nevada or Idaho for storage and disposal. In addition, after completing a sludge study, NJDEP determined that in the future, it may allow low-level waste to be disposed of into a septic system (a sewage-disposal tank in which a continuous flow of waste material is decomposed by anaerobic bacteria) at limited volume and proper dilution; however, the state would not allow discharge of low-level radionuclide waste into a sanitary sewer that collects waste water from individual buildings and homes, for treatment and disposal at a public facility.

NJDEP coordinates with the Department of Water Quality (DWQ), Bureau of Environmental Radiation to develop policies regarding pre-treatment, residuals, and radiation protection and release.

Radionuclides Rule Successes and Challenges

- NJDEP did not experience any laboratory capacity issues for the radionuclides rules. State statute requires evaluation of radionuclide laboratory capacity as part of the lab certification program.

- NJDEP determined the eligibility of samples for grandfathering. As systems only sampled for Radium 226 in that period, consequently, some systems did not monitor for Radium 228. NJDEP notes that this did not prove a big problem as there was not a large of amount of grandfathering completed. Most systems were required to complete initial monitoring under the Revised Radionuclides Rule.

- For systems attempting to return to compliance under the Interim Radionuclides rule, NJDEP requires systems testing for gross alpha to take an initial reading and then another sample 48 hours later, which is the sample they use for compliance. The state does not allow the six-month holding time. NJDEP developed this policy in order to catch the Ra 224 component when gross alpha is tested. Some systems shut wells down and some install treatment (e.g. exchange). In the past, the state had radionuclide M/R and MCL issues but worked on them and carried them over to the new rule. The state found some systems that may have been missed under the interim rule. Currently, NJDEP estimates that they have two dozen systems with treatment.

- NJDEP believes that it has sufficient radionuclides expertise at this point. Most problems have been discovered at this point and new systems are rare. Systems either install treatment

or shut down wells. The state has a strong, active radiation program that deals with other radiation sources and the program is very involved with licensing of treatment.

- The 2006 review recommended that NJDEP require all CWSs to complete their quarterly radionuclides sampling according to their schedule and that violations be assigned to systems that fail to monitor according to their schedule. NJDEP notes in response: *All CWSs have completed quarterly monitoring. The state has assigned violations to systems that failed to do so. Additionally, in December 2009, M/R violations were also assigned to those systems which were required to perform sampling in 2008.* However, note that this problem was still detected in this review, as described below.

- It was further recommended in the 2006 review that new systems, new sources, or systems newly converted to CWS status should begin quarterly monitoring in the first quarter after they are online. NJDEP responded: *The state requires new systems/sources to begin monitoring in the quarter we inform them of their monitoring requirement which is not always after they come on-line. A SOP is not necessary; it is standard practice.*

- The 2006 review identified 17 discrepancies. Twelve discrepancies were assigned for one system: two for MCL violations that were not reported to SDWIS/Fed, two for MCL violations not assigned, and eight because no quarterly monitoring was found following these MCLs and no M/R violations were assigned. Another system received two discrepancies for missing quarterly monitoring. A third system, an NTNCWS that became a CWS, received three discrepancies for not beginning quarterly monitoring in the first quarter after being designated a CWS, as required by the revised rule.

- The current review identified seven discrepancies for two systems that did not qualify for grandfathering, but did not complete quarterly sampling per the revised rule. In all instances, NJDEP allowed grandfathered results outside of the 2000-2003 time period (e.g., results were dated in 2006, 2007, or 2008).

- NJDEP correctly assigned and reported four violations (three M/R and one MCL) to SDWIS/Fed.

Recommendations

1. NJDEP must ensure that all systems complete appropriate grandfathering (using results taken and analyzed during the period of June 1, 2000 and December 8, 2003) or quarterly monitoring before being slotted into the 3/6/9 year schedule.

J. Lead and Copper Rule

NJDEP has fully implemented the LCR Minor Revisions (LCRMR). Generally, new systems are required to begin monitoring for the LCR in the next full six month period after they are notified by

letter of their monitoring requirements. If the notification letter is sent out in April or May, however, the state will defer to the next full six month period and require the system to begin sampling in the July-December time frame. In addition, all new system's sampling plans are reviewed by NJDEP. NJDEP may perform further review of LCR sampling plans if they learn of information indicating a review would be appropriate, for example, if a system wishes to change sampling sites. If a system wishes to change sample sites, they must inform NJDEP and the state will review and approve.

PWSs may request, in writing, authorization to collect fewer than five samples for LCR. The system must demonstrate that they have fewer than five taps used for human consumption. NJDEP reviews the request and approves, if warranted, in writing. Requests are verified by an inspector from WC&E or the county health department if necessary.

Sampling results for lead and copper tap, source water, and water quality parameters (WQP) sampling are stored in SDWIS/State. Ninetieth percentile values may be calculated by the system or the laboratory and submitted on a reporting form; however, calculations are also done in SDWIS/State after individual results are entered into the database. Ninetieth percentile calculations are reviewed by NJDEP personnel only if there is an ALE.

Data Management staff provides a hard copy of ALEs to regional managers after data entry into SDWIS/State. Regional managers must issue an ALE letter within 30 days of becoming aware of the results as per their Performance Evaluation Agreement.

Lead and Copper Rule Successes and Challenges

- Systems are provided with a draft public notice attached to the ALE NON letter. The system also receives a link to EPA's website on public education (PE) requirements and references to an EPA guidance manual on lead and copper control strategies.

- NJDEP requires prior approval of PE material content and/or delivery on a case-by-case basis. Many systems provide NJDEP with the materials before they distribute them. Recently the state developed a PE certification form that must be completed and sent to NJDEP with copies of the PE materials.

- NJDEP is unsure whether they are currently meeting the timing requirements for providing corrosion control treatment (CCT) recommendations. If long-term treatment changes are indicated, the system is normally asked to complete a pilot study. Treatment recommendations are reviewed by the regional manager in BSDWI and an engineer in the Bureau of Well and Water Systems Permitting. Upon the regional manager approval by letter of the treatment proposal, the system designs the treatment facilities and must submit a permit application to the permitting bureau.

- Sampling is not specifically required at schools or day care facilities that do not operate their own PWS. Schools and day care facilities may be included in the PWS sampling plan if they meet the Tier criteria for sample selection under the LCR.

- NJDEP does not contact homeowners if there are high single sample values, although occasionally the state may contact the laboratory for confirmation of the value if they notice an outlier result.

- The 2006 review found a total of 31 discrepancies for the LCR (20 for CWS and 11 for NTNCWSs). Reasons for discrepancies included:

    - Data flow issues, where the lead 90th percentile value or violation date in SDWIS/Fed did not match those in the files or were calculated incorrectly;
    - Failure to assign a violation if the system did not monitor triennially because NJDEP allowed "three year compliance periods" rather than requiring systems to sample three years apart;
    - Erroneous LCR violations likely due to the state rejecting the violations after receiving the lead and copper monitoring data;
    - Systems sampling outside the summer months of June – September; and
    - Collection of the wrong number of samples for a system's population.

- In 2009, the review found 14 discrepancies, which is an improvement over the previous review. Reasons for the discrepancies included some of the same issues tracked in 2006 and some new ones:

    - Incorrect violation date or violations incorrectly determined and reported to SDWIS/Fed;
    - Ninetieth percentile lead result for system serving more than 3,300 people not reported to SDWIS/Fed;
    - Inadequate or no routine samples collected and no violations assigned;
    - No, inadequate, or late WQPs collected and no violations assigned;
    - No optimal corrosion control study and/or recommendations submitted;
    - PE was not completed and no violations assigned; and
    - Failure to calculate 90th percentile or 90th percentile calculated incorrectly.

- NJDEP correctly identified and reported 21 LCR violations or sample results to SDWIS/Fed.

- NJDEP notes on recommendations from the previous review regarding collection of samples in the "summer months" that *almost all systems monitor correctly. Violations are assigned to systems that do not monitor during the 6/1-9/30 period.* In addition, systems are now sampling triennially rather than on three-year compliance periods.

- During the previous review, it was also recommended, per LCRMR, that only one "52" violation at a time should be assigned and reported to SDWIS/Fed. This violation should have an end date of 2015 and remain outstanding, even if it causes the system to become a SNC, until the system completes sampling and returns to compliance. NJDEP responded: *This has not been occurring. Each time an M/R violation is determined and validated, it was forwarded to SDWIS/FED in the quarterly uploads.* The team notes that multiple "52" violations were present for two systems, and those violations had not been returned to compliance before a subsequent violation was assigned.

Recommendations

1. NJDEP must ensure that ALEs are identified and follow-up activities completed in a timely manner, or that violations are assigned.

2. NJDEP must determine compliance promptly and ensure that violations are reported to SDWIS/Fed in the quarter after they occur.

3. NJDEP must ensure that 90th percentiles are calculated on all samples taken during a compliance period, that 90th percentiles are calculated correctly, and that exceedances of the 90th percentiles are flagged for immediate action.

4. NJDEP must ensure that 90th percentile lead result for system serving more than 3,300 people are reported to SDWIS/Fed.

