

Appendix B

LCRMR Reporting Guidance

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Revised State Reporting Requirements for the Lead and Copper Rule

1.0 Introduction

1.1 What is the Purpose of this Guidance Document?

This document explains how your reporting requirements for the Lead and Copper Rule (LCR) have changed since we issued guidance in May 1992, entitled, *Lead and Copper Rule Definitions and Federal Reporting for Milestones, Violations, and SNCs*. The reason for this change is threefold. **First**, on January 12, 2000, we published minor revisions to the 1991 Rule [Federal Register - January 12, 2000 (Volume 65, Number 8)]. The Lead and Copper Rule Minor Revisions (LCRMR) modify some of your reporting requirements. The LCRMR also impact some of your compliance determinations due to changes in some requirements for water systems, and clarify that you should report this information to us in a format prescribed by the EPA Administrator. This guidance document specifies this format. The LCRMR do not change the action levels of 0.015 milligrams per liter (mg/L) for lead and 1.3 mg/L for copper, or the Rule's basic requirements to optimize corrosion control and, if appropriate, treat source water, deliver public education, and replace lead service lines.

Second, through the EPA Data Sharing Committee, we re-evaluated the number of LCR violations that you should report to us and have consolidated some of these violation types. We have also revised the compliance period end dates for some of the violation types to promote better tracking of these violations. **Third**, the Office of Enforcement and Compliance Assurance (OECA) and the Office of Ground Water and Drinking Water (OGWDW) have revised and clarified the SNC and "returned to compliance" criteria for Initial Tap Monitoring and Reporting violations. For your convenience and ease of use, this document discusses all of your reporting requirements, including those that remain unchanged.

1.2 How Is This Document Organized?

We have structured this document into the following major sections.

➤ What Special Terms Do I Need to Know To Understand This Guidance?

This section provides definitions and explains any acronyms or short-hand terms that we have used in this document.

➤➤ **How Have My Reporting Requirements Changed?**

This section provides a brief overview of how your reporting requirements pertaining to milestones, 90th percentile lead levels, and violations have changed.

➤➤ **When Am I Supposed to Report This New Information?**

This section discusses when you can begin reporting the new requirements under the LCRMR and consolidated violation types, and the deadline date by which you are required to report in accordance with the new requirements.

➤➤ **How Do I to Report This New Information?**

This section contains a detailed discussion of each reporting requirement, including those which we have not revised. To help illustrate the changes, we have included examples for each reporting requirement, including how to report this information in its data transfer format (DTF).

➤➤ **Public Notification Requirements.**

This section serves as a reminder that systems that incur any violations under the LCR, and its revisions, are required to meet the public notification requirements.

➤➤ **Consecutive Systems.**

We have retained the discussion from the 1992 LCR reporting guidance regarding responsibilities for implementing the LCR within a consecutive system.

➤➤ **Significant Non-compliers.**

This section discusses the types of significant non-compliers (SNCs) and illustrates through examples how a system can become an SNC. We have not added any new types of SNCs, but have provided clarification of existing definitions where needed including Initial Tap Monitoring and Reporting SNCs and “returned to compliance.”

2.0 What Special Terms Do I Need to Know to Understand this Guidance Document?

Term	Definition
1991 Rule	Maximum Contaminant Level Goals and National Primary Drinking Water Regulations for Lead and Copper, promulgated on June 7, 1991 (56 FR 26460). This rule was modified by technical amendments published on July 15, 1991 (56 FR 32113), June 29, 1992 (57 FR 28786) and June 30, 1994 (59 FR 33860).
90 th percentile value	The concentration of lead or copper in tap water exceeded by 10 percent of the sites sampled during a monitoring period.
Action level	The action level is the concentration of lead or copper in tap water which determines whether you may be required to install corrosion control treatment, monitor for water quality parameters, monitor source water for lead and copper, replace lead service lines, and/or deliver public education about lead. <i>The action level for lead is 0.015 mg/L. The action level for copper is 1.3 mg/L.</i>
(b)(1) system	A system that is deemed to have optimized corrosion control by meeting the criteria of §141.81(b)(1). This system must have 90 th percentile lead and copper levels at or below the action levels of 0.015 mg/l and 1.3 mg/L, respectively for two consecutive six-month monitoring periods.
(b)(2) system	A system that is deemed to have optimized corrosion control by meeting the criteria of §141.81(b)(2). More specifically, the system must have completed treatment steps equivalent to those described in the LCR by December 7, 1992.
(b)(3) system	A system that is deemed to have optimized corrosion control by meeting the criteria of §141.81(b)(3). This type of system has minimally corrosive water in its distribution system and must demonstrate that the difference between the 90 th percentile lead level at the tap and the highest concentration of lead in your source water is < 0.005 mg/L for two, consecutive 6-month periods. Under the LCRMR, you can also allow a system to be deemed as a (b)(3) system if its source water lead levels are below the Method Detection Limit and its 90 th percentile lead level is ≤ 0.005 mg/L. Note: After July 12, 2001, systems must not exceed the copper action level to meet the (b)(3) criteria.
Daily Value	"Daily values" are the sample results for each WQP and are calculated for each WQP at each sampling location. They are based on the sampling frequency for that WQP and sampling point.
DSC	An acronym for EPA's Data Sharing Committee.
DTF	An acronym used for the Data Transfer Format, which is the format used to report data to SDWIS/FED.

Term	Definition
Exceedance	Refers to those 90 th percentile lead levels which are greater than the lead action level of 0.015 mg/L and those 90 th percentile copper levels that are greater than the copper action level of 1.3 mg/L
Excursion	A "daily value" for a WQP at a sampling location that is below the minimum value or outside the range of values designated by the State.
Large system	One that serves more than 50,000 people.
LCRMR	An acronym for the Lead and Copper Rule Minor Revisions that were published on January 12, 2000 (FR VOL.65NO.8).
LSLs	An acronym for lead service lines.
LSLR	An acronym for lead service line replacement
Medium-size system	One that serves 3,301 to 50,000 people.
OCCT	An acronym for optimal corrosion control treatment.
OWQPs	An acronym for optimal water quality parameters.
Partial LSLR	This phrase refers to any lead service line replacement effort in which the system does not replace the entire length of a lead service line up to the building inlet. When this happens, system have certain requirements for monitoring and for notifying the people who drink their water.
RTC	An acronym for returned to compliance or compliance achieved.
SDWIS/FED	An acronym for EPA's Safe Drinking Water Information System, the national repository for drinking water information.
Small system	One that serves 25 to 3,300 people.
SNCs	An acronym for Significant Non-compliers; a designation by EPA for those systems that are considered to pose the most serious threats to public health.
SOWT	An acronym for source water treatment.
We	Refers to the U.S. Environmental Protection Agency (EPA).
WQPs	An acronym for water quality parameters.
You	Refers to you, the representative from the government agency that is responsible for reporting your State's drinking water information to SDWIS/FED.

3.0 How Have My Reporting Requirements Changed?

To oversee the implementation of the LCR, we originally established reporting requirements for 11 milestones and 15 violation types. The revisions to the LCR have impacted the number of milestones that you are required to report to us, and have changed some of the criteria for what constitutes a violation. We have not added any new violation types. Instead, we have consolidated some types of

violations and expanded the definitions of some violations. An overview of the changes to the milestone, sample, and violation reporting is provided below.

3.1 Changes to Milestone Reporting and 90th Percentile Values

The LCRMR eliminate the requirement that you report the completion of several of the interim milestones; however, they do not eliminate your corresponding record keeping requirements. They add two new milestones, and require you to report **all** 90th percentile lead levels for large and medium-size systems. The LCRMR also clarify rule language that you are required to report the first and last day of the compliance period for which the 90th percentile levels were calculated.

To further simplify your reporting requirements, **all exceedances (lead and copper)** are reported only **as sample records**, not as milestone records. (SDWIS/FED will no longer generate milestone records from 90th percentile sample records that are also exceedances.)

Table 1 below illustrates the difference in milestone and 90th percentile level reporting requirements between the 1991 Rule (LCR) and the minor revisions (LCRMR).

