



Mt Greylock Regional School Drinking Water Information

How is your water treated?

Water Softener – Ion Exchange

- Treats hard water (calcium and magnesium).
- Removes radium, iron, barium, dissolved minerals.
- Removes bad odors, colors and taste.

Disinfection – Continuous Chlorination

- Disinfect and control microbial activity.
- Most commonly used chemical for water disinfection

NOTE: The school is equipped with Bottle Filling Stations

- Utilizes activated carbon filters.
- Reduces lead, sediment, and chlorine from water.
- Designed to improve taste, color and odor.

How often is your water quality checked?

Daily Monitoring and Testing:

- Trained staff personnel monitor water quality, noting any change in turbidity, color, taste, or odor.
- Trained staff personnel monitor water usage by reading meters for leaks that could cause cross contamination
- Trained staff personnel inspect water softener to ensure adequate supply of media/resin.
- Trained staff personnel conduct two separate residual chlorine levels in water, one from the water treatment room and the other in the cafeteria kitchen to ensure proper levels of disinfection.

Monthly Monitoring and Testing:

- Certified operator conducts an inspection of all above ground water system components, treatment system and also checks for that adequate levels of treatment solution, water usage, and any changes in water quality.
- Certified operator conducts field testing, consisting of chlorine residual levels throughout the school, measures the water temperature and pH from two locations; one prior to the treatment system, and one after the treatment system.
- Certified operator collects the following samples to be analyzed by a certified laboratory:
 - Four (4) bacteria samples – one (1) prior to the treatment system (raw water), and three (3) after the treatment system to ensure its effectiveness.
 - Two (2) alkalinity samples – one (1) prior to the treatment system (raw water), and one (1) after the treatment system to ensure its effectiveness.
 - Two (2) hardness samples – one (1) prior to the treatment system (raw water), and one (1) after the treatment system to ensure its effectiveness.
 - Two (2) total dissolved solids samples – one (1) prior to the treatment system (raw water), and one (1) after the treatment system to ensure its effectiveness.

Yearly Monitoring and Testing – Follows the MassDEP sampling schedule as seen here:

August 16, 2017

MADEP Drinking Water Program: Water Quality Sampling Schedule

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PWS ID: **1341010** PWS Name: **MT GREYLOCK REGIONAL SCHOOL**

City/Town: **WILLIAMSTOWN**

Schedule of Required Water Quality Sampling For the Years: **2017** To **2019**

Popl.: **930** Class: **NTNC**

BACTERIA SAMPLING

Season Start: **01/01** Season End: **12/31**

Refer to your Coliform Monitoring Plan for approved Coliform Sample locations.

Raw Water: Additional Bacteria Sampling is Required from Each Treated and/or Disinfected Source.

Location ID #	SAMPLE LOCATION	MULT/SIN	R/F	D/S	WAIVER Y / N	2017				2018				2019			
						QTR1	QTR2	QTR3	QTR4	QTR1	QTR2	QTR3	QTR4	QTR1	QTR2	QTR3	QTR4
ALKALINITY																	
10003	POINT OF ENTRY POST TREATMENT 1341010-03G WELL #3	S	F	S		M	M	M	M	M	M	M	M	M	M	M	
RW3	WELL #3 RAW WATER 1341010-03G WELL #3	S	R	S		M	M	M	M	M	M	M	M	M	M	M	
BACTERIOLOGICAL ANALYSIS																	
POE	POINT OF ENTRY BACTERIA TESTING	S	F	D		One or more distribution system coliform samples will be representative of the entry point of the distribution system.											
STOR	STORAGE FACILITY BACTERIA TESTING	S	F	D		One or more distribution system coliform samples will be representative of the storage facilities.											
BACTERIOLOGICAL ANALYSIS * Raw Water Bacteria Sample in addition to Distribution Samples																	
RW3	WELL #3 RAW WATER 1341010-03G WELL #3	S	R	S		M	M	M	M	M	M	M	M	M	M	M	
HALOACETIC ACIDS																	
001	KITCHEN TAP	S	F	D				AUG									
HARDNESS																	
10003	POINT OF ENTRY POST TREATMENT 1341010-03G WELL #3	S	F	S		M	M	M	M	M	M	M	M	M	M	M	
RW3	WELL #3 RAW WATER 1341010-03G WELL #3	S	R	S		M	M	M	M	M	M	M	M	M	M	M	
INORGANICS																	
10003	POINT OF ENTRY POST TREATMENT 1341010-03G WELL #3	S	F	S	Y	[Source Waiver Granted: refer to your waiver determination for details]											
IRON																	