5. NJDEP should ensure that systems provide an OCCT recommendation within six months of the ALE. Further, after the state approves the systems' recommendation, the clock for installation starts 18 months after the state's approval letter to the system, not when the permit for improvements is obtained.

K. Surface Water Treatment Rule and Interim and Long Term 1 and 2 Enhanced Surface Water Treatment Rules

There are approximately 33 non-purchased surface water systems in New Jersey. New Jersey requires all surface water systems to provide filtration. There are no systems successfully meeting the criteria to avoid filtration and there are no unfiltered systems that are required to install filtration.

There are currently five uncovered finished water storage facilities for three CWSs (Trenton, Newark, and Passaic Valley Water Commission) in the state.

Ground water under the direct influence of surface water (GWUDI) determinations were completed many years ago. New systems are evaluated as they come on-line, as a condition of start-up. NJDEP also re-evaluates systems where incorrect information was initially provided to the state.

Assistance to systems is as described in previous sections. The amount of assistance is determined on a case-by-case basis and is quite limited.

Surface Water Treatment Rules Related Successes and Challenges

- The NJDEP personnel do not routinely review MORs since the data is now electronically transmitted to the state's E2 system, although staff may refer to hard copy MORs if a situation comes to their attention. NJDEP notes that systems indicate if their plants are off-line on the MORs. Data and compliance are tracked in SDWIS/State.
- All of the systems with uncovered finished water storage are making plans to cover their storage facilities, but construction will likely not be complete until the end of 2011. All systems have administrative orders against them, and while Trenton reservoir will probably be covered, reservoirs belonging to the two additional CWSs won't be covered. Newark's storage is extremely large and Passaic Valley will remove one storage reservoir completely. Both Newark and Passaic Valley are attempting to come up with a regional solution since the storage facilities in question are located in neighborhoods where coverage is not an option.

- During the 2006, no discrepancies were identified for the SWTRs.

- During the current review, one system was responsible for four discrepancies. Turbidity and chlorine residual results were received more that 10 days after the end of the compliance period and no violations were assigned.

Recommendations

1. NJDEP must ensure that systems submit sample results within 10 days after the end of the compliance period or receive a violation.

L. Public Notification

The team reviewed only Tier 1 and Tier 2 PN violations. Beginning in 2007, NJDEP tracks receipt and assigns violations for failure to complete PN. PN is tracked using the Activity Tracking task section in the NJEMS database. When an MCL violation or ALE is transferred to NJEMS from SDWIS/State, due dates for PN are usually auto-populated into the Activity Tracking application. Staff must then fill in completion dates and add any applicable comments. Upon completion of the auto-populated tasks, the interface application sends the SIE, SIF and PED enforcement action codes back to SDWIS/State.

Public Notification Successes and Challenges

- No PN discrepancies were identified during the previous review.

- Three PN discrepancies were identified for two systems during the current review – one because a system with an acute TCR MCL did not perform PN within 24 hours and the violation was not reported to SDWIS/Fed in the quarter after it occurred and two because PN violations were not transferred from NJEMS to SDWIS/State.

Recommendations

1. NJDEP's must assign and report violations when PN is not complete or completed late, as required by the federal rule. Since the NJEMS/SDWIS/State interface does not manually transfer violations, the state must ensure that PN violation information is correctly transferred from NJEMS to SDWIS/State and then to SDWIS/Fed.

Appendix A

Status of Previous Review Recommendations

Questions on New Jersey's Corrective Actions since the December 2006 Review
The final report for the New Jersey Department of Environmental Protection (NJDEP)
December 2006 review identified major and minor implementation concerns.
Questions follow on how the recommendations of the report and from Region 2 were implemented.

Description of Issue and Recommendation	Questions	State Response
Introduction General		
Recommendations from last review	What steps have the region and state taken since the last review to address recommendations found in the report?	The state has continued to run compliance for the various contaminants/rules but is still not totally up-to-date. Since the last audit, compliance has now also been run multiple times for Lead/Copper and Radionuclides and once recently for DBPs covering the past 5 years.
Recommendations from last review	Are findings from reviews included in discussions between the state and region, for instance when the PWSS Grant or annual work plans are negotiated?	No.
During the previous review it was determined that the state did not have primacy for Long-Term 2 (LT2) ESWTR, Stage 1 Disinfection By-Products Rule (DBPR), the Arsenic Rule, and the Ground Water Rule (GWR).	What is the primacy status of each of these rules?	Please note NJDEP received primacy for Stage 1 DBP back in 1993 contrary to the issue noted. On December 24, 2009, a primacy application for Stage 2 DBP rule, LT2 ESWTR, Lead and Copper Short Term Revisions and Clarifications and the Groundwater Rule was submitted by NJDEP to the USEPA Region 2. The extension of the primacy application submission (until January 4, 2010) was issued by the USEPA Region 2 on May 6, 2009. Arsenic primacy was effective November 2, 2009 as per letter

Description of Issue and Recommendation	Questions	State Response
		from the USEPA Regional Administrator to the NJDEP Commissioner.
NJDEP's policy is to not retain "reporting" violations, particularly for late samples. This policy produced discrepancies for a number of rules. The team recommended that if sample results are received more than ten days after the end of a compliance period a violation should be assigned and reported to SDWIS/Fed. Once assigned, violations should not be rescinded when data arrive, but returned to compliance instead.	Is this still the state's policy? Does the state still rescind such violations rather than returning them to compliance?	Yes, it is still our policy to revise the status of validated violations to "rejected" should the sampling results be submitted rather than return them to compliance. Because EPA has never distinguished between failure to sample versus a late submittal, NJ continues to believe this policy is appropriate. It should be noted that a number of community water systems were penalized for chronic late submittals which was easy to determine under our procedure. However, please note with electronic reporting now required for transient systems and to be required in April, 2010 for community and non-transient, non-community systems, this issue is coming less prevalent and we expect this issue to virtually disappear by next year. We anticipate ending the practice of rejecting violations no later than July 1, 2010.

Description of Issue and Recommendation	Questions	State Response
Inventory		
The review recommended that NJDEP provide values for city, state, and zip codes for systems missing these data in SDWIS/Fed, to ensure that all systems were grant eligible.	Has the required information been submitted to SDWIS/Fed?	Yes, it is provided on a quarterly basis. The problem was confined to a very small number of water systems overall and was determined to be related to how or whether our Interface application managed this data between our NJEMS and SDWIS/State systems. Some problems continue to be found and corrected as we check the grant eligible report.
Consumer Confidence Rule (CCR)		
Many CCR discrepancies were identified due to NJDEP's focus on health-based compliance issues. It was recommended that NJDEP ensure CCRs are submitted and certified on time and that violations are issued when these deadlines are not met.	Are violations now assigned in these instances?	Since the last audit, no. But NJDEP continued to closely oversee whether CCRs and certification were received each year. Referrals to our Water Compliance and Enforcement program have been made in cases where the documents were not received and attempts were made to have them submitted. Please note NJDEP has now agreed to create violations for any systems that did not submit their CCR by July 1, 2009 and/or their certification by October 1, 2009. We will assign a return to compliance enforcement action with a date the documents were received. This was the case for all but a handful of systems.

Description of Issue and Recommendation	Questions	State Response
Total Coliform Rule (TCR)		
One MCL was assigned by the state but not reported to SDWIS/Fed. It was recommended that the state ensure that MCL violations are reported to SDWIS/Fed correctly.	How was this issue addressed? Does NJDEP have a standard operating procedure (SOP) to ensure that violations are reported to SDWIS/Fed correctly?	NJDEP believes MCL violations are reported correctly to SDWIS/Fed. The one example noted in the 2006 report was simply a case where the MCL violation was determined shortly prior to the 2006 audit and had not yet been sent to SDWIS/Fed as part of the quarterly uploads yet. As noted in the 2006 audit, it was confirmed the MCL violation was in the Federal database after the December 2006 upload.
Phase II/V Rules		
It was recommended NJDEP send waiver notification letters to systems at the beginning of each compliance period rather than at the end, as systems cannot sample retroactively.	How was this issue addressed?	The recommendation was followed when NJDEP stated in the 2005-07 letters (sent late in that period as noted) that the waiver also applies for the next/ 2008-10 compliance period unless they are informed otherwise in writing.
The 2006 review recommended that NJDEP ensure that systems with detects complete the required quarterly sampling to determine if the systems are reliably and consistently (R&C) below the MCL, or ensure that laboratories can meet the federal DLs for SOC and VOC analyses.	How was this issue addressed?	A reduced copy is made of any reporting form showing a detected level and it is given to the regional manager and now also their supervisor. The regional manager is responsible to create the increased monitoring schedule in SDWIS/State and to mail the water system a letter indicating the sampling change. The increase/decrease monitoring reports are also available in SDWIS/State. NJDEP continues to evaluate reported DLs and has notified laboratories when they are found to be too high. However,

Description of Issue and Recommendation	Questions	State Response
		violations are not assigned nor quarterly monitoring required.
It was noted that NJDEP should ensure that water systems monitor according to their schedules for IOCs, VOCs, and SOCs.	How do you ensure that systems monitor according to their schedules?	Monitoring schedules were mailed out to community and non-transient systems each year. They were also made available to water systems and laboratories on the Division of Water Supply website beginning in 2008 and recently via a public version of the Drinking Water Watch application. Compliance for M/R is run quarterly.
It was also recommended that personnel be trained to assign correct violations and violation dates.	Has training been provided to personnel that assign violations? Does NJDEP have a SOP for personnel to follow?	A vast majority of violations created are determined when M/R compliance is run by the Data Management Section personnel. Yes, they have numerous SOPs. It is believed this issue was largely related to NJDEP not running compliance immediately subsequent to the analytical results submittal due dates.
Stage 1 DBPR		
The 2006 review recommended that NJDEP ensure that systems that fail to monitor for or submit required compliance calculations for distribution system chlorine residual, TTHMs, and HAA5s receive violations and report them to SDWIS/Fed.	Do all systems now monitor correctly? Are violations assigned to systems that do not monitor correctly?	Compliance was just recently run for five years of DBPs. Violations were validated and NOVs issued. Compliance has not yet been run for distribution system chlorine residuals.

