



2016 WATER QUALITY REPORT FOR CITY OF STANHOPE-PWSID 4045090

This report contains **important** information regarding the water quality in our water system. The source of our water is groundwater. The City of Stanhope obtains its water from the Mississippian aquifer. Every aquifer has a degree of susceptibility to contamination because of the characteristics of the aquifer, overlying materials and human activity. Susceptibility to contamination generally increases with shallower aquifers, increasing permeability of the aquifer and overlying material, nearby development or agricultural activity, and abandoned or poorly maintained wells. The Mississippian aquifer was determined to have insignificant susceptibility. The City of Stanhope wells should not be susceptible to most contaminant sources except through pathways to the aquifer such as abandoned or poorly maintained wells. A detailed evaluation of your source water was completed by the Iowa Department of Natural Resources, and is available from the City of Stanhope, 600 Main Street, during regular business hours. Please feel free to contact the City of Stanhope at: **515-826-3290**. Our water quality testing shows the following results:

CONTAMINANT DETECTION REPORT

| CONTAMINANT | MCL- (MCLG) | Compliance | | Date | Violation | Source |
|--|-------------------------|------------|------------------|------------|-----------|---|
| | | Type | Value & (Range) | | | |
| Copper (ppm) | AL= 1.3 (1.3) | 90th | 0.5 (0.02 - 0.7) | 2016 | No | Corrosion of household plumbing systems; Erosion of natural deposits; Leach ing from wood preservatives |
| Lead (ppb) | AL= 15 (0) | 90th | 3.00 (ND - 4) | 2016 | No | Corrosion of household plumbing systems; erosion of natural deposits |
| 950 - DISTRIBUTION SYSTEM | | | | | | |
| Chlorine (ppm) | MRDL=4.0 (MRDLG=4.0) | RAA | 2.3 (ND - 3) | 12/31/2016 | No | Water additive used to control microbes |
| 01 - S/ EP FM WELLS #4 & #5 - TREATED | | | | | | |
| Fluoride (ppm) | 4 (4) | SGL | 2.28 | 01/26/2015 | No | Water additive which promotes strong teeth; Erosion of natural deposits; Discharge from fertilizer and aluminum factories |
| Sodium (ppm) | N /A (N/A) | SGL | 220.94 | 6/08/2016 | No | Erosion of natural deposits: Added to water during treatment process |
| Nitrate [as N] (ppm) | 10 (10) | SGL | 0.077 | 2016 | No | Runoff from fertilizer use; Leaching from septic tanks, sewage; Erosion of natural deposits |

Note: Contaminants with dates indicate results from the most recent testing done in accordance with regulations.

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 using the best available treatment technology.

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

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

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

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 contaminants.

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.

ppb -- parts per billion.

N/A -Not applicable

LRAA -Locational Running Annual Average

ppm -- parts per million.

ND --Not detected

SGL -Single Sample Result

pCi/L -picocuries per liter

RAA -Running Annual Average

TCR - Total Coliform Rule



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GENERAL INFORMATION

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 posed a health risk. More information about contaminants or potential health effects can be obtained by calling the Environmental Protection Agency's Safe Drinking Water Hotline (**800-426-4791**).

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. EPA/CDC guidelines on appropriate means to lessen the risk of infection by *Cryptosporidium* and other microbial contaminants are available from the Safe Drinking Water Hotline (**800-426-4791**).

FOR FLUORIDE LEVELS OVER 2.0 PPM BUT LESS THAN 4.0 PPM

Fluoride in children's drinking water at levels of approximately 1 mg/L reduces the number of dental cavities. However, some children exposed to levels of fluoride greater than about 2.0 mg/L may develop dental fluorosis. Dental fluorosis, in its moderate and severe forms, is a brown staining and/or pitting of the permanent teeth. Because dental fluorosis occurs only when developing teeth (before they erupt from the gums) are exposed to elevated fluoride levels, households without children are not expected to be affected by this level of fluoride. Families with children under the age of nine are encouraged to seek other sources of drinking water for their children to avoid the possibility of staining and pitting. Your water supplier can lower the concentration of fluoride in your water so you will still receive the benefits of cavity prevention while the possibility of stained and pitted teeth is minimized. Removal of fluoride may increase your water costs. Treatment systems are also commercially available for home use. Information on such systems is available at the address given by your public water supply. Low fluoride bottled drinking water that would meet all standards is also commercially available.

This is an alert about your drinking water and a cosmetic dental problem that might affect children under nine years of age. At low levels, fluoride can help prevent cavities, but children drinking water containing more than 2.0 milligrams per liter (mg/L) of fluoride may develop cosmetic discoloration of their permanent teeth (dental fluorosis). The drinking water provided by your public water system, Stanhope Water Department has a fluoride concentration of 2.28 mg/L; from a sample collected on 1/26/2016.

Dental fluorosis in its moderate or severe forms may result in a brown staining and or pitting of the permanent teeth. This problem occurs only in developing teeth, before they erupt from the gums. Children under nine should be provided with alternative sources of drinking water or water that has been treated to remove the fluoride to avoid the possibility of staining and pitting of their permanent teeth. You may also want to contact your dentist about proper use by young children of fluoride containing products. Older children and adults may safely drink the water.

Drinking water containing more than 4.0 mg/L of fluoride (the U.S. Environmental Protection Agency's drinking water standard) can increase your risk of developing bone disease. Your drinking water does **not** contain more than 4.0 mg/L of fluoride, but we're required to notify you when we discover that the fluoride levels in your drinking water exceed 2.0 mg/L because of this cosmetic dental problem.

For more information, please call Stanhope Water Department at 515-826-3290. Some home water treatment units are also available to remove fluoride from drinking water. In Iowa, home water treatment units are regulated under 641—Chapter 14, with the water treatment unit registration program administered by the Iowa Department of Public Health's environmental health division. In addition, you may call the National Sanitation Foundation (NSF) International, at 877-867-3435.

Please share this information with all the other people who drink this water, especially those who may not have received this notice directly (for example, people in apartments, nursing homes, schools, and businesses).



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INFORMATION REGARDING LEAD

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. Stanhope Municipal Utilities 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 or at <http://www.epa.gov/safewater/lead>.

OTHER VIOLATIONS

None

CONTACT INFORMATION

For questions regarding this information, please contact the City Office at: 515-826-3290 during the following hours: 8:00 A.M. until 12:00 Noon, 1:00 P.M. until 5:00 P.M., Monday-Friday or by calling Mike Hanson, Public Works, at 515-835-7160.

DECISION MAKING AUTHORITY

Decisions regarding the water system are made at the Stanhope City Council meetings held on the 2nd Tuesday of the month at 6:30 P.M. o'clock at the Stanhope Community Center, 600 Main Street, Stanhope, Iowa and are open to the public.

FOR FURTHER INFORMATION CONTACT:

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