Table 1 Comparison of Required Reporting for Milestones and 90th Percentile Levels under the LCR and LCRMR			
Milestone Code	Description	Required to be reported under:	
		LCR?	LCRMR?
CU90	Copper action level exceedance	Yes	Yes, but to be reported as a sample record
PB90	Lead action level exceedance	Yes	
N/A	90 th percentile lead levels that are below the lead action level	No*	Required for large & medium systems
CCSR	System is required to conduct a corrosion control study	Yes	No
CCSC	System has completed a corrosion control study	Yes	No
OTDE	State has designated or approved optimal corrosion control treatment (OCCT)	Yes	No
STDE	State has designated or approved source water treatment (SOWT)	Yes	No
OTIN	Optimal Corrosion Control Treatment Installed	Yes	No
STIN	Source Water Treatment Installed	Yes	No

**Table 1
Comparison of Required Reporting for Milestones
and 90th Percentile Levels under the LCR and LCRM**

Milestone Code	Description	Required to be reported under:	
		LCR?	LCRMR?
WQPS	State has designated or approved ranges for water quality parameters (WQPs)	Yes	No
MPLS	Indicates a system for which the State has designated or approved maximum permissible levels (MPLs) for Lead and /or Copper in source water	Yes	No
LSLR	System is required to conduct Lead Service Line Replacement	Yes	Yes, but no longer required to report replacement rate
DEEM	State has DEEMED the PWS to be optimized under (1) §141.82(f) with the designation of optimal water quality parameters, or under (2) §141.81(b)(1), (b)(2), or (b)(3)	No	Yes
DONE	Completed all applicable corrosion control, source water treatment, and lead service line replacement requirements, or was deemed to be optimized under 141.82(f), 141.81(b)(1), (b)(2), or (b)(3).	No	Yes

* The LCR did not require you to report any 90th percentile levels at or below the action level (i.e., "non-exceedances). However, in our 1992 LCR reporting guidance, we requested that you report the 90th percentile lead non-exceedances for all large systems, and for medium and small systems once they exceeded the lead action level. Small system non-exceedance 90th percentile levels are no longer requested

A detailed description of the 90th percentile copper and lead levels is contained in Section 5.1, Sample Reporting: Lead and Copper 90th Percentile Levels. The LSLR milestone, and the new DONE and DEEM milestones are described in Section 5.2, Milestone Reporting. Those milestones that are no longer required to be reported under the LCRM are not discussed further in this document.

3.2 Changes to Violation Reporting

We established the EPA Data Sharing Committee (DSC) to compile our data needs, review current reporting requirements, and recommend changes to these requirements that would best meet our data

objectives. One of the DSC's goals was to reduce the complexity of the LCR reporting requirements. As part of its efforts, the DSC evaluated the number of violations required to be reported for the LCR. The result of these efforts was to consolidate some of the similar or like violation types under the same code; thereby reducing the number of violation types from 15 to 10.

In addition, we have changed the non-compliance portrayal for most violation types. The new method describes the period of time the system was in violation rather than describing the compliance period. The non-compliance period begins the day after the requirement due date and ends when the system has met the requirement and provides the required documentation to you. During the period of non-compliance, SDWIS/FED defaults an arbitrary end date to December 31, 2015 for some violations. SDWIS/FED software will not allow null values for required date fields; thus we default the end date which will automatically be replaced when you report the date that the system has “returned to compliance” for that violation. This change will more accurately portray the length of time a system is in violation. The change will also facilitate tracking of significant non-compliers (SNCs), because a system may be an SNC for longer than the 12-month period for which SNCs are determined.

Table 2 summarizes the consolidation of violation codes and identifies to which violations the defaulted end date of December 31, 2015 applies.

Table 2				
Consolidation of Violation Codes and Applicability of December 31, 2015 End Date				
Old Violation Type		Revised Violation Type		
Violation Type Code	Description	Violation Type Code	Description	Change in Reporting Requirement
51	Initial Lead and Copper Tap M/R	51*	Initial Lead and Copper Tap M/R	Violation end date is 12/31/2015
52	Follow-up or Routine Lead and Copper Tap M/R	52*	Follow-up or Routine Lead and Copper Tap M/R	Violation end date is 12/31/2015

**Table 2
Consolidation of Violation Codes and Applicability of December 31, 2015 End Date**

Old Violation Type		Revised Violation Type		
Violation Type Code	Description	Violation Type Code	Description	Change in Reporting Requirement
53	Initial Water Quality Parameter (WQP) M/R	53	WQP M/R	Combined violation types 53, 54, & 55 under code 53 LCR: Quarterly period for entry point, tap is the same as lead and copper tap period. LCRMR: Combined compliance for Entry Point and Tap is a 6 month period. End date may vary or State may designate a Jan.-June or July-Dec. period.
54	Follow-up or Routine Entry Point WQP M/R			
55	Follow-up or Routine Tap WQP M/R			
56	Initial, Follow-up, or Routine Source Water M/R	56*	Initial, Follow-up, or Routine Source Water M/R	Violation end date is 12/31/2015
57	Optimal Corrosion Control Treatment Study/ Recommendation	57*	Treatment Study/ Recommendation	Combined violation types 57 & 61 under code 57 End date is 12/31/2015
58	Optimal Corrosion Control Treatment Installation/Demonstration	58*	Treatment Installation / Demonstration	Combined violation types 58 & 62 under code 58 End date is 12/31/2015
59	WQP Entry Point Noncompliance	59	WQP Entry Point/Tap Treatment Technique Noncompliance	Combined violation types 59 & 60 under code 59 Alternative compliance determination method combines Entry Point and Tap in a 6 month period. End date may vary or State may designate a Jan.-June or July-Dec. period. **
60	WQP Tap Noncompliance			

**Table 2
Consolidation of Violation Codes and Applicability of December 31, 2015 End Date**

Old Violation Type		Revised Violation Type		
Violation Type Code	Description	Violation Type Code	Description	Change in Reporting Requirement
61	Source Water Treatment Recommendation	57*	Treatment Recommendation	Combined violation types 57 & 61 under code 57 End date is 12/31/2015
62	Source Water Treatment Installation	58*	Treatment Installation/ Demonstration	Combined violation types 58 & 62 under code 62 End date is 12/31/2015
63	Maximum Permissible Level Noncompliance	63*	Maximum Permissible Level Noncompliance	End date is 12/31/2015
64	Lead Service Line Replacement	64*	Lead Service Line Replacement	End date is 12/31/2015 <i>No longer report rate of replacement</i>
65	Public Education	65*	Public Education	End date is 12/31/2015

* The begin date for these violations is defined as the first day after the designated monitoring period or requirement deadline. See the reporting section for each violation type for the specific definition.

** You may continue determining compliance under the current LCR method of separate compliance periods for entry point and tap (quarterly for entry point, and 6, 12, 36, or 108 month for tap).

Each of the violation types are discussed in detail in Section 5.3, Violations. Comprehensive discussions of relevant reporting requirements are provided for all violations.

Once a system has subsequently met the requirements which caused it to be in violation, a follow-up/enforcement action is to be reported which indicates it has achieved compliance which is commonly referred to as “returned to compliance,” or “RTC.” This action is reported as an SOX or EOX action type. Medium and small systems are no longer subject to corrosion control steps once they have completed 2 consecutive 6-month monitoring periods of lead and copper tap monitoring with both sets of 90th percentile results at or below the action levels. This means that a medium or small system could be in violation for failing to meet any number of its requirements (e.g., failing to produce its corrosion control treatment recommendation, or conduct WQP monitoring, or complete the replacement of at least 7% of its lead service lines) without having to achieve compliance with the requirement. In these types of situations, reporting the SOX/EOX action code may not always be appropriate. For this reason, we have identified the SO6/EO6 - Intentional No Action as a more appropriate enforcement/follow-up action. SDWIS/FED has been modified to accept the SO6/EO6 action for these types of violations and to treat them as equivalent to the SOX/EOX action for SDWIS/FED’s Significant Noncompliance and Exceptions Tracking System (SETS) and for standard reports.

The period of violation would be ended when either the SOX/EOX or SO6/EO6 actions are reported and linked to the violation(s). The following table presents violation situations where using the Intentional No Action would be more appropriate than the Compliance Achieved Action.