R/F = RAW OR FINISHED WATER; D/S = DISTRIBUTION OR SOURCE SAMPLE Waiver: (A)pplied, (Y)es, or (N)o M = Monthly Testing Required
 **Three letter abbreviations indicate required sampling months.

PWS ID 1341010

PWS Name MT GREYLOCK REGIONAL SCHOOL

City/Town: WILLIAMSTOWN

Popl.: 930

Class: NTNC

Location ID #	SAMPLE LOCATION	MULT/SIN	R/F	D/S	WAIVER Y/N	2017				2018				2019			
						QTR1	QTR2	QTR3	QTR4	QTR1	QTR2	QTR3	QTR4	QTR1	QTR2	QTR3	QTR4
IRON																	
10003	POINT OF ENTRY POST TREATMENT 1341010-03G WELL #3	S	F	S		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RW3	WELL #3 RAW WATER 1341010-03G WELL #3	S	R	S		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
LEAD AND COPPER RULE																	
10002	10 APPROVED TAPS	S	F	D		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
MANGANESE																	
10003	POINT OF ENTRY POST TREATMENT 1341010-03G WELL #3	S	F	S		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RW3	WELL #3 RAW WATER 1341010-03G WELL #3	S	R	S		<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
NITRATE																	
10003	POINT OF ENTRY POST TREATMENT 1341010-03G WELL #3	S	F	S		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>
NITRITE																	
10003	POINT OF ENTRY POST TREATMENT 1341010-03G WELL #3	S	F	S		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
PERCHLORATE																	
10003	POINT OF ENTRY POST TREATMENT 1341010-03G WELL #3	S	F	S	N	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
RADIUM 226 & RADIUM 228																	
10003	POINT OF ENTRY POST TREATMENT 1341010-03G WELL #3	S	F	S		<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>	<input checked="" type="checkbox"/>
RW3	WELL #3 RAW WATER 1341010-03G WELL #3	S	R	S		<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
SECONDARY CONTAMINANTS																	

