

ANNUAL DRINKING WATER QUALITY REPORT for 2017

CITY OF WATERTOWN WATER DEPARTMENT
245 Washington Street Suite 202, Watertown, New York 13601
April 2018

PUBLIC WATER SUPPLY I.D. #2202346

INTRODUCTION

To comply with State and Federal regulations, the **City of Watertown Water Department** annually issues a report describing the quality of your drinking water. The purpose of this report is to raise your understanding of drinking water and awareness of the need to protect our drinking water sources. Last year, your tap water meet all State and Federal drinking water health standards **except** for the disinfection by products Tri Halo Methane (THM) and Halo Acetic Acids (HAA5). This report provides an overview of last year's water quality. Included are details about where your water comes from, what it contains, and how it compares to State and Federal standards.

If you have any questions about this report or concerning your drinking water, please contact **Vicky L. Murphy, Superintendent of Water, at (315) 785-7757**. We want you to be informed about your drinking water. If you want to learn more, please attend any of our regularly scheduled City Council meetings. Significant items of agenda are normally printed in the Watertown Daily Times a few days prior to the meeting. The meetings are on the first and third Mondays of the month at 7:00 pm in the City Council chambers located on the third floor of City Hall, 245 Washington Street, Watertown, New York. Notices of Public Hearings are always printed in the newspaper prior to the meeting under "Legal Notices" in the classified section.

WHERE DOES OUR WATER COME FROM?

In general, the 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 activities. Contaminants that may be present in source water include: microbial contaminants; inorganic contaminants; pesticides and herbicides; organic chemical contaminants; and radioactive contaminants. In order to ensure that tap water is safe to drink, the State and the EPA prescribe regulations which limit the amount of certain contaminants in water provided by public water systems. The State Health Department's and the FDA's regulations establish limits for contaminants in bottled water which must provide the same protection for public health.

Our water source is the Black River, a surface water source, which originates in the Adirondack Mountains and runs through the center of the City and westerly to Black River Bay. During 2017 our system did not experience any restriction of our water source. Flows in the Black River are regulated by the Hudson-Black River Regulating District and are controlled by a series of hydro-electric power dams stretching from its headwaters in the Adirondacks to its mouth in Lake Ontario. If the City of Watertown's 15 million gallon per day Water Treatment Plant were running at full capacity, it would need only 2.3% of the minimum flow of the Black River. The water is treated within modern facilities prior to distribution. The water filtration building and main pumping station were reconstructed in 1987-1991. Liquid Alum and a nonionic polymer are added to the water to coagulate and settle out dirt and organic matter through a dosing station upstream of the water plant. The settled water is then pumped to the process complex at 1707 Huntington Street. Polyaluminum chloride and nonionic or cationic polymer are added prior to filtering. Carbon may be added to combat taste and odor. The filtered water is disinfected with chlorine to kill bacteria, viruses, and other microorganisms. The water is then treated with sodium silicate for corrosion control and with fluoride to help fight tooth decay. The finished potable water is pumped to the City's distribution system and through the Development Authority of the North Country's line to the Towns of Champion, LeRay, and Pamela.

NYSDOH SOURCE WATER ASSESSMENT PROGRAM FINDINGS

The NYSDOH has evaluated this PWS's (public water supply's) susceptibility to contamination under the Source Water Assessment Program (SWAP), and their findings are summarized in the paragraph below. It is important to stress that these assessments were created using available information and only estimate the potential for source water contamination. Elevated susceptibility ratings do not mean that source water contamination has or will occur for this PWS. This PWS provides treatment and regular monitoring to ensure the water delivered to consumers meets all applicable standards.

Overall, this water supply is most susceptible to microbial contaminants, primarily from pasture and permitted discharges within the watershed. Sediment and turbidity associated with mining operations is also a concern, and transportation routes also have a potential to contribute various contaminants. A copy of the assessment can be obtained by contacting the supplier of water.