Description of Issue and Recommendation	Questions	State Response
It was recommended that the state ensure that systems collect the same number of distribution system chlorine residual (MRDL) samples as TCR samples, unless otherwise outlined in a system's DBPR sampling plan. Systems that fail to do so should be assigned violations and those violations should be reported to SDWIS/Fed.	How does NJDEP ensure that systems take the same number of TCR and MRDL samples?	No efforts were placed on this issue since the last audit. However, the 2006 and the 2009 audits did not uncover any systems with different numbers of chlorine residual samples versus TCR samples except a few systems elected to take more chlorine residuals which NJDEP believes is acceptable and does not constitute a violation.
It was further recommended that NJDEP ensure systems collect samples at every water treatment plant and use the results from all plants to calculate the running annual average (RAA). Systems that fail to calculate their RAA correctly should be assigned a violation, which should be reported to SDWIS/Fed.	Are all applicable results used to calculate the RAA? Are violations assigned if systems fail to calculate the RAA?	All applicable results are used to calculate the RAA. Since SDWIS/State calculates the RAA, we would not assign violations if systems fail to calculate the RAA or fails to calculate it correctly. Violations are assigned and NOVs issued. RAA violations for TTHMs/HAA5s are rare. Very few have been reported over the years.
Radionuclides Rule		
The review recommended that NJDEP require all CWSs to complete their quarterly radionuclides sampling according to their schedule. Violations should be assigned to systems that fail to monitor according to their schedule	Have all CWSs completed quarterly monitoring? Has the state assigned violations to systems that failed to do so?	All CWSs have completed quarterly monitoring. The state has assigned violations to systems that failed to do so. Additionally, in December 2009, M&R violations were also assigned to those systems which were required to perform sampling in 2008.
It was further recommended that new systems, new sources or systems newly converted to CWS status should begin quarterly monitoring in the first quarter after they are online.	Does the state now require new systems/sources to begin monitoring in the quarter after they come on-line? Has the state produced a SOP to that effect?	The state requires new systems/sources to begin monitoring in the quarter we inform them of their monitoring requirement which is not always after they come on-line. A SOP is not necessary; it is standard practice.

Description of Issue and Recommendation	Questions	State Response
Lead and Copper Rule (LCR)		
The previous review recommended that NJDEP ensure that PWSs collect annual or triennial samples in the "summer months" of June – September or receive a monitoring violation.	Do all systems now monitor correctly? Are violations assigned to systems that do not monitor correctly?	Almost all systems monitor correctly. Violations are assigned to systems that do not monitor during the 6/1-9/30 period.
Further, NJDEP should ensure that systems collect triennial samples no more than three years apart. Systems that sample more than three years apart should receive monitoring violations.	Do all systems now monitor correctly? Are violations assigned to systems that do not monitor correctly?	Most systems monitor correctly. NJDEP is monitoring that no samples be more than 3 years apart. Violations will be assigned to systems that do not monitor correctly but typically the issue is that they monitor more frequently rather than more than three years apart.
It was also recommended, per LCRMR, that only one "52" violation at a time should be assigned and reported to SDWIS/Fed. This violation should have an end date of 2015 and remain outstanding, (even if it causes the system to become a significant noncomplier (SNC)) until the system completes sampling and returns to compliance.	Does NJDEP assign only a single "52" violation in these instances? If not, why?	This has not been occurring. Each time an M/R violation is determined and validated, it was forwarded to SDWIS/FED in the quarterly uploads.
It was recommended that NJDEP assign a "51" violation for systems that fail to complete their initial monitoring according to their schedule.	Does NJDEP assign "51" violations to systems that fail to complete initial sampling? Has the state developed a SOP for this situation?	NJDEP does assign "51" violations to systems that fail to complete initial sampling. A SOP is not necessary. NJDEP's problem was that SDWIS/State was assigning type 51 violations when it was follow-up monitoring that was missed, not initial monitoring.

Appendix B
Total Number of Discrepancies Identified by Rule

Rule	Compliance Determination (CD)		Data Flow (DF)	
	M/R	MCL/TT	M/R	MCL/TT
Inventory	NTNCWSs: 1 TNCWSs: 1	-	-	-
Sanitary Surveys	TNCWSs: 1	-	-	-
Consumer Confidence Reports	CWSs: 20	-	-	-
Total Coliform Rule	CWSs: 42	-	-	-
Nitrate/Nitrite	CWSs: 4 NTNCWSs: 1	-	-	-
Inorganics (IOCs)	CWSs: 1 NTNCWSs: 2	-	-	-
Volatile Organics (VOCs)	CWSs: 3 NTNCWSs: 1	-	-	-
Synthetic Organics (SOCs)	-	-	-	-
Stage 1 and Stage 2 DBPR	CWSs: 38 NTNCWSs: 4	-	-	-
Surface Water Treatment Rules (SWTR, IESWTR, LT1 ESWTR)	CWSs: 4	-	-	-
Filter Backwash Recycling Rule	-	-	-	-
Radionuclide Contaminants	CWSs: 7	-	-	-
Lead and Copper (LCR)	CWSs: 5 NTNCWSs: 8	NTNCWSs: 1	-	-
Public Notification	CWSs: 1 NTNCWSs: 2	-	-	-