**Table 3
When Intentional No Action Applies**

Report Intentional No Action											
For:	When the system is in violation with its:	And It Is:									
Systems serving $\leq 50,000$ ¹	<ul style="list-style-type: none"> • CCT recommendation (57 violation type), • CCT study (57 violation type), • OCCT installation/demonstration requirements (58 violation type), <i>or</i> • OWQPs (59 violation type) 	below both action levels during 2 consecutive monitoring periods after incurring this violation ²									
Any size system for which the State has set MPLs <i>or</i> determined that no SOWT is needed	<ul style="list-style-type: none"> • Source water M/R requirements (56 violation type) • Source water MPL requirements (63 violation type) 	below both action levels during 2 consecutive monitoring periods after incurring this violation									
Any Size System	LSLR requirements (64 violation type)	below the lead action level during 2 consecutive monitoring periods after incurring this violation									
<p>Notes</p> <p>¹ The reporting of an intentional no action would also apply to systems that were deemed to meet the criteria of §141.81(b)(3) after the date by which they required to begin corrosion control treatment steps.</p> <p>² An intentional no action would not be reported in those instances where the system incurs a 59 violation and the State requires system to collect water quality parameters WQPs regardless of its 90th percentile level.</p>											
<p>List of Acronyms</p> <table style="width: 100%; border: none;"> <tr> <td style="width: 33%;">CCT = corrosion control treatment</td> <td style="width: 33%;">MPL = maximum permissible levels</td> <td style="width: 33%;">OCCT = optimal corrosion control treatment</td> </tr> <tr> <td>LSLR = lead service line replacement</td> <td>M/R = monitoring and reporting</td> <td>OWQPs = optimal water quality parameters</td> </tr> <tr> <td></td> <td></td> <td>SOWT = source water treatment</td> </tr> </table>			CCT = corrosion control treatment	MPL = maximum permissible levels	OCCT = optimal corrosion control treatment	LSLR = lead service line replacement	M/R = monitoring and reporting	OWQPs = optimal water quality parameters			SOWT = source water treatment
CCT = corrosion control treatment	MPL = maximum permissible levels	OCCT = optimal corrosion control treatment									
LSLR = lead service line replacement	M/R = monitoring and reporting	OWQPs = optimal water quality parameters									
		SOWT = source water treatment									

4.0 When Should I Begin Reporting These New Requirements?

The LCRMR was published in the January 12, 2000 Federal Register. Section 142.15 states that “Beginning May 15, 2000, States may report in accordance with the new requirements; however, States have until January 14, 2002 to complete the transition to the new reporting requirements. States will not be **required** to report in accordance with the revised requirements until January 14, 2002. Between May 15, 2000, and January 13, 2002, States have the option to report compliance with either the 1991 reporting requirements or the revised requirements in today's action. Because of this compliance schedule, EPA has separately codified the new requirements at §142.15(c)(4)(iii). The requirements, codified in the 1991 Rule at §142.15(c)(4)(i) through (vii), have been redesignated as §142.15(c)(4)(i)(A) through (G), respectively, and introductory text added at §142.15(c)(4)(i) to identify the period during which they are to be reported.” For all reports submitted on or after January 14, 2002, States shall report the PWS identification number of each public water system identified in paragraphs (c)(4)(iii)(A) through (F) of section 142.15.

SDWIS/FED was modified to accept the new reporting requirements prior to May 15, 2000. **In order to simplify reference to the early reporting “begin date” and the effective date of the rule, this guidance will refer to January 14, 2000 as the effective date of the rule, May 15, 2002 as the early reporting to EPA begin date, and January 14, 2002 as the mandatory reporting to EPA date.** For those states being granted an extension for adoption of the LCRMR, your reporting deadline is the third quarterly reporting period after the date you adopt the rule. This means you have 6 months to complete any modifications to your system and begin reporting per the new requirements for the data which is due to EPA in the 3rd reporting period after your adoption.

SDWIS/FED can now accept the revised milestone and sample information required under the LCRMR, as well as the consolidated violation codes. Until January 13, 2002, you have the option to continue to follow the reporting requirements under the LCR or as revised by the LCRMR. On January 14, 2002 and thereafter, you are to report the revised milestone, sample, and violation information in accordance with the LCRMR. We are requesting that milestone reporting for all systems which were deemed to be optimized under Section 141.81(b)(1 - 3), be submitted to SDWIS/FED by February 15, 2001. This information will provide a pre LCRMR implementation status report on the LCR. A summary of this schedule is provided in Table 3.

Table 3
**Schedule for Reporting Revised Milestones, Lead 90th Percentile Data,
and Consolidated Violations**

<p>May 15, 2000 to January 13, 2002</p>	<p>You have the option to:</p> <ul style="list-style-type: none"> • continue to report the requirements described in the 1992 reporting guidance <p style="text-align: center;"><i>or</i></p> <ul style="list-style-type: none"> • report in accordance with the new requirements under the LCRMR: <ul style="list-style-type: none"> – all lead 90th percentile levels for large and medium systems – lead 90th percentile exceedance for small systems – copper 90th percentile exceedances for all systems – streamlined LSLR milestone – Done and Deemed milestones (Initial - deemed and done requested by February 15, 2001) <p>Note: The original requirement to report systems in violation did not change as a result of the LCRMR. However, specific attributes used to characterize the violations were changed based on recommendations from the Data Sharing Committee, the alternative WQP compliance determination method, and SDWIS/FED system modifications. Those modifications are listed below:</p> <ul style="list-style-type: none"> – the 10 consolidated violation codes (i.e., DO NOT USE codes 54, 55, 60, 61, & 62) – the end date of 12/31/2015 for all violations except WQP TT non-compliance (59) and WQP M/R (53) violations – 6 month WQP non-compliance periods for 59 violations
<p>January 14, 2002 and thereafter</p>	<p>You should report in accordance with all new LCRMR requirements</p>
<p>States granted an extension for adoption of the LCRMR</p>	<p>You should report in accordance with all new LCRMR requirements by the 3rd quarterly reporting period after the date of your adoption of the LCRMR.</p>
<p><i>Note: The LCRMR do not change the frequency of reporting. You are still required to report 90th percentile levels, milestones, and violations quarterly.</i></p>	

Because the mandatory reporting date cited in the regulation (January 14, 2002) falls in the middle of a compliance period (Jan - Mar), compliance determinations made for the January through March 2002 should be made based on the LCRMR requirements and reported to SDWIS/FED in the May 15, 2002 quarterly submissions.

During January 2000, the existing violation data in SDWIS/FED was converted, as appropriate, to the consolidated violation type codes and compliance periods. The WQP monitoring and reporting violations (type 53, 54, and 55) were converted to the consolidated violation type 53. Because monitoring periods differ between entry point and tap monitoring requirements, it may be possible for a water system to have multiple 53 violations with different begin dates where portions of the compliance period overlaps (e.g., a 6

month Jan-June and a 3 month Jan-March). SDWIS/FED also converted both lead and copper 90th percentile milestone records to sample records in cases where the corresponding sample records did not already exist. Prior to the conversion process, the data base was frozen, so that during the conversion process the converted or obsolete milestone and violation data could be archived for future reference and data validation if necessary. This data is available upon request, on CD-ROM or by accessing the various frozen databases prior to the conversion.

From the January 2000 SDWIS/FED implementation date to the January 13, 2002 (the last day for reporting under the LCR rule), for new data submissions, SDWIS/FED will convert the violation codes of 54, 55, 60, 61, and 62 into the appropriate consolidated violation type codes. During this time period 90th percentile exceedances, which are reported using the C800 milestone record (includes copper), instead of the C2100 sample record, will be converted to sample records. Milestone data for the other eliminated milestones, and lead service line replacement rates, will not be posted to SDWIS/FED. They will be rejected and displayed in the SDWIS/FED error reports as are other data submitted for processing which is not accepted by SDWIS/FED. In October 2001, we will include a warning message in your error reports which informs you that after January 14, 2002 violations with obsolete violation type codes, obsolete milestones, and 90th percentile lead and copper milestone exceedances will no longer be converted by SDWIS/FED and will simply be rejected as invalid.

5.0 How Do I Report This Information?

We have divided the discussion in this section according to the three categories of information that you are required to report:

- Sample Reporting: Lead and Copper 90th Percentile Values - explains how to report lead and copper 90th percentile values and exceedance levels;
- Milestones - discusses how to report the revised LSLR milestone, and the new DONE, and DEEM milestones; and
- Violations - explains how to report the 10 violation types.

For each of these three subsections we describe the reporting requirements, and provide examples to help illustrate under what circumstances you should report these data. Examples of appropriate DTF transactions are also provided for some of the examples. In addition, the violation section provides definitions of return to compliance for each violation type.

5.1 Sample Reporting: Lead and Copper 90th Percentile Values

Under the LCRMR, you are required to report all 90th percentile lead levels for all large and medium water systems (i.e., levels above the action level of 0.015 mg/L, and those at or below this level). We have not revised the requirements for small systems, but have retained the original requirement that only those lead levels in excess of the action level are required to be reported. Reporting of non-exceedances is acceptable and encouraged. In addition, we have retained the requirement to only report the 90th percentile copper levels that exceed the action level of 1.3 mg/L for all system sizes.

In addition, the LCRMR provide two clarifications to the reporting requirements. First, we have clarified that you are to report all systems that exceed the copper action level, along with the first and last day of the monitoring period in which the exceedance occurred. Second, we believe that the phrase “date upon which the exceedance occurred” is confusing and have changed this phrase to “first and last day of the compliance period for which the 90th percentile lead level was calculated” for large and medium systems, and “first and last day of the compliance period in which the exceedance occurred” for small systems.