FACTS AND FIGURES

Our water system serves residents, businesses, and industry in and adjacent to the City, as well as Water Districts in the Town of Watertown, the Lettiere Tract, and the Watertown Correctional Facility. City water is also supplied to the Development Authority of the North Country water line serving the Towns of Champion, LeRay, and Pamela. The latest census figures set the City of Watertown's population at 26,705. Approximately 23,000 additional consumers reside or work in the Towns of Watertown, Champion, Leray, Hounsfield and Pamela. There are approximately 8,250 service connections inside the City of Watertown.

The total plant output for 2017 was 1,756,446,000 gallons; the daily average was 4,812,000 gallons; the highest single day was 6,317,000 gallons. The amount of water delivered to customers was 1,271,452,748. The remaining 484,995,252 gallons, or approximately 28 percent of the water produced, can be attributed to leaks, fires; annual flushing of water mains and hydrants, flushing and disinfection of newly constructed or repaired water mains, process water used at the Water Plant, and a few un-metered municipal accounts.

The **annual cost** of water for an inside residential user of 30 units (22,440 gallons) per quarter (every three months), is \$357.60, an average of \$3.984 per K Gallon (thousand gallons). The **minimum billing** for residential users inside the City, except for customers with an elderly exemption, is \$33.30, which is based on 9 units (6,732 gallons) quarterly. This equates to \$133.20 annually and averages \$4.947 per K gallon.

ARE THERE CONTAMINANTS IN OUR DRINKING WATER?

As the State regulations require, the City of Watertown routinely monitors and tests your drinking water for numerous contaminants. These contaminants include: total coliform, turbidity, inorganic compounds, nitrate, lead and copper, volatile organic compounds, total trihalomethanes, haloacetic acids, List 1 and 2 of the Unregulated Contaminant Monitoring Rule(UCMR), Giardia & Cryptosporidium, Gross Alpha, Radium 226 and 228 and synthetic organic compounds. In 2017 the water was tested for 52 principal organic chemicals (POC's), vinyl chloride, MTBE, nitrate, synthetic organic compounds(SOC's), PFOA, PFOS, Lead, Copper, THM, HAA5, turbidity and total coliform. The table presented on the next page depicts compounds, which were detected in your drinking water. The State allows us to test for some contaminants less than once per year because the concentrations of these contaminants do not change frequently. Some of our data, though representative, is more than one year old.

This is a partial list of contaminates that were tested for as part of the 2014 UCMR sampling and were not detectable in any samples: arsenic, gross alpha and beta particles, chromium (total), cobalt, molybdenum, chlorate, equilin, estradiol, estrol, estrone, ethynylestradiol, 1,1- dichloroethane, 1,2,3-trichloropropane, 1,3-butadiene, bromochloromethane, bromomethane, chlorodifluoromethane, chloromethane, 1,4-dioxane, perfluorobutanesulfonic acid (PFBS), perfluoroheptanoic acid (PFHpA), perfluorohexanesulfonic acid (PFHxS) perfluorononanoic acid (PFNA), perfluorooctanoic acid (PFOA), perfluorooctanesulfonic acid (PFOS).

It should be noted that all drinking water, including bottled drinking water, might 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 EPA's Safe Drinking Water Hotline (800-426-4791) or the New York State Health Department District Office at (315) 785-2277.

Additional information is available from the EPA's SAFE DRINKING WATER HOTLINE (800-426-4791)

The Long Term 2 Enhanced Surface Water Treatment

Rule (LT2 Rule) requires public water systems (PWSs) that use surface water or ground water under the direct influence (GWUDI) of surface water to monitor their source water (influent water prior to treatment plant) for Cryptosporidium, Giardia, E.coli, and turbidity over a 24 month period. The City commenced sampling in October 2016 and will continue to sample monthly over the next 24 months. The LT2 Rule is a National Primary Drinking Water Regulation that requires monitoring, reporting, and public notification for all PWSs that use surface water or GWUDI sources. The LT2 Rule was developed to improve the control of microbial pathogens, including specifically the protozoan Cryptosporidium, in drinking water and to address risk trade-offs with disinfection byproducts.