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PWS ID 1341010

PWS Name MT GREYLOCK REGIONAL SCHOOL

City/Town: WILLIAMSTOWN

Popl.: 930

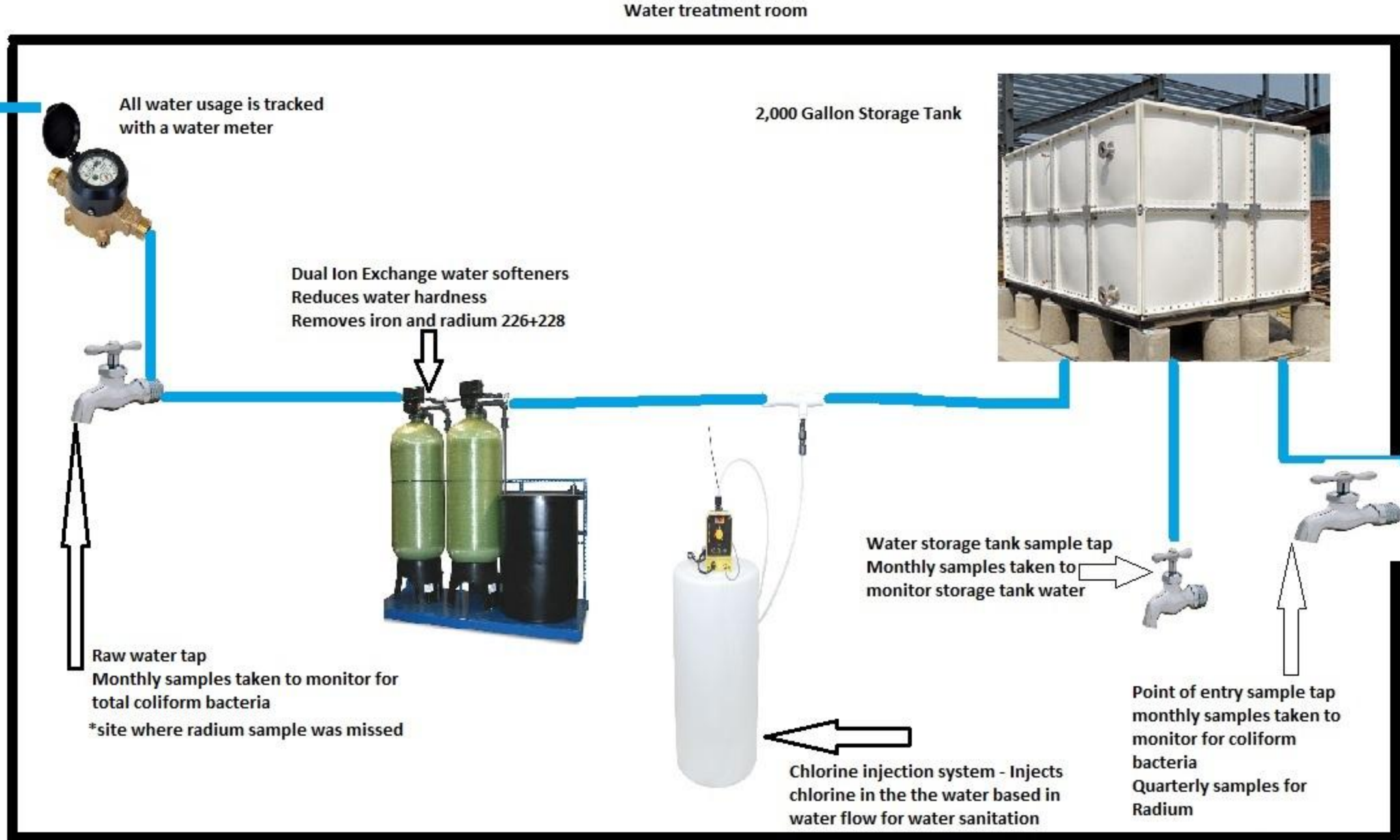
Class: NTNC

Location ID #	SAMPLE LOCATION	MULT/SIN	R/F	D/S	WAIVER Y / N	2017				2018				2019			
						QTR1	QTR2	QTR3	QTR4	QTR1	QTR2	QTR3	QTR4	QTR1	QTR2	QTR3	QTR4
SECONDARY CONTAMINANTS																	
10003	POINT OF ENTRY POST TREATMENT 1341010-03G WELL #3	S	F	S		[DEP recommends annual testing]											
SODIUM																	
10003	POINT OF ENTRY POST TREATMENT 1341010-03G WELL #3	S	F	S		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
SYNTHETIC ORGANIC COMPOUNDS																	
10003	POINT OF ENTRY POST TREATMENT 1341010-03G WELL #3	S	F	S	Y	[Source Waiver Granted: refer to your waiver determination for details]											
TOTAL DISSOLVED SOLIDS																	
10003	POINT OF ENTRY POST TREATMENT 1341010-03G WELL #3	S	F	S		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
RW3	WELL #3 RAW WATER 1341010-03G WELL #3	S	R	S		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
TRIHALOMETHANES																	
001	KITCHEN TAP	S	F	D		<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		
VOLATILE ORGANIC COMPOUNDS																	
10003	POINT OF ENTRY POST TREATMENT 1341010-03G WELL #3	S	F	S	Y	<input type="checkbox"/>	<input checked="" type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>		

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Water enters the building from the well



Water to School Distribution System

