



Mojave River Forks Regional Park

2018 Consumer Confidence Report

General District Information

Mojave River Forks Regional Park

Is routinely monitored for constituents in the District's drinking water according to Federal and State laws. The tables show the results of the District's monitoring for the period of January 1st through December 31st, 2018.

Questions about this report or concerning the water system?

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Monday through Friday
(Except Wednesday)
8:00 a.m. – 5:00 p.m.
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8:30 a.m. – 5:00 p.m.
Closed on Holidays



Luther Snoke *Interim Director*

"The Department is committed to continuing to provide clean and safe water and high-quality customer services to the clients we serve."



Steve Samaras *Division Manager*

"The Division Staff are working on your behalf each and every day to ensure your water needs are met. It continues to be our pleasure to serve as your water purveyor."

Mojave River Forks water system is operated by the Special Districts Department (Department), Water and Sanitation Division. This regional park is located in the Summit Valley area of San Bernardino County.

The water system consists of 1 well and 1 water reservoir tank with a capacity of 50,000 gallons. There are 53 water connections, 1 residence, 25 RV spaces and 25 campsites.

Management and staff work as a team to ensure that the highest quality water is provided to our customers. A diligent regimen of testing and analysis for bacteriological, chemical, and radiological contaminants, along with physical qualities of the water is conducted throughout the year to ensure the highest water quality.

It is important to keep customers informed about the quality of water delivered over the past year. This year's annual Consumer Confidence Report (CCR), contains information about the contaminants detected in 2018 and previous years. The Department's responsibility is to provide a safe and dependable supply of drinking water.

In order to ensure that tap water is safe to drink, the U.S. Environmental Protection Agency (USEPA) and the State Water Resources Control Board, (State Board), prescribe regulations that limit the amount of certain contaminants in water provided by public water systems. The U.S. Food and Drug Administration regulations and California law also establish limits for contaminants in bottled water that provide the same protection for public health. Additional information on bottled water is available on the California Department of Public Health website at <https://www.cdph.ca.gov/Programs/CEH/DFDCS/Pages/FDBPrograms/FoodSafetyProgram/Water.aspx>.

Drinking water, including bottled water, may reasonably be expected to contain at least small amounts of some contaminants. The presence of contaminants does not necessarily indicate that water poses a health risk. More information about contaminants and potential health effects can be obtained by calling the USEPA's Safe Drinking Water Hotline at 1-800-426-4791, or visit their website at <https://www.epa.gov/dwstandardsregulations/drinking-water-contaminant-human-health-effects-information>.

This document is not a substitute for regulations; nor is it a regulation itself. Thus, it does not impose legally-binding requirements on the State Board or the Department, and may not apply to a particular situation based upon any member of the public.

This CCR reflects changes in drinking water regulatory requirements during 2018. All water systems are required to comply with the state Total Coliform Rule. Beginning April 1, 2016, all water systems are also required to comply with the federal Revised Total Coliform Rule. The new federal rule maintains the purpose to protect public health by ensuring the integrity of the drinking water distribution system and monitoring for the presence of microbials (i.e., total coliform and E. coli bacteria). The USEPA anticipates greater public health protection as the new rule requires water systems that are vulnerable to microbial contamination to identify and fix problems. Water systems that exceed a specified frequency of total coliform occurrences are required to conduct an assessment to determine if any sanitary defects exist. If found, these must be corrected by the water system.



¡MUY IMPORTANTE!

Este informe contiene información muy importante sobre su agua beber. Tradúzcalo ó hable con alguien que lo entienda bien.

WATER SOURCES

- Well 1: Ground Water; located in the Alto Subarea Water Basin

SOURCE WATER PROTECTION TIPS

Protection of drinking water is everyone's responsibility. You can help protect your community's drinking water source in several ways:

- Eliminate excess use of lawn and garden fertilizers and pesticides—they contain hazardous chemicals that can reach your drinking water source.
- Prevent septic system leaching to water source.
- Dispose of chemicals properly; take used motor oil to a recycling center.

WATER CONSERVATION TIPS

Did you know that the average U.S. household uses approximately 400 gallons of water per day or 100 gallons per person per day? Luckily, there are many low-cost and no-cost ways to conserve water. Small changes can make a big difference—try one today and soon it will become second nature.

- Take short showers—a 5 minute shower uses 10 to 25 gallons of water compared to up to 50 gallons for a bath.
- Shut off water while brushing your teeth, washing your hair and shaving to save up to 500 gallons a month.
- Use a water-efficient showerhead. They are inexpensive, easy to install, and can save you up to 740 gallons a month.
- Fix leaking toilets and faucets.
- Teach your kids about water conservation to ensure a future generation that uses water wisely.

THE SUBSEQUENT TABLES PROVIDE MANY TERMS AND ABBREVIATIONS THAT CUSTOMERS MAY NOT BE FAMILIAR WITH. TO UNDERSTAND THESE TERMS, THE DISTRICT HAS PROVIDED THE FOLLOWING DEFINITIONS AND GENERAL INFORMATION:

Non-Detect (ND) – laboratory analysis indicates that the constituent is not present or not tested.