Cryptosporidium is a microbial pathogen found in surface water and groundwater under the influence of surface water. Although filtration removes Cryptosporidium, the most commonly used filtration methods cannot guarantee 100 percent removal. During 2017, as part of our routine sampling plan, 12 samples of the Black River were collected and analyzed for Cryptosporidium oocysts. Of these samples, one was presumed positive for Cryptosporidium. Therefore, our monitoring indicates the presence of Cryptosporidium in our source water. Current test methods do not allow us to determine if the organisms are dead or if they are capable of causing disease. Ingestion of Cryptosporidium may cause cryptosporidiosis, a gastrointestinal infection. Symptoms of infection include nausea, diarrhea, and abdominal cramps. Most healthy individuals can overcome disease within a few weeks. However, immuno-compromised people are at greater risk of developing life-threatening illness. We encourage immuno-compromised individuals to consult their health care provider regarding appropriate precautions to take to avoid infection. Cryptosporidium must be ingested to cause disease, and it may be spread through means other than drinking water.

Giardia is a microbial pathogen present in varying concentrations in many surface waters and groundwater under the influence of surface water. Giardia is removed/inactivated through a combination of filtration and disinfection or by disinfection. During 2017, as part of our routine sampling plan, 12 samples of the Black River were collected and analyzed for Giardia cysts. Of these samples, 7 were presumed positive for Giardia. Therefore, our monitoring indicates the presence of Giardia in our source water. Current test methods do not allow us to determine if the organisms are dead or if they are capable of causing disease. Ingestion of Giardia may cause giardiasis, an intestinal illness. People exposed to Giardia may experience mild or severe diarrhea, or in some instances no symptoms at all. Fever is rarely present. Occasionally, some individuals will have chronic diarrhea over several weeks or a month, with significant weight loss. Giardiasis can be treated with anti-parasitic medication. Individuals with weakened immune systems should consult with their health care providers about what steps would best reduce their risks of becoming infected with Giardiasis. Individuals who think that they may have been exposed to Giardiasis should contact their health care providers immediately. The Giardia parasite is passed in the feces of an infected person or animal and may contaminate water or food. Person to person transmission may also occur in day care centers or other settings where handwashing practices are poor.

Why Save Water and How to Avoid Wasting It?

Although our system has an adequate amount of water to meet present and future demands, there are a number of reasons why it is important to conserve water:

- ♦ Saving water saves energy and some of the costs associated with both of these necessities of life;
- ♦ Saving water reduces the cost of energy required to pump water and the need to construct costly new wells, pumping systems and water towers; and
- ♦ Saving water lessens the strain on the water system during a dry spell or drought, helping to avoid severe water use restrictions so that essential fire fighting needs are met.

You can play a role in conserving water by becoming conscious of the amount of water your household is using, and by looking for ways to use less whenever you can. It is not hard to conserve water. Conservation tips include:

- ♦ Automatic dishwashers use 15 gallons for every cycle, regardless of how many dishes are loaded.
- ♦ Turn off the tap when brushing your teeth.
- ♦ Check every faucet in your home for leaks. Just a slow drip can waste 15 to 20 gallons a day. Fix it up and you can save almost 6,000 gallons per year.
- ♦ Check your toilets for leaks by putting a few drops of food coloring in the tank, watch for a few minutes to see if the color shows up in the bowl. It is not uncommon to lose up to 100 gallons a day from one of these otherwise invisible toilet leaks. Fix it and you save more than 30,000 gallons a year.
- ♦ Use your water meter to detect hidden leaks. Simply turn off all taps and water using appliances, then check the meter after 15 minutes, if it moved, you have a leak.