Further, we made a slight change to the procedure for reporting copper 90th percentile exceedances to make it consistent with the procedure for reporting lead 90th percentile values. The 1992 LCR reporting guidance specified that copper exceedances should be reported as C800 milestone records. To simplify reporting, we are now requiring that these be reported as C2100 sample records as are lead 90th percentile values.

The 1992 LCR reporting guidance specified that lead 90th percentile values should be reported as sample

records to the C2100 database record. For any lead 90th percentile levels above the action level of 0.015 mg/L, State reporting of a milestone record in addition to a sample record was optional as our database would create and post to the database a C800 milestone record. It was our intent that this procedure would provide some relief to your reporting burden because you would not be required to report an exceedance using both the C800 and C2100 records. Instead, it has caused confusion and made reporting of these data onerous and more complicated than it needed to be.

Now, we are requiring that you report both lead 90th percentile values (exceedances and non-exceedances) and copper 90th percentile exceedance values as C2100 sample records only. This makes the procedure consistent for both lead and copper and should help to minimize confusion. The format for the C2100 Sample Record for lead and copper 90th percentile values is shown in Table 4a below:

Table 4a Data Transfer Form H-1 SDWIS/FED DTF C2100 SAMPLE-DATA Database Record Description		
DTF Data Element No.	Data Element Format	Data Element Description
C2101	Char. 10	Sample-ID
C2103	Date	Compliance-Period-Begin-Date
C2105	yyyy/mm/dd	Compliance-Period-End-Date
C2107	Date	Sample-Contaminant/Rule-Code (PB90 or CU90)
C2111	yyyy/mm/dd Char. 4 Decimal 15,9	Sample-Analysis-Result (in mg/l)
Notes: 1. C2111 can accommodate a maximum of 15 digits before the decimal point and a maximum of 9 digits after the decimal point. However, you need only enter 3 significant figures for lead (e.g., 0.016). The editing of this data element value is identical to C1123 - VIOLATION-ANALYSIS-RESULT. 2. Sample ID was expanded to 10 characters in 2000. SDWIS/FED will accept 1 to 10 character IDs. The following examples display 5 character IDs.		

The DTF format is an 80 character record for each attribute being reported. The following example of a DTF transaction for a lead 90th percentile value of 0.014 mg/L is displayed below in Table 4b. All types of data are reported using this same DTF format.

Table 4b SDWIS/FED Example DTF Transactions for Sample Data								
1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
H1	ZT0000001	00001		I	C2103	19920101		
H1	ZT0000001	00001		I	C2105	19920630		
H1	ZT0000001	00001		I	C2107	PB90		
H1	ZT0000001	00001		I	C2111	0.014		

(DIM Action Code Values are I=Insert, M=Modify, D=Delete). These are instructions to the edit/update software for processing the data for the following DTF Data Element Number.

Remember

- ☞ Report all 90th percentile lead levels for large and medium systems.
- ☞ Report only 90th percentile lead levels that exceed 0.015 mg/L for small systems. (All 90th percentile lead levels are accepted.)
- ☞ Report only 90th percentile copper levels that exceed 1.3 mg/L for all system sizes.
- ☞ Report all 90th percentile lead and copper levels as C2100 sample records only.

We have provided several examples below to clearly illustrate how to report 90th percentile lead levels and copper exceedances.

EXAMPLES FOR REPORTING 90TH PERCENTILE LEVELS

EXAMPLE 1

A large system (ZT1234567) conducts lead and copper tap monitoring during the compliance period of January to June 2000. You review the data and determine that the system has collected the proper number of

samples and followed appropriate sampling and analytical procedures. The system reports 90th percentile values of 0.0143 mg/l for lead and 1.07 mg/l for copper.

You are to report the lead 90th percentile level to SDWIS/FED because the LCRMR require the reporting of **ALL** lead 90th percentile levels for all large systems. The copper 90th percentile level did not exceed the action level and therefore, would not be reported.

By August 15, 2000, 45 days after the end of the compliance period, you would report the lead 90th percentile value using the C2100 Sample database record as follows:

DTF Data Element No.	Data Value	Description
C101	ZT123456	PWS-ID
C2101	7	Sample-ID
C2103	00001	Compliance-Period-Begin-Date (First day of the monitoring period)
C2105	2000/01/01	
C2107	2000/06/30	Compliance-Period-End-Date (Last day of the monitoring period)
C2111	PB90	Sample-Contaminant-Code (PB90=lead 90 th percentile value)
	0.014	Sample-Analysis-Result (90 th percentile lead level)

The DTF transactions of this record are:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
H1	ZT1234567	00001		I	C2103	20000101		
H1	ZT1234567	00001		I	C2105	20000630		
H1	ZT1234567	00001		I	C2107	PB90		
H1	ZT1234567	00001		I	C2111	0.014		

EXAMPLE 2

A small system (ZT1543210) conducts lead and copper tap monitoring during January through December 2000. The 90th percentile level for lead is 0.014 mg/l and 1.0 mg/l for copper.

You are not required to report either value because lead and/or copper 90th percentile values are only required to be reported when a small system exceeds the action level. However, the 90th percentile lead level may be reported if desired. The copper level should not be reported.

EXAMPLE 3

A medium water system is required to conduct routine lead and copper monitoring during January 1, 2001 to December 31, 2001. It collects some but not all of the required samples by December 31, 2001. The system reports its 90th percentile values for lead and copper.

You should not report a 90th percentile value to SDWIS/FED because it does not represent a valid 90th percentile value. Instead, you would submit a 90th percentile value for this system **only after** the required number of samples have been collected and analyzed in accordance with §§141.86 and 141.89. In addition, you would report a Routine Lead and Copper Tap M/R violation for this system to SDWIS/FED by February 15, 2002. (*Refer to Examples for Routine Lead and Copper Tap M/R violations in Section 5.4.2 to determine how to report this violation.*)

5.2 Milestone Reporting

Under the LCRMR, you are required to report the following milestones:

- **LSLR milestone**
This streamlined milestone identifies which systems are to begin replacing lead service lines and the date replacement is to begin. You are no longer required to report the replacement rate.
- **"DEEM" milestone**
This *new* milestone is to be reported for all system sizes. You are to indicate under what criteria you have deemed a system to be optimized and the date the system met that criteria. If the system was deemed before the LCRMR became effective, you have the option to use either the actual date the system was optimized or the effective date of the LCRMR (April 11, 2000). EPA would prefer to have the actual date the system was deemed optimized.
- **"DONE" milestone**
This *new* milestone is to be reported for all system sizes. You are to indicate which systems have completed all applicable requirements for corrosion control treatment, source water treatment, and lead service line replacement. You are to indicate the date of the latest event that the system was required to complete. If the system was done before the LCRMR became effective, you have the option to use either the actual date the system completed all treatment technique requirements or the effective date of the LCRMR (April 11, 2000). EPA would prefer to have the actual date the system was considered done.

These three LCRMR milestones are to be reported using the SDWIS/FED DTF C800-PWS-MILESTONE-EVENTS Form C4. For each of the three milestones, we have provided a detailed discussion

and examples to clearly illustrate how to report them. The general format for the C800 Milestone Record is shown in Table 5a below:

Table 5a Data Transfer Form C-4 SDWIS/FED DTF C800 PWS-MILESTONE-EVENTS Database Record Description		
DTF Data Element Number	Data Element Format	Data Element Description
C801	C,4	Milestone-ID
C803	yyyy/mm/dd	Milestone-Begin-Date
C804	yyyy/mm/dd	Milestone-End-Date (Valid ONLY for DONE)
C805	C,4	Milestone-Type-Code (DEEM, DONE, LSLR)
C813	C,40	Milestone-Comment (Optional)
C815	D, 9(7) 9(8)	Milestone-Value (Obsolete under LSLR)
C817	C,4	Milestone-Reason (B1, B3, & WQP)*
Notes: C = character data C804 milestone end date only applies to DONE milestones C817 reason codes may also apply to the DONE milestone. Decision is pending. * Applies to the DEEM Milestone Only		

An example DTF transaction for this record is shown in Table 5b below using the DEEM milestone.

Table 5b SDWIS/FED Example DTF Transactions for Milestone Data								
1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
C4	ZT0000001	0001		I	C803	20050701		
C4	ZT0000001	0001		I	C805	DEEM		
C4	ZT0000001	0001		I	C817	B1		

For each of the three milestones, we have provided the following detailed discussions and examples to illustrate how to report them.