Appendix C

Summary of Discrepancies Identified by System

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1330003	ABERDEEN- HIGH SCHOOL/OAKSHADE AREA	CWS	CCR	7/1/08	CCR not delivered by 7/1 as required. Why wasn't a violation assigned?	CCR received at state on 8/21/08.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1330003	ABERDEEN- HIGH SCHOOL/OAKSHADE AREA	CWS	CCR	10/1/08	CCR not certified by 10/1 as required. Why wasn't a violation assigned?	Certification received at state on 10/15/08.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1518003	CEDAR GLEN WEST WATER CO	CWS	CCR	7/1/08	CCR not delivered by 7/1 as required. Why wasn't a violation assigned?	State records show CCR was received 7/1/08.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ0411001	CLEMENTON WATER DEPARTMENT	CWS	CCR	7/1/07	CCR not delivered by 7/1 as required. Why wasn't a violation assigned?	CCR received 7/3/08, late.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1905002	CULVER LAKE WATER COMPANY	CWS	CCR	10/1/08	CCR not found - was one completed? If not, Why wasn't a violation assigned?	Access database does not have date for certification for 2007 CCR.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1905002	CULVER LAKE WATER COMPANY	CWS	CCR	7/1/08	CCR not delivered by 7/1 as required. Why wasn't a violation assigned?	Received 8/21/08.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1408001	DENVILLE TWP WATER DEPT	CWS	CCR	10/1/08	CCR not certified by 10/1 as required. Why wasn't a violation assigned?	CCR and certification both received on 10/6/08, late.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1408001	DENVILLE TWP WATER DEPT	CWS	CCR	7/1/07	CCR not delivered by 7/1 as required. Why wasn't a violation assigned?	CCR and certification both received on 10/6/08, late.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1508001	EAGLEWOOD VILLAGE MHP	CWS	CCR	7/1/08	CCR not delivered by 7/1 as required. Why wasn't a violation assigned?	CCR received by state on September 16, 2008, late.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1511017	JACKSON COLONIAL ARMS AP	CWS	CCR	7/1/08	CCR not delivered by 7/1 as required. Why wasn't a violation assigned?	State received CCR on 7/8/08.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1322001	KEYPORT WATER DEPT	CWS	CCR	7/1/08	CCR not delivered by 7/1 as required. Why wasn't a violation assigned?	CCR received at state on 8/4/08.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1911003	LAKE TAMARACK W CO	CWS	CCR	10/1/08	CCR not certified by 10/1 as required. Why wasn't a violation assigned?	None found in MS Access database or file.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. Will check on status of certification.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late. **State Response (continued):** The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines. NJDEP notes in further comments: Check status. CCR never received. Violation to be created and case referred to WC&E for issuance of a formal enforcement action.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1911003	LAKE TAMARACK W CO	CWS	CCR	7/1/08	CCR not delivered by 7/1 as required. Why wasn't a violation assigned?	State received CCR on 9/3/08.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1416004	LINCOLN PARK JACKSONVILLE SYST	CWS	CCR	7/1/08	CCR not delivered by 7/1 as required. Why wasn't a violation assigned?	CCR received by state on July 8, 2008, late.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1213002	MONROE TWP MUA	CWS	CCR	7/1/07	CCR not delivered by 7/1 as required. Why wasn't a violation assigned?	CCR sent to state on 8/25/08.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ0809001	NJ AMERICAN WATER - BRIDGEPORT	CWS	CCR	7/1/08	CCR not delivered by 7/1 as required. Why wasn't a violation assigned?	CCR received 8/20/08, late.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1427010	NJ VASA HOME WATER SYS	CWS	CCR	7/1/08	CCR not delivered by 7/1 as required. Why wasn't a violation assigned?	CCR received by state on July 14, 2008, late.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ0231001	PASSAIC VALLEY WC LODI WD	CWS	CCR	7/1/08	CCR not delivered by 7/1 as required. Why wasn't a violation assigned?	Was delivered 8/19/08 (late).	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1615008	PVWC-POSTBROOK	CWS	CCR	7/1/08	CCR not delivered by 7/1 as required. Why wasn't a violation assigned?	Received CCR at state on 8/19/08.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1007002	ROSEMONT WATER DEPARTMENT	CWS	CCR	7/1/08	CCR not delivered by 7/1 as required. Why wasn't a violation assigned?	CCR received 8/7/08, late.	The state has never created violations for late submittals of CCRs or the certifications but does aggressively follow-up in writing to ensure they are ultimately submitted. Typically, systems have been given an unofficial grace period of a few months. Should our follow-up not be successful, we refer the case to WC&E to issue a formal enforcement action which may include a penalty. This is typically done each year for just a handful of systems. The state agrees to commence the creation of violations beginning in this year (2009) for those systems which failed to meet the July 1, 2009 or October 1, 2009 deadlines.	Discrepancy remains. Systems should be assigned violations if they fail to submit CCR or certification or submit CCR or certification late.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1015003	AQUA NJ INC RIEGEL RIDGE	CWS	DBPR	4/1/09	Running annual average for chlorine residuals not calculated - why wasn't a violation assigned?	Column for RAA's blank in SDWIS/State.	The RAA value in SDWIS defaults to 0. NJDEP is not entering a running annual average even if it is reported on the form because many errors were observed in the past. Form needs to be redesigned. Compliance has not been run for chlorine residuals. However, the concern of exceeding 4.0 mg/L as an annual average is non-existent.	Discrepancy remains. Federal rules require systems to report the number of samples taken each month, monthly arithmetic average of all samples taken in each month for the last 12 months, the running annual average of all monthly averages for the last 12 months, and whether the MRDL was exceeded.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1518003	CEDAR GLEN WEST WATER CO	CWS	DBPR	1/1/09	System failed to sample during compliance period. Why wasn't a violation assigned?	Chlorine residual data not in SDWIS/State for 1Q 2009. Also, no running annual average found -column in SDWIS/State is blank. NJDEP subsequently submitted data for 1Q2009.	The RAA value in SDWIS defaults to 0. NJDEP is not entering a running annual average even if it is reported on the form because many errors were observed in the past. Form needs to be redesigned. Compliance has not been run for chlorine residuals. However, the concern of exceeding 4.0 mg/L as an annual average is non-existent. NJDEP noted in subsequent comments: Provide missing chlorine residual results. Results for 1st quarter received. All < 0.50 mg/l. Results sent to Cadmus 1/7/10.	Discrepancy remains for missing RAA only. Federal rules require systems to report the number of samples taken each month, monthly arithmetic average of all samples taken in each month for the last 12 months, the running annual average of all monthly averages for the last 12 months, and whether the MRDL was exceeded.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ0411001	CLEMENTON WATER DEPARTMENT	CWS	DBPR	4/1/09	Running annual average for chlorine residuals not calculated - why wasn't a violation assigned?	For July 2008 through June 2009.	The RAA value in SDWIS defaults to 0. NJDEP is not entering a running annual average even if it is reported on the form because many errors were observed in the past. Form needs to be redesigned. Compliance has not been run for chlorine residuals. However, the concern of exceeding 4.0 mg/l as an annual average is non-existent.	Discrepancy remains. Federal rules require systems to report 1) number of samples taken each month, monthly arithmetic average of all samples taken in each month for the last 12 months, the running annual average of all monthly averages for the last 12 months, and whether the MRDL was exceeded.
NJ0411001	CLEMENTON WATER DEPARTMENT	CWS	DBPR	1/1/08	System failed to sample during compliance period. Why wasn't a violation assigned?	Violation was assigned by state on 11/10/09 for failure to collect TTHMs in 2004, 2006, 2007, and 2008. Why was compliance determined so late?	State had numerous problems getting data correctly entered to be able to run compliance. Priority was assigned to some other rules when determining the order of running compliance. The 2004 violation was deleted because the schedule was incorrectly created. Schedule has been corrected.	Discrepancy stands. Late compliance determination.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ0411001	CLEMENTON WATER DEPARTMENT	CWS	DBPR	1/1/08	System failed to sample during compliance period. Why wasn't a violation assigned?	Violation was assigned by state on 11/10/09 for failure to collect HAA5s in 2004, 2006, 2007, and 2008. Why was compliance determined so late?	State had numerous problems getting data correctly entered to be able to run compliance. Priority was assigned to some other rules when determining the order of running compliance. The 2004 violation was deleted because the schedule was incorrectly created. Schedule has been corrected.	Discrepancy stands. Late compliance determination.
NJ1905002	CULVER LAKE WATER COMPANY	CWS	DBPR	7/1/08, 10/1/08, 1/1/09, 4/1/09	Sample date could not be identified and running annual average for chlorine residuals not calculated - why wasn't a violation assigned?	Could see number of distribution chlorine residual samples collected and average, but did not see sample date. Also, is system calculating RAA if monthly values are < 1.0?	Sample date for chlorine residuals not a field listed in SDWIS/State. The RAA value in SDWIS defaults to 0. NJDEP is not entering a running annual average even if it is reported on the form because many errors were observed in the past. Form needs to be redesigned. However, the concern of exceeding 4.0 mg/L as an annual average is non-existent.	Discrepancy remains. Federal rules require systems to report the number of samples taken each month, monthly arithmetic average of all samples taken in each month for the last 12 months, the running annual average of all monthly averages for the last 12 months, and whether the MRDL was exceeded.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1408001	DENVILLE TWP WATER DEPT	CWS	DBPR	4/1/09	Running annual average for chlorine residuals not calculated - why wasn't a violation assigned?	For July 2008 through June 2009.	The RAA value in SDWIS defaults to 0. NJDEP is not entering a running annual average even if it is reported on the form because many errors were observed in the past. Form needs to be redesigned. Compliance has not been run for chlorine residuals. However, the concern of exceeding 4.0 mg/L as an annual average is non-existent.	Discrepancy remains. Federal rules require systems to report the number of samples taken each month, monthly arithmetic average of all samples taken in each month for the last 12 months, the running annual average of all monthly averages for the last 12 months, and whether the MRDL was exceeded.
NJ1508001	EAGLEWOOD VILLAGE MHP	CWS	DBPR	4/1/09	Running annual average for chlorine residuals not calculated - why wasn't a violation assigned?	For July 2008 through June 2009.	The RAA value in SDWIS defaults to 0. NJDEP is not entering a running annual average even if it is reported on the form because many errors were observed in the past. Form needs to be redesigned. Compliance has not been run for chlorine residuals. However, the concern of exceeding 4.0 mg/L as an annual average is non-existent.	Discrepancy remains. Federal rules require systems to report the number of samples taken each month, monthly arithmetic average of all samples taken in each month for the last 12 months, the running annual average of all monthly averages for the last 12 months, and whether the MRDL was exceeded.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1322001	KEYPORT WATER DEPT	CWS	DBPR	4/1/09	System failed to sample during compliance period. Why wasn't a violation assigned?	No TTHM samples from second quarter 2009 in Drinking Water Watch.	M/R Compliance for DBPs was just run last week but only through 2008. Compliance not run yet for 2009 periods. NJDEP noted in further comments: Provide missing results. Status unknown.	Discrepancy stands. Late compliance determination.
NJ1322001	KEYPORT WATER DEPT	CWS	DBPR	4/1/09	System failed to sample during compliance period. Why wasn't a violation assigned?	No HAA5 samples from second quarter 2009 in Drinking Water Watch.	M/R Compliance for DBPs was just run last week but only through 2008. Compliance not run yet for 2009 periods. NJDEP noted in further comments: Provide missing results. Status unknown.	Discrepancy stands. Late compliance determination.
NJ1322001	KEYPORT WATER DEPT	CWS	DBPR	7/1/08	System failed to sample during compliance period. Why wasn't a violation assigned?	No distribution chlorine residual results in SDWIS/State for 3rd quarter 2008.	The RAA value in SDWIS defaults to 0. NJDEP is not entering a running annual average even if it is reported on the form because many errors were observed in the past. Form needs to be redesigned. Compliance has not been run for chlorine residuals. However, the concern of exceeding 4.0 mg/L as an annual average is non-existent. NJDEP noted in further comments: Provide missing results. Status unknown.	Discrepancy remains. Federal rules require systems to report the number of samples taken each month, monthly arithmetic average of all samples taken in each month for the last 12 months, the running annual average of all monthly averages for the last 12 months, and whether the MRDL was exceeded.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1322001	KEYPORT WATER DEPT	CWS	DBPR	4/1/09	Running annual average for chlorine residuals not calculated - why wasn't a violation assigned?	For July 2008 through June 2009. Discrepancy added while preparing the draft report.		
NJ0233001	MAHWAH WATER DEPARTMENT	CWS	DBPR	4/1/09	Running annual average for chlorine residuals not calculated - why wasn't a violation assigned?	The RAA column in SDWIS/State is empty.	The RAA value in SDWIS defaults to 0. NJDEP is not entering a running annual average even if it is reported on the form because many errors were observed in the past. Form needs to be redesigned. Compliance has not been run for chlorine residuals. However, the concern of exceeding 4.0 mg/L as an annual average is non-existent.	Discrepancy remains. Federal rules require systems to report the number of samples taken each month, monthly arithmetic average of all samples taken in each month for the last 12 months, the running annual average of all monthly averages for the last 12 months, and whether the MRDL was exceeded.
NJ1518005	MANCHESTER TWP WATER UTILITY	CWS	DBPR	4/1/09	Running annual average for chlorine residuals not calculated - why wasn't a violation assigned?	For July 2008 through June 2009.	The RAA value in SDWIS defaults to 0. NJDEP is not entering a running annual average even if it is reported on the form because many errors were observed in the past. Form needs to be redesigned. Compliance has not been run for chlorine residuals. However, the concern of exceeding 4.0 mg/L as an annual average is non-existent.	Discrepancy remains. Federal rules require systems to report the number of samples taken each month, monthly arithmetic average of all samples taken in each month for the last 12 months, the running annual average of all monthly averages for the last 12 months, and whether the MRDL was exceeded.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1225001	MIDDLESEX WATER COMPANY	CWS	DBPR	7/1/08, 10/1/08, 1/1/09, 4/1/09	More/fewer distribution chlorine residual samples were recorded than TCR samples. Expect distribution system chlorine residuals to be taken at the same time and place as TCR samples. No samples found for some months. Why no M/R violation?	No samples for 7/08-9/08. Different number of TCR/MRDL samples in 11/08, 12/08, 2/09, 3/09, and 4/09.	State would NOT create a M/R violation if system decides to collect more chlorine residual samples in its distribution system than the number of coliform samples it has taken. This was the case for all months cited.	Discrepancies stand. No samples provided for July through September 2008 and different number of TCR/MRDL samples taken.