Additional information is available from the EPA's SAFE DRINKING WATER HOTLINE (800-426-4791)

Table of Detected Contaminants

Contaminant ^{note}	Violation Yes/No	Date of Sample	Level Detected (Avg/Max) (Range)	Unit Measure	MCLG	Regulatory Limit (MCL, TT or AL)	Likely Source of Contamination
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Microbiological Contaminants

Total Coliform ¹	NO	2017	None Detected	N/A	N/A	MCL=less than 5%of samples positive in any month	Naturally present in the environment
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Physical Parameters

Turbidity Distribution ²	NO	4/17	0.16 (.13-0.21)	NTU	N/A	TT=<5NTU	Particles from corrosion of water mains
Turbidity Composite Filter Effluent ^{2a}	NO	6/17	0.25 (.07-0.25)	NTU	N/A	TT=95% of samples<0.3 NTU	Particles introduced during the treatment process or too fine to filter completely

Inorganic Contaminants

Asbestos	NO	7/14	0 fibers>10um 1 fiber <10um	MFL	NA	7MFL>10um	Water Distribution Piping
Barium	NO	7/16	0.010	mg/l (ppm)	2	MCL-2.0mg/l	Erosion of natural products
Chloride	NO	7/08	16	mg/l (ppm)	NA	MCL-250 mg/l	Indicative of road salt infiltration or naturally occurring
Copper ³	NO	3/2017 12/16-3/17 10/2017 9/17-10/17	0.62 (0.015-1.2) 0.29 (0.0042-0.4)	mg/l (ppm)	1.3	AL-1.3 mg/l	Corrosion of household plumbing
Fluoride	NO	2017	0.70 (0.47-91)	mg/l (ppm)	2.2	MCL-2.2 mg/l	Natural and added for prevention tooth decay
Lead ⁴	NO	3/2017 12/16-3/17 10/2017 9/17-10/17	14 (ND-160) 10 (ND-38)	ug/l (ppb)	0	AL-15 ug/l	Corrosion of household plumbing
Manganese	NO	8/08	13	ug/l (ppb)	NA	MCL-300 ug/l	Naturally occurring
Nickel	NO	7/16	0.58	ug/l (ppb)	100	MCL- 100 ug/l	Naturally occurring and industrial activities
Nitrate	NO	7/17	1.1	mg/L (ppm)	NA	MCL-10 mg/l	Agricultural Runoff
Sodium	NO	8/08	14	mg/L (ppm)	NA	20mg/l	Naturally occurring
Sulfate	NO	7/08	23	mg/l (ppm)	NA	MCL-250 mg/l	Naturally occurring

Table of Detected Contaminants

Contaminant	Violation Yes/No	Date of Sample	Level Detected (Avg/Max) (Range)	Unit Measure	MCLG	Regulatory Limit (MCL, TT or AL)	Likely Source of Contamination
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Unregulated Contaminates Monitoring Rule 3 List 1⁵

Chromium-6	NO	2/1-5/14 8/14-11/14	0.04 (ND-0.102)	ug/l (ppb)	NA	NA	Naturally occurring
Strontium	NO	2/14-5/14 8/14-11/14	71.49 (45.0-120.4)	ug/l (ppb)	NA	NA	Naturally occurring
Vanadium	NO	2/14-5/14 8/14-11/14	0.44 (ND-0.78)	ug/l (ppb)	NA	NA	Naturally occurring

Unregulated Contaminates Monitoring Rule 3 List 2⁵

Androstene	NO	2/14-5/14 8/14-11/14	0.00035 (ND-0.00064)	ug/l (ppb)	NA	NA	Naturally produced hormone in the human body
Testosterone	NO	2/14-5/14 8/14-11/14	0.0001 (ND-0.00025)	ug/l (ppb)	NA	NA	Naturally produced in the human body

Radiological

Combined Radium-226 Radium-228	NO	7/14	1.2	pCi/L	NA	5 pCi/L	Erosion of natural deposits
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Disinfection Byproducts

Total Organic Carbon Raw water	NO	2017	4.6 (2.6-6.5)	mg/l (ppm)	NA	TT	Naturally present in the environment
Total Organic Carbon Filtered Water	NO	2017	1.9 (1.4-2.8)	mg/l (ppm)	NA	TT	Naturally present in the environment
Total Trihalomethanes Stage 2 Rule ⁶	YES	3/17 6/17 9/17 12/17	90.5 (19.4-122.9)	ug/l (ppb)	NA	MCL=80	Byproduct of drinking water chlorination
Haloacetic Acids Stage 2 Rule ⁷	YES	9/17 12/17	66.6 60.6 (25.2-82.7)	ug/l (ppb)	NA	MCL=60	Byproduct of drinking water chlorination

Table Notes:

1 – We collect more than 40 samples per month. Of 480 routine samples taken during 2017, 0 were tested positive for total coliform. Coliform are naturally occurring bacteria that are used as an indicator of the possibility that potentially harmful bacteria could be present. Subsequent samples taken following the positive total coliform where negative.