5.2.1 Lead Service Line Replacement (LSLR)

Each quarter, you are to report those systems which were required to begin lead service line replacement (LSLs) and the date the system was required to begin the replacement. Section 141.84(b) states “The first

year of lead service line replacement shall begin on the date the action level was exceeded in tap sampling referenced in paragraph (a) [follow-up tap sampling after OCCT or SOWT installed] of this section.” This date would equate to the date of the last sample taken during the monitoring period. The begin date could be “rounded” to the first day of the next month for simplification. Under the LCRM, you are no longer required to report those systems on an accelerated replacement schedule, the annual replacement rate, or to submit a separate report for those systems which are in compliance with their replacement schedule. Replacement rates for LSLs which have already been reported to SDWIS/FED prior to the January 2000 implementation date were archived, and are no longer available in SDWIS/FED except in databases which were frozen prior to January 2000. However, you are still required to report a violation for systems which do not meet their replacement schedules.

EXAMPLE FOR REPORTING THE LSLR MILESTONE

EXAMPLE 1

A system (BN0204500) installs OCCT and collects follow-up tap samples during the January 1, 2001 - June 30, 2001 time frame. The 90th percentile lead level still exceeds the lead action level. The system is now triggered into LSLR. The first year of LSLR begins on the date the system exceeded the lead action level in samples collected after the installation of OCCT or SOWT. The system determined it exceeded the action level on April 15, 2001 (the date of the last tap sample taken). The first day of the first year of LSLR replacement would be April 15, 2001.

By August 15, 2001, you would report the following milestone:

LSLR Milestone: Required Reporting		
DTF Data Element Number	Data Value	Data Element Description
C101	BN0204500	PWS-ID
C801	0035	Milestone-ID
C803	2001/04/15	Milestone-Begin Date (Date when system was required to start LSLR)
C805	LSLR	Milestone-Type-Code for LSLR

The accompanying DTF transaction for this milestone is shown below.

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
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Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
C4	BN0204500	0035		I	C803	20010415		
C4	BN0204500	0035		I	C805	LSLR		

Example 2

Another system was found to have lead in its source water and was required to install source water treatment under Section 141.83 by December 2003. The system failed to meet its installation deadline. On August 12, 2004, you decide that the system will be required to begin LSLR. Had the system installed the SOWT by December 2003, it would have been required to conduct its follow-up tap sampling in the January through June 2004 compliance period. Section 141.84(a) states "...State may require the system to commence lead service line replacement under this section after the date by which the system was required to conduct monitoring under Section 141.86(d)(2) has passed". The begin date for this LSLR milestone could be any day after the last day of the follow-up monitoring period (i.e., any date after June 2004) and up through the decision date of August 12, 2004. Within 45 days after the end of the quarter in which the LSLR replacement is to begin, you would report a LSLR milestone in the same format as example 1 above.

Remember:

☛ For any LSLR milestones which you reported before the January 2000 implementation date, we archived the replacement rate data and remove it from the SDWIS/FED production database. For LSLR milestones reported after January 2000 implementation date, the replacement rate will be rejected.

5.2.2 DEEM Milestone

Under §§142.15(c)(4)(ii)(D) you must report the systems which you have "deemed" to be optimized in accordance with §§141.81 (b)(1), (b)(2), or (b)(3), and those systems for which you have established OWQPs. You must also report the date of your determination and the paragraph under which you made your determination. The paragraph under which you made your determination and/or for those systems which you have established OWQPs will be referred to as the reason code. We have combined (b)(2) and OWQPs into one reason code of "WQP" as described in Table 6a below.

To facilitate reporting because the DEEM and/or DONE determination dates may not be specifically documented in your records, you may report the effective date of the rule or another state designated date for any system that has met the DONE and/or DEEM criteria on or before this date. However, EPA prefers that

you report the actual date that the system met the criteria and/or the date you made the determination. Also, because a system may qualify for one or more reason codes, we have established the following reason code hierarchy: If the system met the (b)(1) criteria after installing CCT and the State set OWQPs, report the reason code WQP instead of (b)(1). If the system met the (b)(3) criteria after installing CCT and the State set OWQPs, report the reason code WQP instead of (b)(3).

Please note, many of your systems have already met the DEEM milestone criteria. This milestone data is required for all systems including those you have determined met one of these criteria prior to December 31, 2001 and is due to SDWIS/FED in your February 15th 2002 data submission. However, early reporting is being requested for all systems as soon as you are able. For those systems which you determine meet the DEEM milestone criteria after January 1, 2002, you are to report the milestone within 45 days following the quarter in which the system meets one of the DEEM milestone criteria.

Tables 6a and 6b describes the milestone data which is to be reported to SDWIS/FED for the DEEM milestone.

Table 6a DEEM Milestone: Required Reporting	
DTF Data Element Number	Data Element Description
C101	PWS-ID
C801	Milestone-ID
C803	Milestone-Date (Date the State determined the system met the DEEM criteria)
C805	Milestone-Type-Code (Code value DEEM to identify a system that has been deemed to have optimized corrosion control treatment)
C817	Milestone-Reason (Code value for basis of determination (B1 B3, WQP))

Note: C804 Milestone-End Date is not allowed for a DEEM milestone.

Table 6b Basis for Determining that a System is "Deemed" to have Optimized Corrosion Control Treatment		
C817 Code Value	Description	Date Reported to SDWIS/FED
B1	Deemed according to criteria in §141.81(b)(1). Applies to a system serving 50,000 or fewer people that has met the lead and copper action levels during each of two consecutive 6-month monitoring periods.	Day after the two consecutive compliance periods in which the system meets the (b)(1) criteria

**Table 6b
Basis for Determining that a
System is “Deemed” to have Optimized Corrosion Control Treatment**

C817 Code Value	Description	Date Reported to SDWIS/FED
WQP	<p>Systems for which the State has set optimal water quality parameters.</p> <p>Applies to any water system:</p> <ol style="list-style-type: none"> 1. any water system which the State has determined (DEEMED) has optimized corrosion control treatment (<i>before December 7, 1992</i>), based on review of water quality parameters, a report on the evaluation and selection of OCCT, a report on OCCT installation and maintenance, and two consecutive rounds of tap sample results, <i>or</i> 2. any water system for which the State has set optimal water quality parameters. 	Date State designates OWQPs
B3	<p>Deemed according to criteria in §141.81(b)(3). Applies to a system, with minimally corrosive water in its distribution system, which demonstrates for two consecutive 6-month periods that the difference between the 90th percentile tap water lead level and the highest source water lead concentration is less than 0.005 mg/L. Also, the LCRM expands the definition to include systems whose source water lead levels are below the Method Detection Limit and whose 90th percentile lead level is ≤0.005 mg/L. After July 12, 2001 system may not exceed copper action level.</p>	Day after the two consecutive compliance periods in which the system meets the (b)(3) criteria
<p>Note: If a system meets the DEEM milestone criteria, it may be deemed to have optimized corrosion control treatment, without actually being required to physically install corrosion control treatment (as may be the case with a (b)(1) or (b)(3) system.)</p>		

Remember

- ☞ Report the DEEM milestone, even if the system met the "deemed" criteria prior to May 15, 2000.
- ☞ Report only one reason code for the DEEM milestone. If the system met both the (b)(2) and WQP conditions, report the WQP reason code.
- ☞ Likewise, if the system initially met the (b)(1) or (b)(3) criteria and subsequently you designate OWQPs, report the WQP reason code.
- ☞ Report the date that you determine the criteria was met.