NJ1213002	MONROE TWP MUA	CWS	DBPR	7/1/08, 10/1/08	More chlorine residual sampleswere recorded than TCR samples. Expect distribution system chlorine residuals to be taken at the same time and place as TCR samples. Why no M/R violation?	For 7/08, 10/08, and 11/08, more distribution chlorine residual samples were listed in SDWIS/State than TCR samples. Also, was RAA of 0 for twelve months ending 6/30/09 accurate?	State would NOT create a M/R violation if system decides to collect more chlorine residual samples in its distribution system than the number of coliform samples it has taken. The RAA value in SDWIS defaults to 0. NJDEP is not entering a running annual average even if it is reported on the form because many errors were observed in the past. Form needs to be redesigned.	Discrepancy remains. Federal rules require systems to report the number of samples taken each month, monthly arithmetic average of all samples taken in each month for the last 12 months, the running annual average of all monthly averages for the last 12 months, and whether the MRDL was exceeded.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1425001	MOUNTAIN LAKES WATER DEP	CWS	DBPR	4/1/09	Running annual average for chlorine residuals not calculated - why wasn't a violation assigned?	For July 2008 through June 2009.	The RAA value in SDWIS defaults to 0. NJDEP is not entering a running annual average even if it is reported on the form because many errors were observed in the past. Form needs to be redesigned. Compliance has not been run for chlorine residuals. However, the concern of exceeding 4.0 mg/L as an annual average is non-existent.	Discrepancy remains. Federal rules require systems to report the number of samples taken each month, monthly arithmetic average of all samples taken in each month for the last 12 months, the running annual average of all monthly averages for the last 12 months, and whether the MRDL was exceeded.
NJ0809001	NJ AMERICAN WATER - BRIDGEPORT	CWS	DBPR	4/1/09	Running annual average for chlorine residuals not calculated - why wasn't a violation assigned?	For July 2008 through June 2009.	The RAA value in SDWIS defaults to 0. NJDEP is not entering a running annual average even if it is reported on the form because many errors were observed in the past. Form needs to be redesigned. Compliance has not been run for chlorine residuals. However, the concern of exceeding 4.0 mg/L as an annual average is non-existent.	Discrepancy remains. Federal rules require systems to report the number of samples taken each month, monthly arithmetic average of all samples taken in each month for the last 12 months, the running annual average of all monthly averages for the last 12 months, and whether the MRDL was exceeded.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1427010	NJ VASA HOME WATER SYS	CWS	DBPR	7/1/08, 10/1/08, 1/1/09, 4/1/09	System failed to sample during compliance period. Why wasn't a violation assigned?	No distribution system chlorine residual results were found. Can they be provided?	The RAA value in SDWIS defaults to 0. NJDEP is not entering a running annual average even if it is reported on the form because many errors were observed in the past. Form needs to be redesigned. Compliance has not been run for chlorine residuals. However, the concern of exceeding 4.0 mg/L as an annual average is non-existent. Will contact the system and have them send us the missing results. NJDEP notes in further comments: Will contact the system and have them send us the missing results. Provide missing chlorine residual results. Awaiting submittal.	Discrepancy remains. Federal rules require systems to report the number of samples taken each month, monthly arithmetic average of all samples taken in each month for the last 12 months, the running annual average of all monthly averages for the last 12 months, and whether the MRDL was exceeded.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1615008	PVWC-POSTBROOK	CWS	DBPR	7/1/08, 10/1/08, 1/1/09, 4/1/09	No individual samples for distribution chlorine residual found to verify that they were collected at same time and place as TCR samples. Also, running annual average reads "0" rather than calculated value. Can these data be provided, as well as results an	Same number of samples were listed in SDWIS/State's MRDL summary for all months except 3Q 2008.	State does not require (nor do the regulations) individual sample results for chlorine residuals in the distribution system to be submitted. Only summary data on number of samples collected, number of instances where no residual is detected, monthly average, etc. are reported on form BSDW-25. The RAA value in SDWIS defaults to 0. NJDEP is not entering a running annual average even if it is reported on the form because many errors were observed in the past. Form needs to be redesigned. However, the concern of exceeding 4.0 mg/L as an annual average is non-existent.	Discrepancy remains. Agree that individual results do not need to be submitted, however, federal rules require systems to report number of samples taken each month, monthly arithmetic average of all samples taken in each month for the last 12 months, the running annual average of all monthly averages for the last 12 months, and whether the MRDL was exceeded.
NJ1007002	ROSEMONT WATER DEPARTMENT	CWS	DBPR	7/1/08, 10/1/08, 1/1/09, 4/1/09	System failed to sample during compliance period. Why wasn't a violation assigned?	No distribution system chlorine residual results were found for July 2008 through June 2009.	Compliance has not been run for chlorine residuals. NJDEP notes in further comments: Provide missing chlorine residual results. Results attached.	Discrepancies stand. No results attached.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1613002	WANAQUE W DEPT.	CWS	DBPR	4/1/09	Running annual average for chlorine residuals not calculated - why wasn't a violation assigned?	For July 2008 through June 2009.	The RAA value in SDWIS defaults to 0. NJDEP is not entering a running annual average even if it is reported on the form because many errors were observed in the past. Form needs to be redesigned. Compliance has not been run for chlorine residuals. However, the concern of exceeding 4.0 mg/L as an annual average is non-existent.	Discrepancy remains. Federal rules require systems to report the number of samples taken each month, monthly arithmetic average of all samples taken in each month for the last 12 months, the running annual average of all monthly averages for the last 12 months, and whether the MRDL was exceeded.
NJ1019313	CALIFON BUSINESS PARK	NTNCWS	DBPR	1/1/09, 4/1/09	System was classified as an NTNC (from a TNC) 12/1/08. System should have sampled for DBPR MRDL compliance beginning in 1st quarter of 2009 and did not. Why weren't violations assigned?	For 1st and 2nd quarter 2009.	Compliance has not been run for chlorine residuals. NJDEP noted in subsequent comments: Provide missing results. Awaiting submittal.	Discrepancy remains.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1910324	CONDIT TOYOTA	NTNCWS	DBPR	4/1/09	Running annual average for chlorine residuals not calculated - why wasn't a violation assigned?	No RAA found.	The RAA value in SDWIS defaults to 0. NJDEP is not entering a running annual average even if it is reported on the form because many errors were observed in the past. Form needs to be redesigned. Compliance has not been run for chlorine residuals. However, the concern of exceeding 4.0 mg/L as an annual average is non-existent.	Discrepancy remains. Federal rules require systems to report the number of samples taken each month, monthly arithmetic average of all samples taken in each month for the last 12 months, the running annual average of all monthly averages for the last 12 months, and whether the MRDL was exceeded.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ0339320	WAGNER BOOT CAMP	NTNCWS	DBPR	4/1/09	More chlorine residual sampleswere recorded than TCR samples. Expect distribution system chlorine residuals to be taken at the same time and place as TCR samples. Why no M/R violation?	Missing chlorine residual samples for 12 months ending 6/30/09. Suspect that daily chlorine from MOR was entered into database in error. NJDEP subsequently submitted results for July-Dec 2008.	State would NOT create a M/R violation if system decides to collect more chlorine residual samples in its distribution system than the number of coliform samples it has taken. There are results in SDWIS/State for the first six months of 2009. Results are missing for the last six months of 2008. No violations have been created because M/R compliance has not yet been run for chlorine residuals. In subsequent comments on questions, NJDEP notes: Get chlorine residual results for the last six months of 2008. Results received for 3rd and 4th quarters. Sent to Cadmus 1/7/10.	Discrepancies removed for July-Dec 2008. One discrepancy remains for no chlorine residual results either in the field results section of the TCR screen, or on the MRDL screens in SDWIS/State for April, May and June 2009. In addition, no RAA was calculated for 12 months ending 6/30/09. Late compliance determination for failure to assign violations.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1225001	MIDDLESEX WATER COMPANY	CWS	IESWTR	7/1/08, 10/1/08, 1/1/09, 4/1/09	Sampling results were received late. Why wasn't a violation assigned?	Sample results for turbidity and chlorine residual at the surface water TP were received more than 10 days after the end of the compliance period for the twelve months ending 6/30/09.	No violations have been created because M/R compliance has not yet been run for turbidity or chlorine residuals. Note: Even if compliance had been run on the 11th day after the monitoring period and a violation created, it is bureau policy to change the violation status to rejected upon receiving the results. A SOX dated the following day will be sent from NJEMS to SDWIS too.	Discrepancy remains. Systems should be assigned violations if results are received more than 10 days after the end of a compliance period. In addition, compliance determination is late, since violations must be reported to SDWIS/Fed in the quarter after they occur.
NJ1910324	CONDIT TOYOTA	NTNCWS	INV	1/1/08	The name of system in state records does not match SDWIS/Fed - why not?	Letter in file dated 1/29/08 says that system name should be changed from Condit Toyota to Sussex County Imports. Why wasn't it changed in SDWIS/State and SDWIS/Fed?	System name change was made after 1/29/08 letter (master file changes shown in file); however, inspection report dated 10/9/08 from Sussex HD listed name as Condit Toyota; therefore, was changed back. The Responsible entity should have been changed to the Sussex County Imports according to inspection. Changes will be made now.	Discrepancy remains.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ0804313	BAMBI CHILD CARE CENTER	TNCWS	INV	1/1/09	2009 inspection report indicates the system is classified as a nontransient noncommunity water system. When did the system change classification?	Last survey was done in 2005 - did system change classification between 2005 and 2009?	It appears that the population for this system was changed in error on 11/12/2008, which caused the system's classification in SDWIS/State to incorrectly change from a nontransient to a transient. The corresponding monitoring schedule still reflects the nontransient monitoring requirements. Gloucester County Health Dept has confirmed the system is a non-transient so the populations and system classification will be corrected in NJEMS and SDWIS. Problem caused by interface mishandling population data. NJ has been trying to get this fixed with contractor for two years now.	Discrepancy remains. System confirmed as a NTNCWS rather than a TNCWS.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1425001	MOUNTAIN LAKES WATER DEP	CWS	IOC	1/1/05	System failed to sample during compliance period for TP 007017. Only found arsenic results in 2005-2007 for this treatment plant. Can additional results be provided?	Sampling results reported late for all other treatment plants (samples collected 8/26/05, submitted 6/13/08. Violation was assigned, then rejected Why wasn't the violation kept and SOX'd instead?	For TP007017, inorganics were sampled 8/26/2005, results are in SDWIS and DWW for all inorganics. Print screen provided. On 2/16/06 and 3/14/07 only arsenic was sampled and reported. As per bureau policy, the status for the M/R violation was changed from validated to rejected when the results were received.	Discrepancy stands, results reported late (found the IOC samples for TP007017).
NJ1309319	COLTS NECK PROFESSIONAL PLAZA	NTNCWS	IOC	1/1/05	Sampling results reported late. An M/R violation was assigned, then deleted when results arrived. Why wasn't the violation kept and SOX'd instead?	Violation was rejected in SDWIS/State on 6/11/08, when results were received.	As per bureau policy, the status for the M/R violation was changed from validated to rejected when the results were received. There is a SOX dated 6/12/09 (day after results were received) in SDWIS which was automatically created by the interface application.	Discrepancy remains. Analytical results must be submitted within 10 days after the end of a compliance period or violations should be assigned.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1922314	ROLLING HILLS SCHOOL	NTNCWS	IOC	1/1/05	Sampling results reported late. An M/R violation was assigned, then deleted when results arrived. Why wasn't the violation kept and SOX'd instead?	Violation was rejected on 6/19/08 once results were received.	As per bureau policy, the status for the M/R violation was changed from validated to rejected when the results were received. There is a SOX dated 6/20/09 (day after results were entered) in SDWIS which was automatically created by the interface application.	Discrepancy remains. Analytical results must be submitted within 10 days after the end of a compliance period or violations should be assigned.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1714003	BANCROFT NEURO HEALTH CENTER	CWS	LCR	1/1/09	System failed to complete second round of initial LCR monitoring in January through June 2009 and was assigned a violation; why wasn't the violation reported to SDWIS/Fed?	LCR M/R should be dated 7/1/09, which is the first day after the end of the compliance period. Violation determined 10/28/09. Violations must be reported to SDWIS/Fed in the quarter after they occur (late compliance determination).	System did sample the 1st half of 2009. System only submitted the lab sheets and not the official reporting form. We are waiting for QC Labs to submit electronically via E2, should be submitted by Wed 11/18. Normal NJDEP protocol would be to revise the M/R violation from validated to rejected since we have the results. Violation not reported to SDWIS/Fed because it was determined in late October 2009. We would not upload to SDWIS/Fed until probably December. NJDEP noted in further comments: Data submitted electronically via E2? Results submitted electronically. Violation rejected.	Discrepancy remains. Violations should be reported to SDWIS/Fed in the quarter after they occur. In addition, violations for late reporting should not be rejected after validation, but should be assigned to the system and returned to compliance when the system submits adequate samples or reporting.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1911003	LAKE TAMARACK W CO	CWS	LCR	7/1/08	Water quality parameter monitoring following an action level exceedance not found - can it be provided?	Expected WQPs to be collected in same timeframe as January through June 2008 period when Cu ALE occurred.	System failed to monitor and/or submit WQP results for 1st half 2008 Checking if sampling was ever performed. If yes, we will provide results. NJDEP notes in further comments: Provide missing results. Awaiting submittal.	Discrepancy remains.
NJ1225001	MIDDLESEX WATER COMPANY	CWS	LCR	1/1/04	System collected 50 copper and 54 lead samples in 2004. Please explain the variation. Does this variation comply with their monitoring plan? (Only required to collect 50 samples.)	In 2007, the system collected 54 samples of both analytes.	It is suspected that the continuation sheet for four copper samples was misplaced. We will check with the water system. NJDEP noted in further comments: Provide missing results. Status unknown.	Discrepancy remains. Please provide required information before report is finalized.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1425001	MOUNTAIN LAKES WATER DEP	CWS	LCR	10/1/00	Violation was assigned, but with incorrect dates - can you explain?	PWS sampled for LCR in 1997 and not again until 2007. Why was the violation assigned with a begin date of 10/1/05? Should the violation have been reported with a begin date of 10/1/00?	The violation for the 2003-2005 period (no.444) should have had a begin date of 1/1/2006. It appears the 10/1/2005 was incorrectly used because the last day that a sample could have been taken to satisfy the monitoring would have been 9/30/05. While the results are not in SDWIS, please see attached print screens from the inspection reports indicating L&C sampling was performed in 6/2002 and 7/2004. NJDEP notes in further comments: Modify violation begin date and get all available L&C results. Violation begin date was changed to 1/1/2006. Results were received - see attached. The violation will be rejected.	Discrepancy removed for missing sample results. Discrepancy remains for incorrect violation date. Violation should be returned to compliance rather than rejected.
NJ1425001	MOUNTAIN LAKES WATER DEP	CWS	LCR	7/20/04	90th percentile lead result for systems serving >3,300 population is not present in SDWIS/Fed. Why not?	For sample of 7/20/04. This question was added while preparing the draft report. Please provide a response.		