2 - Turbidity is a measure of the cloudiness of the water. We test it because it is a good indicator of the effectiveness of our filtration system. Our highest average distribution turbidity measurement for the year was 0.21 and occurred in April 2017. State regulations require that the monthly average turbidity must always be below 5 NTU.

2a - The regulations require that 95% of the combined filter effluent turbidity levels recorded have measurements below 0.3 NTU. The maximum combined filter effluent recorded at the plant in 2017 was 0.25 NTU and occurred in June 2017. 100% of the combined filter effluent turbidities were below the MCL.

3 - The level(s) (290 ppb and 620 ppb) represents the 90th percentile of two sampling events where 60 samples were collected six months apart. A percentile is a value on a scale of 100 that indicates the percent of a distribution that is equal to or below it. The 90th percentile is equal to or greater than 90% of the copper values detected at your water system. In this case, 60 samples were collected at your water system and the 90th percentile value was the seventh highest value (first sampling event 290 ppb and second event 620 ppb). The action level for copper (1300 ppb) was not exceeded at any of the sites tested.

4 - The level(s) (14 ppb and 10 ppb) represents the 90th percentile of two sampling events where 60 samples were collected six months apart. The action level for lead (15 ppb) was exceeded at 6 of the 60 sites tested each sample event. Infants and children who drink water containing lead in excess of the action level could experience delays in their physical or mental development. Children could show slight deficits in attention span and learning abilities. Adults who drink this water over many years could develop kidney problems or high blood pressure. Infants and young children are typically more vulnerable to lead in drinking water than the general population. It is possible that lead levels at your home may be higher than at other homes in the community as a result of materials used in your home's plumbing. If you are concerned about elevated lead levels in your home's water, you may wish to have your water tested and you should flush your tap for 30 seconds to 2 minutes before using your tap water. Additional information regarding lead in drinking water is available from the Safe Drinking Water Hotline (1-800-426-4791).

Additional information is available from the EPA's SAFE DRINKING WATER HOTLINE (800-426-4791)

5- Unregulated Contaminates values indicate that there are levels of contaminants detectable above the minimal readable range of the test, and their presences does not indicate a health concern. Unregulated contaminants do not have a MCL and are being monitored to determine future regulations. You may obtain the monitoring results by calling Aaron Harvill at (315)785-7845

6 -Stage 2 DBP Rule sampling began in November 2013. Stage 2 average represents the highest locational running average of all the sites sampled for THM's. Data is collected monthly and averaged to calculate the quarterly data value. Stage 2 sample ranges represents the array of results from all collected samples. Violation occurs when the average of the 4 most recent quarters for an individual site exceed 80.0 ppb. The City has had 4 consecutive quarters of THM levels exceeding the 80.0 ppb MCL at one location requiring a City wide mailing each time.

7 - Stage 2 DBP Rule sampling began in November 2013. Stage 2 average represents the highest locational running average of all the sites sampled for HAA5's. Data is collected monthly and averaged to calculate the quarterly data value. Stage 2 sample ranges represents the array of results from all collected samples. Violation occurs when the average of the 4 most recent quarters for an individual site exceed 60.0 ppb. The City has had HAA5 level exceeds of the 60.0 ppb MCL at two locations during the 3rd and 4th quarter of 2017 requiring a City wide mailing each time.

DEFINITIONS:

Maximum Contaminant Level (MCL): The highest level of a contaminant that is allowed in drinking water. MCLs are set as close to the MCLGs as feasible.

Maximum Contaminant Level Goal (MCLG): The level of a contaminant in drinking water below which there is no known or expected risk to health. MCLGs allow for a margin of safety.