EXAMPLES FOR REPORTING THE DEEM MILESTONE

EXAMPLE 1

A small system (ZT7654321) monitors during two consecutive 6-month periods, July 1 - December 31, 1993, and January 1 - June 30, 1994. The 90th percentile values for each monitoring period are at or below the action levels for lead and copper. You determine that this system meets the (b)(1) criteria and is not required to install corrosion control treatment. On April 30, 2000, you review your records to find you had determined that this system met the (b)(1) criteria for being considered "deemed to be optimized" on July 1, 1994. As soon as possible, but at the latest by the SDWIS/FED due date of February 15, 2001, you would report:

DEEM Milestone: Required Reporting		
DTF Data Element Number	Data Value	Data Element Description
C101	ZT7654321	PWS-ID
C801	0005	Milestone-ID
C803	1994/07/01	Milestone-Date (Date State determined the system met the DEEM criteria)
C805	DEEM	Milestone-Type-Code (Code value DEEM to identify a system that has been deemed to have optimized corrosion control treatment)
C817	B1	Milestone-Reason (Code value for basis of determination (B1, B3, WQP))

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
C4	ZT7654321	0005		I	C803	19940701		
C4	ZT7654321	0005		I	C805	DEEM		
C4	ZT7654321	0005		I	C817	B1		

EXAMPLE 2

A large system (ZT0123456), with minimally corrosive water in its distribution system, monitors for two consecutive six-month periods from January 1 to June 30, 1992 and July 1 to December 31, 1992. For both periods, the difference between the 90th percentile tap water lead level and the highest source water lead concentration is less than 0.005 mg/L. Your records reveal that you had determined that this system was deemed to have optimized treatment under the (b)(3) criteria as of January 10, 1993. This system would also report a done milestone since it has completed all treatment technique requirements. As soon as possible, but at the latest by the SDWIS/FED due date of February 15, 2002, you would report:

DEEM Milestone: Required Reporting		
DTF Data Element Number	Data Value	Data Element Description
C101 C801 C803 C805 C817	ZT0123456 0005 1993/01/10 DEEM B3	PWS-ID Milestone-ID Milestone-Date (Date that the State determined the system met the DEEM criteria) Milestone-Type-Code (Code value DEEM to identify a system that has been deemed to have optimized corrosion control treatment) Milestone-Reason (Code value for basis of determination (B1, B3, WQP))

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
C4	ZT0123456	0005		I	C803	19930110		
C4	ZT0123456	0005		I	C805	DEEM		

C4	ZT0123456	0005		I	C817	B3		
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EXAMPLE 3

Assume a second large system installs corrosion control treatment and meets the (b)(3) criteria in follow-up monitoring conducted during January 1, 1997 - June 30, 1997 and July 1, 1997 - December 31, 1997. You designate optimal WQPs on March 17, 1998. Because the WQP criteria overrides the (b)(3) designation, you would report the WQP reason code with a corresponding date of 3/17/1998. Because you have designated the OWQPs this system has completed all required corrosion control treatments you should also report a DONE milestone with the corresponding date of March 17, 1998. Both the DEEM and DONE milestones are to be reported even though the milestone dates are the same. They are both reported in the same format as examples 1 and 2 above.

EXAMPLE 4

A system has corrosion control treatment in place, but the State requires them to adjust it. On May 5, 1997, the State receives a letter that the system completed this adjustment. The State set OWQPs on November 21, 1997. In this example, the reason code of WQP with a corresponding date of 11/21/1997 would be reported.

EXAMPLE 5

A medium system (ZT0001234) exceeds the lead action level during the compliance period of July 1 to December 31, 1992. It did not have existing treatment in place at that time, and completed installing corrosion control in December 1996. The system completed the 2 consecutive 6-month follow-up tap sampling by December 1997; both rounds were at or below the action levels. The State designated WQPs for this system on May 15, 1998. The reason code of WQP would be reported with a corresponding date of 5/15/1998. Also, the State would assign a “done” milestone to this system, since it has completed all the treatment technique requirements.

5.2.3 DONE Milestone

We have created a new milestone to indicate when a system has completed all applicable requirements for corrosion control, source water treatment, and lead service line replacement. In addition, you are to report the “DONE” milestone for all water systems which were deemed to be optimized under Section 141.81(b)(1 - 3) criteria, and those systems for which you designated OWQPs. For this milestone, you are to report the *latest event* from among the following events:

- The date you designate OWQPs, or deem the system to have optimized corrosion control according

to §141.81(b)(1) or (b)(3);

- For systems triggered into source water treatment, the date you designate maximum permissible source water levels or determine that source water treatment is not required;

or

- For systems triggered into lead service line replacement, the date the system completes lead service line replacement or becomes eligible to cease lead service line replacement because the system is below the lead action level for two consecutive monitoring periods.

The DONE milestone replaces the requirement to report separate milestones for each system that is required to: install source water treatment, that has installed the State-designated source water treatment; required to install corrosion control treatment; that has installed State-designated corrosion control treatment; and for those systems for which you have specified maximum permissible source water levels (MPLs) and/or OWQPs.

For systems which met the DONE milestone criteria prior to January 14, 2000, we are requesting you report this milestone as soon as possible. Systems which are triggered into lead service line replacement, may not meet the DONE milestone criteria for several years. In any case, this milestone is to be reported to SDWIS/FED with your February 15, 2002 data submission for all systems you determined met this criteria on or before December 31, 2001. Systems which meet this criteria after January 1, 2002 are to be reported within 45 days after the end of the quarter in which they met the criteria as determined by you.

We recognize that some “DONE” systems may no longer meet the DONE criteria. This would occur if:

- a (b)(1) system subsequently exceeds the action level;
- a (b)(3) system exceeds the action level, or does not meet the OWQPs or MPLs, or the difference between the 90th percentile lead level and the highest source water lead concentration level exceeds 0.005 mg/L; or
- or a WQP system does not meet the WQPs or MPLs

In these instances, you would modify the done milestone by adding a milestone end date that corresponds to when the system no longer met the DONE criteria. The end date signifies that additional monitoring requirements, lead service line replacement, or modifications to the corrosion control treatment process, have been triggered. The milestone end date is to be reported to SDWIS/FED within 45 days after the end of the quarter in which you determined the system no longer meets the DONE criteria.

If, in the future, a system again meets the DONE criteria, you would report another milestone record for the new DONE status, with a milestone begin date corresponding to the date you determined the system met the DONE criteria for the second time. EPA is requesting that for the initial reporting for systems meeting the DONE criteria that only the most recent or “current” done status be reported. After the initial reporting, if a system should become “UNDONE” and “DONE” again, you should report as instructed in this paragraph.

Remember:

- ☞ Reporting is requested for this DONE milestone as soon as possible and is required as of January 14, 2002
- ☞ Reason Codes do not apply to the DONE milestone.
- ☞ Do not report the DONE milestone until the latest event has been completed.
- ☞ Should the system subsequently fail to meet its DONE requirements, you are required to report an end date to the original DONE milestone record.
- ☞ A second DONE milestone is required when the system again meets the last required activity.

EXAMPLES FOR REPORTING THE DONE MILESTONE

EXAMPLE 1

A small system (ZT0004567) monitors for two consecutive periods, July 1 to December 31, 1993, and January 1 to June 30, 1994. It does not exceed the action levels for either lead or copper. On July 8, 2000, you determine that this system meets the criteria for DONE because it is a (b)(1) system as of July 1, 1994. As with the DEEM milestone, you would report the milestone begin date as the first day after the system met the (b)(1) criteria; therefore you would report July 1, 1994. As soon as possible, but at the latest by the SDWIS/FED due date of February 15, 2002, you would report:

DONE Milestone: Required Reporting		
DTF Data Element Number	Data Value	Data Element Description
C101	ZT0004567	PWS-ID
C801	0006	Milestone-ID
C803	1994/07/01	Milestone-Begin-Date (Date the system met the DONE criteria)
C805	DONE	Milestone-Code (Code value DONE to identify a system that has been deemed to have optimized corrosion control treatment)

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
C4	ZT0004567	0006		I	C803	19940701		
C4	ZT0004567	0006		I	C805	DONE		

EXAMPLE 2

This same system (ZT0004567) later exceeds the lead action level during the period July 1 to December 31, 2003.

By February 15, 2004, you would **modify** the DONE milestone by reporting a milestone end date of December 31, 2003.

DONE Milestone: Required Reporting		
DTF Data Element Number	Data Value	Data Element Description
C101	ZT0004567	PWS-ID
C801	0006	Milestone-ID
C804	12/31/2003	Milestone-End-Date (Date the system no longer met the DONE criteria)

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
C4	ZT0004567	0006		M	C804	20031231		

EXAMPLE 3

This same system successfully installs corrosion control treatment, completes its follow-up monitoring and you set OWQPs on September 1, 2005.

By November 15, 2005, you would report a second DONE milestone:

DONE Milestone: Required Reporting		
DTF Data Element Number	Data Value	Data Element Description
C101 C801 C803 C805	ZT0004567 0018 2005/09/01 DONE	PWS-ID Milestone-ID Milestone-Begin-Date (Date States determines system met the DONE criteria) Milestone-Type-Code (Code value DONE to identify a system that has been deemed to have optimized corrosion control treatment)

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
C4	ZT0004567	0018		I	C803	20050901		
C4	ZT0004567	0018		I	C805	DONE		

EXAMPLE 4

A system (ZT0004588) exceeds the lead action level and is required to install corrosion control treatment. During January 1 to June 30, 1999 and July 1 to December 31, 1999, it collects follow-up lead and copper tap samples. The system still exceeds the lead action level. On May 20, 2000, you send a letter to the system specifying its OWQPs and notifying it that it is to begin LSLR at a rate of 7% per year. You report both the DEEM and LSLR milestone criteria, both with a begin date of May 20, 2000. The system begins replacing its lead service lines.