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NJ1019313	CALIFON BUSINESS PARK	NTNCWS	LCR	1/1/09	A violation was reported to SDWIS/Fed. The DV team could find no reason for the violation. Why wasn't it rescinded from SDWIS/Fed?	System collected LCR samples on 4/17/09 and it appears that the samples were received in time. Why was a violation assigned? (System became a NTNC from a TNC in December 2008.)	Compliance has not been run for chlorine residuals.	Discrepancy remains. State may have been confused by the question, as their answer pertained to DBPR, not LCR.
NJ1910324	CONDIT TOYOTA	NTNCWS	LCR	10/1/06	90th percentile calculated by team differs from state calculation Why?	In SDWIS/State, five samples from 9/05 were combined with five samples from 7/06 and the 90th percentile calculated from both sets together.	Three year monitoring period 04-06; therefore, SDWIS/STATE uses all results submitted within the three year period to calculate 90%. State does not allow this anymore. Samples would have to be taken within the same calendar year. State requests clarification on what is allowed regarding a system conducting additional sampling beyond its normal number of samples. If allowed, what restrictions would apply?	Discrepancy remains. LCR requires that systems sample triennially or every three years. SDWIS/State three year sampling periods do not apply. All samples that a system takes from June-September of the year that they sample must be used for compliance.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ0614344	SENIOR CARE OF VINELAND	NTNCWS	LCR	1/1/05, 1/1/06, 7/1/07	System has three violations in SDWIS/Fed for failure to sample LCR. Database indicates that the system sampled. Why were the violations assigned?	System sampled 6/30/05, 8/30/06, and 6/30/07. Were results reported late?	System has a CCT installed and claimed that system was not working properly.	Discrepancy remains. If system had CCT installed, sampling should still take place, but only one 52 violation is allowed at a time and that violation should be returned to compliance when system submits a valid sample below the action level.
NJ0614344	SENIOR CARE OF VINELAND	NTNCWS	LCR	1/1/09	Source water sampling following an action level exceedance not found - can it be provided?	For copper exceedance in sample taken 8/24/08.	System has a CCT installed and claimed that system was not working properly. In further comments, NJDEP noted: Provide source water monitoring. Results in SDWIS - attached.	Discrepancy remains. Data not provided; no results attached.
NJ0614344	SENIOR CARE OF VINELAND	NTNCWS	LCR	1/1/08	Water quality parameter monitoring following an action level exceedance not found - can it be provided?	For copper exceedance in sample taken 8/24/08.	System has a CCT installed and claimed that system was not working properly. In subsequent comments NJDEP noted: Provide water quality monitoring. Results in SDWIS - attached.	Discrepancy remains. Data not provided; no results attached.
NJ0614344	SENIOR CARE OF VINELAND	NTNCWS	LCR	1/1/09	Corrosion control study not found - why wasn't a violation assigned?	For copper exceedance in sample taken 8/24/08.	System has a CCT installed and claimed that system was not working properly.	Discrepancy remains. Please provide date that CCT recommendation was provided.