Maximum Residual Disinfectant Level (MRDL): The highest level of a disinfectant allowed in drinking water. There is convincing evidence that addition of a disinfectant is necessary for control of microbial contaminants.

Maximum Residual Disinfectant Level Goal (MRDLG): The level of a drinking water disinfectant below, which there is no known or expected risk to health. MRDLGs do not reflect the benefits of the use of disinfectants to control microbial contamination.

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

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

Non-Detects (ND): Laboratory analysis indicates that the constituent is not present.

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

Milligrams per liter (mg/l): Corresponds to one part of liquid in one million parts of liquid (parts per million-ppm).

Micrograms per liter (ug/l): Corresponds to one part of liquid in one billion parts of liquid (parts per billion- ppb).

Picocuries per liter (pCi/L): A measure of the radioactivity in water.

Million fibers per liter (MFL): A measure of the presence of asbestos fibers longer than 10 micrometers.

WHAT DOES THIS INFORMATION MEAN?

As displayed in the table, the City has had several reoccurring Trihalomethanes and Haloacetic acids violations during 2017. Some people who drink water containing Haloacetic acids in excess of the MCL over many years may have an increased risk of getting cancer. Some people who drink water containing Trihalomethanes in excess of the MCL over many years may experience problems with their kidneys, liver, or central nervous system, and may have an increased risk of getting cancer. The City is committed to improving the quality of the finished product it supplies to its customers and is working towards solution. The roots of the problem are organic compounds that enter the system and react with chlorine to produce DBP's. The City is looking at changing the use of chlorine during different phases of the treatment process; the goal is to remove the catalysis that causes the DBP formation.

Lead: It should be noted that the action level for lead was not exceeded in the 2017 samples. However; we are still required to present the following information on lead in drinking water due to previous detections while still maintaining compliance:

If present, elevated levels of lead can cause serious health problems, especially for pregnant women, infants, and young children. It is possible that lead levels in your home may be higher than at other homes in the community as a result of materials used in your home's plumbing. The City of Watertown Water Department 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 from the Safe Drinking Water Hotline (1-800-426-4791) or at <http://www.epa.gov/safewater/lead>.

The City of Watertown is currently required to sample 60 homes every year for lead and copper levels. The latest round of sampling took place during the fall of 2017. Action levels (AL) are not exceeded as long as 90% of the samples tested contain less than 15 ppb for lead and 1.3 ppm for copper. The next scheduled round of sampling for Lead and Copper will be in 2018.

IS OUR WATER SYSTEM MEETING OTHER RULES THAT GOVERN OPERATIONS?

The City has had continual difficulties meeting the requirements for the Stage II DBP levels for THM and HAA5. Violations occur when the running average for an individual location exceed the MCL. The running average is calculated with the 4 most recent quarter results for an individual site. A violation that occurs at a single site that is not isolated from the rest of the system requires a city wide notification. During 2017 our system was in compliance with ALL New York State operating, monitoring, and reporting requirements.

Where do TTHM's and HAA5's come from?

Trihalomethanes and Haloacetic acids are a groups of chemicals that are formed in drinking water during treatment by chlorine, which reacts with certain acids that are in naturally-occurring organic material (e.g., decomposing vegetation such as tree leaves, algae or other aquatic plants) in surface water sources such as rivers and lakes. The amount of Trihalomethanes and Haloacetic acids in drinking water can change from day to day, depending on the temperature, the amount of organic material in the water, the amount of chlorine added, and a variety of other factors. Drinking water is disinfected by public water suppliers to kill bacteria and viruses that could cause serious illnesses. Chlorine is the most commonly used disinfectant in New York State. For this reason, disinfection of drinking water by chlorination is beneficial to public health.

