SOUTHWEST DRINKING WATER OPERATIONS P.O. Box 47823 Olympia, Washington 98504-7823 *PHONE (360) 236-3030 FAX (360) 236-3029*

November 8, 2021

Greg Rae Olympic Water & Sewer, Inc. 70 Breaker Lane Port Ludlow, Washington 98365

Subject: Olympic Water & Sewer, Inc. Water System, ID #68700, Jefferson County; New

Filtration and Chlorination Facilities, ODW Project #20-0205, APPROVAL

Dear Greg Rae:

This letter acknowledges receipt of the Construction Completion Report (CCR) for the installation of this project signed by your engineer, Pierre Kwan, on October 28, 2021. The CCR indicates this project has been completed according to plans and specifications approved by the Southwest Drinking Water Regional Operations on July 31, 2021.

The approved scope of work includes:

- Construction of a groundwater filtration plant using injection of sodium hypochlorite, ferric chloride, and potassium permanganate with pyrolusite filters for the purpose of iron, manganese, and arsenic removal. This treatment plant will have a capacity to treat 620 gpm and will treat water from wells 14 (S06, tag #AAB867) and 16 (S08, tag #ALN492) in Service Zone B. Finished water will maintain a free chlorine residual of at least 0.2 mg/L in distribution piping for the purpose of voluntary secondary disinfection.
- Installation of hypochlorination facilities for wells 2 (S01, tag #AAB865), 3 (S02, tag #AAB866), and 4N (S04, tag #AAB897) in Service Zone A. Finished water will maintain a free chlorine residual of at least 0.2 mg/L in distribution piping for the purpose of voluntary secondary disinfection.

APPROVED SYSTEM CAPACITY

The water system capacity was not evaluated as part of this project. The system remains approved to serve an unspecified number of connections. It is your responsibility to ensure that physical capacity and water rights are not exceeded.

CHLORINATION TREATMENT

Disinfection treatment is installed to provide a preventative measure to increase public health protection. Based on the information provided in this project report, the system will maintain a target chlorine residual of at least 0.2 mg/L in all parts of the distribution system. Please note, future changes in the rules may become more stringent or changes in the water system's source water quality may require modifications to the treatment facility.

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As long as disinfection treatment is provided, this system is required to:

- Maintain a detectable residual disinfectant concentration (0.2 mg/L) in all active parts of the distribution system.
- Measure and record on ODW forms (examples enclosed) residual levels daily at representative sites in the distribution system.

Submit the chlorination report forms to ODW on a monthly basis, by the 10th of each month. Your reports should be submitted by e-mail to sw.treatment.reports@doh.wa.gov.

TREATMENT PLANT RATING AND OPERATOR REQUIREMENTS

A treatment plant rating form has been completed to determine the level of certified operator required to operate your plant. The treatment rating score is 28 points, which categorizes the plant as a Class I treatment plant (see enclosed treatment rating form). To meet the treatment operations requirement, a WTPO 1 certified operator is needed for your system.

WATER QUALITY MONITORING REQUIREMENTS

The water quality monitoring requirements for operating and maintaining the treatment plant are summarized in the following table. The requirements include monitoring the treated (finished) water quality and disinfection byproduct monitoring.

MONITORING CATEGORY	MONITORING REQUIREMENT	LOCATION	FREQUENCY
Treated (finished) water	arsenic	After treatment	Monthly

FINISHED WATER QUALITY

In accordance with WAC 246-290-310, the system is required to **collect finished drinking water** samples, at a point directly downstream of the treatment plant, prior to the first consumer, on a monthly basis. Finished drinking water samples from treatment plants utilized for removal of contaminants with established secondary maximum contaminant levels (MCLs) shall be submitted to a certified laboratory for analysis or analyzed for the specific contaminant(s) of concern by the purveyor through department-approved on-site methods.

DISINFECTION BYPRODUCT MONITORING

Disinfection byproducts (DBP) monitoring is required when chlorination treatment is provided, as specified in the Stage 2 Disinfectants and Disinfection Byproducts (D/DBP) rule. This system is required to begin DBP monitoring after construction is complete and the disinfection treatment is operating. Please refer to your Water Quality Monitoring Schedule for the number and frequency of DBP monitoring.

To document the number of samples, the monitoring frequency, and the monitoring locations for your specific system, you need to complete a Stage 2 DBP monitoring plan that can be downloaded from our website under Forms. Please return your completed form to Regina Grimm by e-mail at regina.grimm@doh.wa.gov.

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LEAD AND COPPER MONITORING

The project report adequately addresses the impacts of the change on the corrosivity of the water. The proposed change in treatment is not reasonably expected to increase the corrosivity of the water. This project does not change the lead and copper tap sampling or water quality parameter monitoring frequency for this water system.

The department's final approval of this project does not confer or guarantee any right to a specific quantity of water. The approved number of service connections is based on your representation of available water quantity. If the Washington State Department of Ecology, a local planning agency, or other authority responsible for determining water rights and water system adequacy determines that you have use of less water than you represented, the number of approved connections may be reduced commensurate with the actual amount of water and your legal right to use it.

If you have any questions, please contact me at (360) 236-3018 or by e-mail at rscott.pollock@doh.wa.gov.

Sincerely,

R Scott Pollock, P.E.

Office of Drinking Water, Regional Engineer

cc: Pierre Kwan, HDR Engineering, Inc. Jefferson County Public Health