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NJ0339320	WAGNER BOOT CAMP	NTNCWS	LCR	10/1/08	System sampled in 2008, but database says "five samples collected but not used for compliance." Why not?	All samples taken must be used for compliance.	These samples were taken outside the seasonal collection period, therefore can not be used for compliance. However, NJDEP's policy is that if the results showed an ALE, we would have acted as if there was one and not have ignored the results. A PB or CU violation type would not have been created though.	Samples appear to be collected in June 2008. If these results are not valid, a 52 violation should be reported to SDWIS/Fed.
NJ1518005	MANCHESTER TWP WATER UTILITY	CWS	Nitrate	1/1/08	Nitrate violation for 2008 was clearly deleted by state for TP 007028 onced it was determined that it was not online during the year. The violation is marked as deleted in Drinking Water Watch, but is still in SDWIS/Fed. Why?		This violation was just deleted on November 17, 2009 based on information received from Enforcement. This revision will flow to SDWIS/FED in the next update any day now.	Discrepancy remains, late compliance determination.
NJ1213002	MONROE TWP MUA	CWS	Nitrate	1/1/07	Sampling results were received late. Why was violation rejected?	State assigned violation for no results, then rejected it when results were supplied after deadline.	As per bureau policy, the status for the M/R violation was changed from validated to rejected when the results were received.	Discrepancy remains. Analytical results must be submitted within 10 days after the end of a compliance period or violations should be assigned.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1427010	NJ VASA HOME WATER SYS	CWS	Nitrate	1/1/08	Sampling results reported late. An M/R violation was assigned, then deleted when results arrived. Why wasn't the violation kept and SOX'd instead?	Violation for 2008 nitrate samples was rejected in SDWIS/State on 4/24/09. Is that when state received the 2008 nitrate samples?	As per bureau policy, the status for the M/R violation was changed from validated to rejected when the results were received. There is a SOX dated 4/2709 (day after results were received) in SDWIS which was automatically created by the interface application.	Discrepancy remains. Analytical results must be submitted within 10 days after the end of a compliance period or violations should be assigned.
NJ1613002	WANAQUE W DEPT.	CWS	Nitrate	1/1/07	Sampling results reported late. An M/R violation was assigned, then deleted when results arrived. Why wasn't the violation kept and SOX'd instead?	Note in violation comment field indicates that 2007 nitrate results were received on 4/25/08.	As per bureau policy, the status for the M/R violation for nitrate was changed from validated to rejected when the results were received.	Discrepancy remains. Analytical results must be submitted within 10 days after the end of a compliance period or violations should be assigned.
NJ1615327	WESTBROOK SCHOOL	NTNCWS	Nitrate	1/1/08	Sampling results reported late. An M/R violation was assigned, then deleted when results arrived. Why wasn't the violation kept and SOX'd instead?	Violation for failure to submit nitrate sample in 2008 was rejected on 1/27/09, and comment field notes that results were received late.	As per bureau policy, the status for the M/R violation was changed from validated to rejected when the results were received.	Discrepancy remains. Analytical results must be submitted within 10 days after the end of a compliance period or violations should be assigned.
NJ1714003	BANCROFT NEURO HEALTH CENTER	CWS	PN	7/22/08	System failed to perform public notification. Why wasn't a violation assigned?	For TCR acute MCL (21) of 7/1/08.	Public notification was performed on 7/8/09 as noted in NJEMS Activity Tracker. NJDEP noted in further comments: PN needs to be manually entered in SDWIS. Done.	Discrepancy remains. Acute TCR violation requires that public notification be performed within 24 hours of system's receipt of the violation by the system.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1905306	BLUE RIDGE RESCUE SQUAD	TNCWS	PN	1/24/09, 7/29/09	System failed to perform public notification. Why wasn't a violation assigned?	For TCR MCL violations in June 2009 and December 2008. Database says PN was completed, but shows no date.	NJEMS violation list has a violation for failure to perform PN for December 2008 and June 2009 violations (were required to be completed by 1/23/09 and 7/29/09). Violations need to be manually created in SDWIS/State. Interface does not flow these violations. The comment in the June 2009 violation's comment field was NOT in reference to the public notification, just as to when the BSDW became aware of the MCL violation. NJDEP noted in subsequent comments: PNs need to be manually entered in SDWIS. System deactivated 1/1/09 so June 2009 violation is false and will be deleted. Checking if PN done for the December 2008 violation. Doubtful given timing of system deactivation.	Discrepancy remains. Violations must be reported to SDWIS/Fed in the quarter after they occur.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1511017	JACKSON COLONIAL ARMS AP	CWS	RAD	4/1/06, 7/1/06, 10/1/06	System does not qualify for grandfathering, but has not completed all four quarters of initial monitoring. What is the schedule for this system to comply with the revised rule?	Note that system did sample wells 1 and 2 for Ra and U in last three quarters of 2006. Why was gross alpha not collected at same time?	System was grandfathered in 2006 for Gross Alpha based on previous results. System has since connected to City water and therefore is no longer a Public Water System. State will provide the results it used to grandfather the system in 2006. NJDEP noted in subsequent comments: Provide results used to grandfather. Status unknown.	Discrepancy remains. Please provide indicated results.
NJ1225001	MIDDLESEX WATER COMPANY	CWS	RAD	1/1/07, 4/1/07, 7/1/07, 10/1/07	System does not qualify for grandfathering, but has not completed all four quarters of initial monitoring by 12/31/07. What is the schedule for this system to comply with the revised rule?	Found a sample from August 2008, but no quarterly samples or grandfathered data for Park Ave TP.	Park Ave/TP 002005 was grand fathered by 12/31/2007; therefore initial monitoring was not required. This POE is required to monitor once in three years to begin 1/1/2008 and end 12/31/2010. It monitored 8/13/2008. State will provide results used for grandfathering. NJDEP noted in further comments: Provide results used for grandfathering. Status unknown.	Discrepancy remains. Federal regulations state period allowable for use of grandfathered data is between June, 2000 and December 8, 2003.