IMPORTANT INFORMATION ABOUT THM's

Some studies suggest that people who drink chlorinated water (which contains trihalomethanes) or water containing elevated levels of trihalomethanes for long periods of time may have an increased risk for certain health effects. For example, some studies of people who drank chlorinated drinking water for 20 to 30 years show that long term exposure to disinfection by-products (including trihalomethanes) is associated with an increased risk for certain types of cancer. A few studies of women who drank water containing trihalomethanes during pregnancy show an association between exposure to elevated levels of trihalomethanes and small increased risks for low birth weights, miscarriages and birth defects. However, in each of the studies, how long and how frequently people actually drank the water, as well as how much trihalomethanes the water contained is not known for certain. Therefore, we do not know for sure if the observed increases in risk for cancer and other health effects are due to trihalomethanes or some other factor.

The individual trihalomethanes chloroform, bromodichloromethane and dibromochloromethane cause cancer in laboratory animals exposed to high levels over their lifetimes. Chloroform, bromodichloromethane and dibromochloromethane are also known to cause effects in laboratory animals after high levels of exposure, primarily on the liver, kidney, nervous system and on their ability to bear healthy offspring. Chemicals that cause adverse health effects in laboratory animals after high levels of exposure may pose a risk for adverse health effects in humans exposed to lower levels over long periods of time.

IMPORTANT INFORMATION ABOUT HAA5's

Some studies of people who drank chlorinated drinking water for 20 to 30 years show that long term exposure to disinfection by-products (possibly including haloacetic acids) is associated with an increased risk for certain types of cancer. However, how long and how frequently people actually drank the water as well as how much haloacetic

Additional information is available from the EPA's SAFE DRINKING WATER HOTLINE (800-426-4791)

acids the water contained is not known for certain. Therefore, we do not know for sure if the observed increased risk for cancer is due to haloacetic acids, other disinfection by-products, or some other factor.

The individual haloacetic acids dichloroacetic acid and trichloroacetic acid cause cancer in laboratory animals exposed to high levels over their lifetimes. Dichloroacetic acid and trichloroacetic acid are also known to cause other effects in laboratory animals after high levels of exposure, primarily on the liver, kidney and nervous system and on their ability to bear healthy offspring. Chemicals that cause effects in animals after high levels of exposure may pose a risk to humans exposed to similar or lower levels over long periods of time.

Do I Need To Take Special Precautions?

Some people may be more vulnerable to disease causing microorganisms or pathogens 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 from their health care provider about their drinking water. EPA/CDC guidelines on appropriate means to lessen the risk of infection by *Cryptosporidium*, *Giardia* and other microbial pathogens are available from the Safe Drinking Water Hotline (800-426-4791).

INFORMATION ON FLUORIDE ADDITION

Our system is one of many drinking water systems in New York State that provides drinking water with a controlled, low level of fluoride for consumer dental health protection. According to the United States Centers for Disease Control, fluoride is very effective in preventing cavities when present in drinking water at a properly controlled level. To ensure that the fluoride supplement in your water provides optimal dental protection, the State Department of Health requires that we monitor fluoride levels on a daily basis to make sure fluoride levels in your water are maintained at a target of 0.7 mg/l. During 2017 monitoring showed fluoride levels in your water in the optimal range 100% of the time. None of the fluoride monitoring results showed fluoride at levels that approach the 2.2 mg/l MCL for fluoride.

SYSTEM IMPROVEMENTS

In 2017 City Water Distribution personnel installed 2200 feet of new 8" water main on Knickerbocker Dr., installed 20 new services, repaired 13 services for City customers and installed 4 new hydrants. The annual flushing program was conducted during an eight week period between May and June. The water meter replacement program upgraded 1,100 residential and commercial water meters.

In 2018 the City plans to explore some options cited in the treatment process evaluation performed during 2017. The recommendations include elimination of chlorine prior to filtration, alkalinity adjustment of the finished water and chloride monitoring of the source water. Water department staff will continue the push for the installation of fiber optic cables and remote video surveillance to improve security. The coagulation basin off NYS Rte. 3 East will be dredged annually of alum sludge accumulation with the dredge purchased in August 2013.

CLOSING

Thank you for allowing us to continue to provide you and your family with quality drinking water this year. We ask that all our customers help us protect our water sources, which are the heart of our community. Please call our office if you have questions.