Although you have set OWQPs for this system, it does not meet the DONE criteria because it has been triggered into lead service line replacement (*due to its continued exceedance of the lead action level after the installation of treatment*). The system is not DONE until it has replaced a sufficient amount of its lead service lines which result in lead 90th percentiles which are at or below the action level for two consecutive monitoring periods, or it has replaced all of its lead service lines.

The system replaced 7% of its lines by May 19, 2001 and continues replacing lines at a rate of 7% per year. Assume this system is on annual tap monitoring and is below the lead action level during monitoring conducted 1/1/2002 to 12/31/2002 and 1/1/2003 to 12/31/2003. The system may stop line replacement after it has been notified that its second round of samples was at or below the action level. This system effectively meets the DONE criteria on 1/1/2004.

By May15, 2004, you would report:

DONE Milestone: Required Reporting		
DTF Data Element Number	Data Value	Data Element Description
C101	ZT0004588	PWS-ID
C801	0012	Milestone-ID
C803	200401/01	Milestone-Begin-Date (Date the system met the DONE criteria)
C805	DONE	Milestone-Type-Code (Code value DONE to identify a system that has been deemed to have optimized corrosion control treatment)

Should this system exceed the lead action level during a subsequent monitoring period it would be required to resume lead service line replacement. You would modify the DONE milestone record by adding an end date, and submit a second LSLR milestone with the new begin date. The saga continues.

EXAMPLE 5

A small system with two initial tap results at or below the action levels, then as in Example 2 it exceeds an action level during reduced monitoring. In this example, the system (ZT0009999) exceeds the **copper** action level, instead of the lead action level. The system installs corrosion control treatment and collects follow-up samples during January to June 1999 and July to December 1999. The system still continues to exceed the **copper** action level. On May 20, 2000, you send a letter to the system which specifies its OWQPs.

In this example, the system would meet the DONE criteria because systems that exceed the copper action level have no additional treatment technique requirements beyond the corrosion control installation steps (*lead service line replacement is only triggered by a continued lead exceedance.*) Therefore, you would report the following Done milestone.

DONE Milestone: Required Reporting		
DTF Data Element Number	Data Value	Data Element Description
C101	ZT0009999	PWS-ID
C801	0026	Milestone-ID
C803	2000/05/20	Milestone-Begin-Date (Date the system met the DONE criteria)
C805	DONE	Milestone-Type-Code (Code value DONE to identify a system that has been deemed to have optimized corrosion control treatment)

5.3 Violation Reporting

This section of the guidance provides definitions for violations and compliance achieved, and reporting

requirements for each violation type. In addition, we have provided examples on how to report violations to SDWIS/FED, after the discussion of each violation type.

5.3.1 Overview

You are required to continue to report violations to SDWIS/FED for those systems which fail to comply with the LCR and the minor revisions, including requirements established by you which are more stringent than the Federal requirements. We have not added any new violation types in response to the LCRMR; but have, instead, consolidated like or similar violation types, revised some of the violation definitions and the accompanying criteria for returning to compliance. Table 7 below provides definitions for each of the 10 violation types which you are required to report to EPA. We have identified those changes to the violation definitions initiated because of new provisions in the LCRMR. We have also noted that some of the provisions may not apply in your State. Those provisions which are less stringent than the 1991 Rule can not be implemented in your State until they are adopted in your drinking water regulations.

Table 7 - Changes to the Violation Definitions
INITIAL LEAD AND COPPER TAP M/R (Violation Code: 51)
<p>Failure to meet any of the following:</p> <ul style="list-style-type: none"> • Use appropriate sampling procedures in accordance with §§141.86(a) and (b), • Collect the required number of samples during the specified time frame in accordance with §§141.86(c) and (d)(1), • Ensure samples are analyzed properly in accordance with §141.89(a), <i>or</i> • Submit all required monitoring information on time in accordance with §141.90(a). <p><u>If</u> these less stringent provisions are adopted into your revised drinking water regulations, the LCRMR expand the definition to include systems that:</p> <ul style="list-style-type: none"> • Did not meet replacement sample requirements for invalidated samples as described in §141.86(f)(4) where these samples are needed to meet minimum sampling requirements; • Did not meet the conditions of their monitoring waivers in §141.86(g) or provide required information in §§141.90(a)(4)(ii)-(iv); • Did not provide sample information needed for you to perform the 90th percentile calculation as outlined in §141.90(h); <i>or</i> • Collected non-first draw samples that did not meet the criteria in §141.86(b)(5). <p><i>NOTE: This violation type is no longer applicable for most systems and now only applies to new systems or system that were not previously required to conduct lead and copper tap monitoring.</i></p>
FOLLOW-UP OR ROUTINE LEAD AND COPPER TAP M/R (Violation Code: 52)

Table 7 - Changes to the Violation Definitions

Failure to meet any of the following:

- Use appropriate sampling procedures in accordance with §§141.86(a) and (b),
- Collect required number of samples during the required time frames in accordance with §§141.86(c) & (d)(2)-(4),
- Ensure samples are analyzed properly in accordance with §141.89(a), *or*
- Submit all required monitoring information on time in accordance with §141.90(a).

The LCRMR expand the definition to include:

- Those new monitoring provisions listed above, under the initial tap “Less stringent provisions” (e.g., sample invalidation, non-first draw samples, State calculation of 90th percentile values, and monitoring waiver compliance)
- Systems on reduced monitoring which fail to report a change in treatment, or an addition of a new source, within 60 days or within the time frame which you specify (violation type code 52).
- Systems on reduced monitoring, and placed on alternate lead and copper tap schedules, which do not meet the monitoring deadline when transitioning to the alternate period, *if your regulations include this provision* (violation type 52).

INITIAL, FOLLOW-UP, OR ROUTINE WQP M/R (Violation Code: 53)

Failure to meet any of the following:

- Use appropriate sampling procedures in accordance with §§141.87(a)(1), (b)-(e);
- Collect required number of samples in accordance with §141.87(a)(2) or (e);
- Ensure samples are analyzed properly in accordance with §141.89(a); *or*
- Submit all required monitoring information on time in accordance with §141.90(a)

If this less stringent provision is adopted into your revised drinking water regulations, the LCRMR expand the definition to include ground water systems that:

- Did not meet their State-approved sampling plan for collecting WQPs at representative entry point locations in accordance with §§141.87(a)(5) & (c)(2).

INITIAL, FOLLOW-UP, OR ROUTINE SOURCE WATER M/R (Violation Code: 56)

Failure to meet any of the following:

- Use appropriate sampling procedures in accordance with §§141.88(a)(1) and (2);
- Collect required number of source water samples in accordance with §§141.88(a)(1) - (e);
- Ensure samples are analyzed properly in accordance with §141.89(a); *or*
- Submit all required sampling information on time in accordance with §141.90(b).

OPTIMAL CORROSION CONTROL TREATMENT (OCCT) STUDY/ RECOMMENDATION *or* SOURCE WATER TREATMENT (SOWT) RECOMMENDATION (Violation Code: 57)

For an OCCT Study/Recommendation violation, failure to meet any of the following:

- Submit an OCCT recommendation on time in accordance with §§141.82(a) and 141.90(c)(2);
- Submit an “acceptable” study on time in accordance with §§141.82(c) and 141.90(c)(3); *or*
- Provide additional information needed by the State to make an OCCT determination in accordance with §141.82(d)(2).

For an SOWT Recommendation violation, failure to meet the following:

- Submit a SOWT recommendation within 6 months of exceeding the action level in accordance with §§141.83(a)(1) & 141.90(d)(1).

OCCT INSTALLATION/DEMONSTRATION *or* SOWT INSTALLATION (Violation Code: 58)

Table 7 - Changes to the Violation Definitions

For an OCCT Installation violation, failure to meet any of the following:

- Have the State-designated treatment properly installed and operating in accordance with §141.82(e),
- Submit a certification of proper installation and operation in accordance with §141.90(c)(4), *or*
- Demonstrate that OCCT already exists in accordance with §§141.81(b)(1)-(3) and 141.90(c)(1).

For an SOWT Installation violation, failure to meet any of the following:

- Properly install and operate SOWT in accordance with §§141.83(b)(3) and (5), *or*
- Submit certification to the State of proper SOWT installation and operation, in accordance with §141.90(d)(2).

WQP ENTRY POINT *or* TAP NONCOMPLIANCE (Violation Code: 59)

Failure to:

- Maintain OWQP minimum or ranges in accordance with §141.82(g).