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NJ0326319	CHURCH OF JESUS CHRIST	TNCWS	SS	1/1/04	Two sanitary surveys found, but they were done more than five years apart - why no M/R violation?	Surveys done in February 1999 and April 2006 (seven years apart).	State does not assign M/R violations for system's failure to perform sanitary survey since inspections are done by county health department. Burlington County confirmed that no inspections were done during the period between 1999 and 2006.	Discrepancy remains. Groundwater systems must have a sanitary survey at least every five years.
NJ1714003	BANCROFT NEURO HEALTH CENTER	CWS	TCR	7/1/08	System failed to take repeat samples during compliance period. Why wasn't a violation assigned?	For two TC and one FC positives in July 2007; nine required, none taken.	A major repeat violation type 25 (number 2008-2) was created on 9/23/08 for July 2008 and is in SDWIS/State but it is still listed as preliminary. It will be validated. Regional manager believes some repeats may have been taken but not entered. This will be investigated. NJDEP noted in further comments: Validate major repeat violation in SDWIS; confirm if any were in fact taken. Violation validated in SDWIS.	Discrepancy remains. Violations must be reported to SDWIS/Fed in the quarter after they occur.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1408001	DENVILLE TWP WATER DEPT	CWS	TCR	7/1/08, 9/1/08-12/1/08, 4/1/09	Sampling results were received late. Why wasn't a violation assigned?	SDWIS/State indicates that summaries received more than 10 days into the next month for the months of July and September through December 2008, and April 2009. (Late compliance determination.)	One violation created for September of 2008. As per bureau policy, the status for the M/R violation was changed from validated to rejected when the results were received. There is a SOX dated 11/6/08 (day after results were entered) in SDWIS which was automatically created by the interface application. For other months cited, results while slightly late, were entered prior to compliance being run so violations were never created.	Discrepancy remains. Analytical results must be submitted within 10 days after the end of a compliance period or violations should be assigned.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1508001	EAGLEWOOD VILLAGE MHP	CWS	TCR	7/1/08, 9/1/08, 10/1/08, 12/1/08	Sampling results were received late. Why wasn't a violation assigned?	Results for July, September, October, and December were received more than 10 days after the end of the compliance period. In addition a violation was assigned for October, but rejected on January 14, 2009 when results were received.	If sample results are received prior to compliance being run (even if it is beyond the 10th of the month following the monitoring period) then a violation is not created. A violation was created for October of 2008 only. As per bureau policy, the status for the October 2008 M/R violation was changed from validated to rejected when the results were received. There is a SOX dated 1/15/09 (day after results were received in SDWIS) which was automatically created by the interface application.	Discrepancy remains. Analytical results must be submitted within 10 days after the end of a compliance period or violations should be assigned.
NJ1511017	JACKSON COLONIAL ARMS AP	CWS	TCR	9/1/08	System did not collect enough repeat samples following a positive sample. Why wasn't an M/R violation assigned?	Expect three repeat samples for each of the five routine samples with positive results for total coliform. Only four repeat samples were collected.	System was granted permission to only take four samples based on known problem. Boil Water Advisory had been continuously posted for duration. State does not concur that 15 repeat samples makes sense for such a small system.	Discrepancy remains. System must take the correct number of repeat samples or a violation should be assigned.

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NJ1511017	JACKSON COLONIAL ARMS AP	CWS	TCR	12/1/08	System failed to take five samples in the month following a TCR positive result. Why weren't violations assigned?	In December, 2008 for November positive samples. This question was added while preparing the draft report.		
NJ1511017	JACKSON COLONIAL ARMS AP	CWS	TCR	11/1/08	System reported an insufficient number of repeat samples. Why was an M/R violation assigned for failure to collect any repeat samples?	Expect to see six repeat samples collected after two routine samples were positive for total coliforms, but only three repeat samples were collected.	System was granted permission to only take four samples based on known problem. BWA had been continuously posted for duration.	Discrepancy remains. M/R repeat major (25) violation for November 2008 was found in SDWIS/Fed and not confirmed by the review. The system does have a confirmed M/R repeat minor (26) violation in November 2008.
NJ1322001	KEYPORT WATER DEPT	CWS	TCR	7/1/08-6/1/09	Cannot confirm for the 12 months listed above if system serving more than 4,900 persons collected their TCR samples on different days throughout the month. How does state verify that systems are collecting samples throughout the month, rather than all on	Counted as 11 discrepancies because one discrepancy was assigned for late reporting in May 2009.	Systems and labs are well versed in the requirement that the samples be distributed throughout the month. This information (days on which samples were collected) not provided when summary results are submitted. However, inspectors may review this information. NJDEP noted in further comments: Provide various dates that coliform sampling was performed each month. Status unknown.	Discrepancy remains. Federal rules require that systems serving more than 4,900 persons collect samples at regular time intervals throughout the month. Review could not determine that sampling was conducted on different days.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1322001	KEYPORT WATER DEPT	CWS	TCR	5/1/09	Sampling results were received late. Why was violation rejected?		As per bureau policy, the status for the M/R violation was changed from validated to rejected when the results were received.	Discrepancy stands.
NJ0233001	MAHWAH WATER DEPARTMENT	CWS	TCR	11/1/08	Sampling results reported late. An M/R violation was assigned, then deleted when results arrived. Why wasn't the violation kept and SOX'd instead?	November TCR results were reported late. Violation subsequently deleted from SDWIS/State.	On 2/5/09 the status for the type 23 violation for November 2008 was changed from validated to rejected due to late submission as per Bureau policy. There is a SOX dated 2/6/09 in SDWIS which was automatically created by the interface application.	Discrepancy stands, violation should remain in SDWIS/Fed, and then be returned to compliance, rather than being deleted from SDWIS/Fed.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ1225001	MIDDLESEX WATER COMPANY	CWS	TCR	7/1/08-2/1/09 and 4/1/09-6/1/09	System reported a sufficient number of required routine TCR samples. But, could not determine whether samples were collected on different days. How does the state make that determination?		Systems and labs are well versed in the requirement that the samples be distributed throughout the month. This information (days on which samples were collected) not provided when summary results are submitted. However, inspectors may review this information during their annual site visits. NJDEP noted in further comments: Provide documentation that sampling was done on various days. Status unknown.	Discrepancy remains. Federal rules require that systems serving more than 4,900 persons collect samples at regular time intervals throughout the month. Review could not determine that sampling was conducted on different days.
NJ1213002	MONROE TWP MUA	CWS	TCR	5/1/09	Suspect that sampling results were received late. Why wasn't a violation assigned?	Data entered into database on 7/14/09. Can you provide information that shows data were received before 6/10/09, as required?	Water System claimed data misplaced by state; water system provided evidence of mailing to state (Return Receipt). Therefore, the status of the violation was changed from validated to rejected although bureau policy would dictate it be deleted.	Data not provided for team to review, discrepancy stands.

PWS Number	PWS Name	PWS Type	Rule	Violation or Compliance Period Begin Date	Question	Supplemental Details	State Response	Discrepancy Resolution
NJ0809001	NJ AMERICAN WATER - BRIDGEPORT	CWS	TCR	7/1/08, 9/1/08	Sampling results were received late. Why wasn't a violation assigned?	Date in Drinking Water Watch indicates that July samples were reported on August 11, 2008, and September samples were reported on October 14, 2008.	If sample results are received prior to compliance being run (even if it is beyond the 10th of the month following the monitoring period) then a violation is not created. Note: results were received one and four days late with the 10th day falling on a weekend. We would have never created violations in these cases. We would probably always allow a five day grace period for weekends/holidays, etc. and data entry.	Discrepancies stand.
NJ1613002	WANAQUE W DEPT.	CWS	TCR	11/1/08	Sampling results reported late. An M/R violation was assigned, then deleted when results arrived. Why wasn't the violation kept and SOX'd instead?	For TCR samples collected in November 2008. Note in comments field of the rejected violation indicate that results were submitted late.	As per bureau policy, the status for the M/R violation was changed from validated to rejected when the results were received. There is a SOX dated 2/6/09 (day after results were entered) in SDWIS which was automatically created by the interface application.	Discrepancy remains. Analytical results must be submitted within 10 days after the end of a compliance period or violations should be assigned.

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NJ1518005	MANCHESTER TWP WATER UTILITY	CWS	VOC	1/1/06	VOC violation for 1/1/06 was clearly deleted by state for TP 007028 onced it was determined that it was not online during the year. The violation is marked as deleted in Drinking Water Watch, but is still in SDWIS/Fed. Why?		This violation was just deleted on November 17, 2009 based on information received from Enforcement. This revision will flow to SDWIS/FED in the next update any day now.	Discrepancy stands, late compliance determination.
NJ1427010	NJ VASA HOME WATER SYS	CWS	VOC	1/1/05, 1/1/07	Sampling results reported late. An M/R violation was assigned, then deleted when results arrived. Why wasn't the violation kept and SOX'd instead?	Violations for late receipt of samples were rejected on 2/28/06 for the 2005 VOC samples, and on 2/28/09 for the 2007 VOC samples.	As per bureau policy, the status for the M/R violation was changed from validated to rejected when the results were received. No violation found for non-submittal of VOCs in 2007.	Discrepancy remains. Analytical results must be submitted within 10 days after the end of a compliance period or violations should be assigned.
NJ1922314	ROLLING HILLS SCHOOL	NTNCWS	VOC	1/1/05	Sampling results reported late. An M/R violation was assigned, then deleted when results arrived. Why wasn't the violation kept and SOX'd instead?	System originally submitted results with wrong facility ID. Corrected originals were not received until 7/18/08, and violation was deleted, rather than returned to compliance.	As per bureau policy, the status for the M/R violation was changed from validated to rejected when the results were received.	Discrepancy remains. Analytical results must be submitted within 10 days after the end of a compliance period or violations should be assigned.