MG – Million gallons

Parts per million (ppm) – one part per million corresponds to one minute in two years or a single penny in \$10,000.

Parts per billion (ppb) – one part per billion corresponds to one minute in 2,000 years.

Parts per trillion (ppt) – one part per trillion corresponds to one minute in 2,000,000 years.

Parts per quadrillion (ppq) – one part per quadrillion corresponds to one minute in 2,000,000,000 years.

Picocuries per liter (pCi/L) – Picocuries per liter is a measure of the radioactivity in water.

Nephelometric Turbidity Unit (NTU) – nephelometric turbidity unit is a measure of the clarity of water. Turbidity in excess of 5 NTU is just noticeable to the average person.

UCMR4 Statement – Additional Unregulated Pollutants were added to the UCMR4 monitoring list.

Millirems per year (mrem/yr) – measure of radiation absorbed by the body.

Million Fibers per Liter (MFL) – million fibers per liter is a measure of the presence of asbestos fibers that are longer than 10 micrometers.

Maximum Residual Disinfectant Level (MRDL) – The level of a disinfectant added for water treatment that may not be exceeded at the customer's tap.

Maximum Residual Disinfectant Level Goal (MRDLG) – The level of a disinfectant added for water treatment below which there is no known or expected health risk. MRDLGs are set by the U.S. Environmental Protection Agency.

Maximum Contaminant Level (MCL) – The highest level of a contaminant that is allowed in drinking water. Primary MCLs are set as close to the PHGs (or MCLGs) as is economically and technologically feasible. Secondary MCLs are set to protect the odor, taste, and appearance of drinking water.

Maximum Contaminant Level Goal (MCLG) – The level of a contaminant in drinking water below which there is no known or expected risk to health. MCLGs are set by the U. S. Environmental Protection Agency.

Public Health Goal (PHG) – The level of a contaminant in drinking water below which there is no known or expected risk to health. PHGs are set by the California Environmental Protection Agency.

Primary Drinking Water Standard (PDWS) – MCLs for contaminants that affect health along with their monitoring and reporting requirements, and water treatment requirements.

Regulatory Action Level (AL) – The concentrations of a contaminant which, if exceeded, triggers treatment or other requirements that a water system must follow.

Organic chemical contaminants, including synthetic and volatile organic chemicals, that are byproduct of industrial processes and petroleum production, and can also come from gas stations, urban stormwater run-off, agricultural application, and septic systems.

Radioactive contaminants, that can be naturally-occurring or be the result of oil and gas production and mining activities.

Hexavalent Chromium – there is currently no MCL for hexavalent chromium. The previous MCL of 0.010 mg/L was withdrawn on September 11, 2017.

1, 2, 3-trichloropropane (1,2,3-TCP) had a notification level (NL) of 5 ppt until December 14, 2017, when the MCL of 5 ppt became effective.

Microbial contaminants, such as viruses and bacteria, that may come from sewage treatment plants, septic systems, agricultural livestock operations, and wildlife.

Inorganic contaminants, such as salts and metals, that can be naturally-occurring or result from urban stormwater runoff, industrial or domestic wastewater discharges, oil and gas production, mining or farming.

Pesticides and herbicides, that may come from a variety of sources such as agriculture, urban stormwater runoff, and residential uses.

Sources of drinking water (both tap water and bottled water) include rivers, lakes, streams, ponds, reservoirs, springs and wells. As water travels over the surface of the land or through the ground, it dissolves naturally occurring minerals and in some cases, radioactive material, and can pick up substances resulting from the presence of animals or from human activity. Contaminants that may be present in source water is included in the following page:



PRIMARY DRINKING WATER STANDARDS

County of San Bernardino – Mojave River Fork Regional Park								
Lead and Copper	Units	Action Level	PHG	90th Percentile	No. Samples, No. Exceeding AL	Sample Year	Likely Source of Contamination	
Lead (Pb)	ppb	15	0.2	0.02	5 samples, 1 exceeded AL	2012	Internal corrosion of household water plumbing systems; discharges from industrial manufacturers, erosion of natural deposits	
Copper (Cu)	ppm	1.3	0.3	0.47	5 samples, 1 exceeded AL	2012	Internal corrosion of household plumbing systems; erosion of natural deposits; leaching from wood preservatives	
Microbiological Contaminants								
Contaminants	Highest No. of Detections	No. of Months in Violation	MCL			MCLG	Sample Period	Typical Source of Bacteria
Total Coliform (State Total Coliform Rule)	0	0	1 positive monthly sample			0	2018	Naturally present in the environment
Fecal Coliform or <i>E. coli</i> (State Total Coliform Rule)	0	0	A routine sample and a repeat sample are total coliform positive, and one of these is also fecal coliform or <i>E. coli</i> positive			-	2018	Human and animal fecal waste
<i>E. Coli</i> (Federal Revised Total Coliform Rule)	0	0	(a)			0	2018	Human and animal fecal waste
(a) Routine and repeat samples are total coliform-positive and either is <i>E. coli</i> -positive or system fails to take repeat samples following <i>E. coli</i> -positive routine sample or system fails to analyze total coliform-positive repeat sample for <i>E. coli</i> .								
Primary Inorganic Contaminants								
Contaminant	Primary MCL	PHG (MCLG)	Range of Detection	Average Level	MCL Violation	Sample Year	Likely Source of Contamination	
Nitrate as N (NO3-N)	10 ppm	10	1.6	1.6	NO	2018	Runoff and leaching from fertilizer use; erosion of natural deposits	
Hexavalent Chromium	-	0.02	1.80	1.80	NO	2014	Discharge from electroplating factories, leather tanneries, wood preservation, chemical synthesis, refractory production, and textile manufacturing facilities; erosion of natural deposits	
Disinfectant Byproducts and Chemical Disinfectant								
Contaminant	Primary MCL	PHG (MCLG)	Range of Detection	Average Level	MCL Violation	Sample Year	Likely Source of Contamination	
Cl Res Total (Field)	MRDL= 4.0 ppm	MRDLG=4	0–1.69	0.50	NO	2018	Drinking water disinfectant added for treatment	

SECONDARY DRINKING WATER STANDARDS

Contaminant	MCL	PHG (MCLG)	Range of Detection	Average Level	MCL Violation	Sample Year	Likely Source of Contamination
Odor Threshold	3 TON	N/A	1	1	NO	2018	Naturally occurring organic materials
Turbidity	5 NTU	N/A	0	0	NO	2018	Soil runoff
Apparent Color	15 Units	N/A	0	0	NO	2018	Naturally occurring organic materials
Hardness, Total (as CaCO3)	N/A	N/A	96	96	N/A	2010	N/A
Sodium (Na)	N/A	N/A	18	18	N/A	2010	N/A



Synthetic Organic Contaminants including Pesticides and Herbicides

Contaminant (CCR Units)	Sample Date	Average Level	MCL (PPT)	PHG (MCLG) in CCR units	MCL Violation	Health Effects Language	Major Source in Drinking Water
1, 2, 3 – Trichloropropane (mg/L)	2018	0.00	0.000005	0.0007	NO	Some people who drink water containing 1,2,3 trichloropropane in excess of the MCL over many years may have an increased risk of getting cancer.	Discharge from industrial and agricultural chemicals factories; leaching from hazardous waste site; used as cleaning and maintenance solvent, paint and varnish remover, and cleaning and degreasing agent; byproduct during the production of other compounds and pesticides.

SHOULD CUSTOMERS BE CONCERNED?

MCLs are set at very stringent levels. To understand the risk of possible health effects described for regulated contaminants, customers should know that a person would have to drink 2 liters of water every day at the MCL level for a lifetime to have a one-in-a-million chance of having the described health effect.

Some people may be more vulnerable to contaminants in drinking water than the general population. Immuno-compromised persons such as persons with cancer undergoing chemotherapy, persons who have undergone organ transplants, people with HIV/AIDS or other immune system disorders, some elderly, and infants can be particularly at risk from infections. These people should seek advice about drinking water from their health care providers. USEPA/Centers for Disease Control (CDC) guidelines on appropriate means to lessen the risk of infection by Cryptosporidium and other microbiological contaminants are available from the Safe drinking water hotline (1-800-426-4791).

Some people who drink water containing uranium in excess of the MCL over many years may have kidney problems or an increase risk of getting cancer.

Some people who drink water containing fluoride in excess of the federal MCL of 4mg/L over many years may get bone disease, including pain and tenderness of the bones. Children who drink water containing fluoride in excess of the State MCL of 2 mg/L may get mottled teeth.

If present, elevated levels of lead can cause serious health problems, especially for pregnant women and young children. Lead in drinking water is primarily from materials and components associated with service lines and home plumbing. Special Districts Department, Water and Sanitation Division is responsible for providing high quality drinking water, but cannot control the variety of materials used in plumbing components. When your water has been sitting for several hours, you can minimize the potential for lead exposure by flushing your tap for 30 seconds to 2 minutes before using water for drinking or cooking. If you are concerned about lead in your water, you may wish to have your water tested. Information on lead in drinking water, testing methods, and steps you can take to minimize exposure is available at <https://www.epa.gov/ground-water-and-drinking-water/basic-information-about-lead-drinking-water>.

Nitrate in drinking water at levels above 45 mg/L is a health risk for infants of less than six months of age. Such nitrate levels in drinking water can interfere with the capacity of the infant's blood to carry oxygen, resulting in a serious illness; symptoms include shortness of breath and blueness of the skin. Nitrate levels above 45 mg/L may also affect the ability of the blood to carry oxygen in other individuals, such as pregnant women and those with certain specific enzyme deficiencies. If you are caring for an infant, or you are pregnant, you should ask advice from your health care provider.