If the revised definition for OWQP compliance is adopted into your revised drinking water regulations, the LCRM expands the definition to include failure to:

- Meet daily values for more than 9 days in a 6-month monitoring period in accordance §141.82(g).

MAXIMUM PERMISSIBLE LEVEL (MPL) NONCOMPLIANCE (Violation Code: 63)

Failure to:

- Meet either State-designated or approved MPL in accordance with §141.83(b)(5).

LEAD SERVICE LINE REPLACEMENT (Violation Code: 64)

Failure to meet any of the following:

- Replace the required amount of LSLs by the annual deadline, in accordance with §§141.84(a) & (b); *or*
- Report the required LSL information on time, in accordance with §141.90(e) that demonstrates that the replacement rate was met.

In cases of where the system does not replace the entire LSL (i.e., "partial LSLR replacement"), the LCRM expand the definition to include failure to:

- provide notice and guidance to residents at least 45 days before LSLR begins (unless you allow a shorter notification period);
- collect a tap sample within 72 hours of completing the partial LSLR;
- mail and/or post results of the analysis to the owner and residents within 3 days of receipt of the results; *or*
- report information that you deem necessary to assess whether the system met its partial LSLR monitoring and notification requirements.

PUBLIC EDUCATION (Violation Type: 65)

Table 7 - Changes to the Violation Definitions

Failure to meet any of the following:

- Provide public education that meets the content requirements in §§141.85(a) & (b);
- Meet the public education delivery requirements of §141.85(c).
- Report required public education information on time, *within 10 days* after the end of the period in which public education was required, in accordance with §141.90(f).

Notes:

1. Under the LCRM, some requirements for small CWSs are optional, *if you adopt these provisions into your State regulation.*
2. The LCRM revised the reporting schedule. Under the LCR, a system was required to submit one letter by December 31st of each year in which it was subject to public education requirements.

The general format for reporting violations of this rule to SDWIS/FED via the C1100 Violations DTF record are presented in Table 8a below.

Table 8a Data Transfer Form D-1 SDWIS/FED DTF C1100 PWS-VIOLATIONS Database Record Description		
DTF Data Element Number	Data Element Format	Data Element Description
C1101	C,7	Violation-ID
C1103	C,4	Contaminant-Code
C1105	C,2	Violation-Type
C1107	yyyy/mm/dd	Violation-Compliance-Period-Begin-Date
C1109	yyyy/mm/dd	Violation-Compliance-Period-End-Date
C1111	C,3	Violation-Duration
<p>Notes: 1. C = character data. 2. First 2 positions of the Violation ID(C1101) are the FFY in which the violation was reported to SDWIS/FED (e.g., a 10/1/99 violation will have a 2000 FY in the ID).</p>		

Note: The Violation Duration (C1111) which is expressed as the number of months in the compliance (or monitoring) period for which the violation occurred is no longer posted to SDWIS/FED. When submitted, SDWIS/FED calculates the violation compliance period end date based on the begin date (C1107) and the number of months in the violation duration (C1111). SDWIS/FED defaults a value of 12/15/2015 for violation compliance period end dates for **ALL** LCR/LCRM violations **EXCEPT** WQP M/R and WQP Non-Compliance Treatment Technique violations (violation types 53 and 59). SDWIS/FED will reject both C1111 and C1109 when submitted for LCR/LCRM violations other than WQP violations. For WQP M/R and WQP Non-Compliance Treatment Technique violations, we recommend you report the actual violation end date rather than duration as this attribute will be removed from the DTF transactions in the near future.

Table 8b presents an example of the DTF transactions for a WQP M/R violation which occurred in the January 1, 2004 through June 30, 2004 compliance period. The last line displays the violation duration (C1111) transaction. You may only report the violation end date (C1109) OR the violation duration

(C1111), NOT both.

Table 8b SDWIS/FED Example DTF Transactions for Violation Data								
1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	ZT7654321	0400005		I	C1103	5000		
D1	ZT7654321	0400005		I	C1105	53		
D1	ZT7654321	0400005		I	C1107	20040101		
D1	ZT7654321	0400005		I	C1109 or	20040630		
D1	ZT7654321	0400005		I	C1111	6		

Note: The first two positions of the Violation ID (C1101) are designate the two digit fiscal year in which the violation occurred or in which you became aware of the violation. The third position is to be a “G” if you are requesting SDWIS/FED generate the Violation ID number, otherwise it can be any numeric value. The remaining positions are to represent a unique number for each violation for that PWS within the input file (e.g., if there are 3 violations for a PWS in the input file there should be 3 unique numbers - 99G0001, 99G0002, 99G0003)

5.3.2 Characterization of Non-Compliance Periods for Violations

Prior to January 14, 2000, *all* violations were characterized by compliance period begin and end dates which also corresponded to designated monitoring periods (e.g., January to June, January to December, etc.) for which a specific action(s) was to occur (e.g., samples collected, treatment installed). Effective January 2000, we are changing this characterization for all LCR/LCRM violations except WQP M/R and WQP Non-Compliance. WQP compliance has been excluded from this revision for the following reasons. Entry Point and Tap WQP monitoring are conducted on a variety of different monitoring schedules. Routine Entry Point samples are taken every two weeks while the WQP tap samples are taken only during the designated monitoring periods (6-month, annual, triennial, 9-year) which corresponds to the lead and copper tap monitoring periods. These violations are now reported under one violation type (53) and compliance is determined during a fixed 6 month period. Compliance is calculated based on one of two methods. You may continue to calculate compliance under the current method of quarterly for entry point and 6 months for tap, or under the new method of combining both entry point and tap into a single 6 month period. Under the current method, a system may be in violation for both types of WQP monitoring which could have overlapping monitoring periods and will result in multiple 53 M/R violations being reported. Under the new method WQP non-compliance is based on the number of days the “daily average” (excursions) does not meet the designated WQP parameter limit or range as calculated within a fixed 6-month period. To account for this situation, WQP Non-Compliance begin and end dates will reflect 3, 6, 12, 36, or 108 month periods depending on the method you use. See Section 141.87 for more details on WQP requirements.

For all violations except WQP M/R and Non-Compliance, the compliance period will reflect the actual period of time that the system was in violation. The violation begin date is defined as the first day after the designated monitoring period, requirement, or event is missed. The begin date for source water maximum permissible level (MPL) noncompliance violations is the day you determine an exceedance exists. No violation end date is reported by you for any violation other than WQP M/R and Non-Compliance Treatment Technique violations. SDWIS/FED will provide the arbitrary default value of December 31, 2015 for the violation/compliance period end date for all violations except WQPs. When the required return to compliance (RTC) data is reported to SDWIS/FED, and is linked to the violation(s), SDWIS/FED will replace the default compliance period end date of December 31, 2015 with the corresponding RTC (SOX) action date. This change will more accurately portray the length of time a system is in violation. This change is also needed for significant non-compliance (SNC) determinations because Initial Tap M/R, Treatment Installation/Demonstration, and Public Education violations may extend over the 12-month periods for which SNCs are determined. Refer to Section 8 for more information on SNCs.

Please note, you are required to report when the system has RTC for all lead and copper violations; not just those violations with a compliance end date of December 31, 2015.

Some states have already developed automated compliance determination software for the LCR. The consolidation from 15 to 10 violation types, and changes to violation determination and characterization, will necessitate additional changes to your information systems. To facilitate reporting, you may continue to submit the 15 violation types until your FY 2002 second quarter data submission (actual date = after January 14, 2002). Between January 14, 2000 and January 14, 2002, SDWIS/FED edit/update processing will automatically convert the obsolete violation types (54, 55, 60, 61, 62) to their corresponding consolidated violation types. These obsolete codes will be displayed on the SDWIS/FED Errors Report to indicate they have been converted and that they are no longer posted as that code type. After January 13, 2002, SDWIS/FED will no longer convert any LCR data and will reject records which contain these obsolete codes and/or that do not meet all of the reporting requirements of the LCRMR. About 6 months prior to January 14, 2002, a warning message will appear on each error report referring to the final conversion date of January 14, 2002.

5.3.3 Violation Contaminant Code

Violation type codes for the LCR, and LCRMR, range in value from 51 to 65. All but the MPL Treatment Technique violation will have the same contaminant code (C1103) of 5000. For LCR/LCRMR violations, SDWIS/FED will provide the value of 5000 for data element C1103 to simplify reporting and facilitate query development. You may choose to include a DTF transaction for DTF data element C1103 to maintain consistency with how you report violations for other rules.

The one EXCEPTION where the contaminant code does not equal 5000 is the Maximum Permissible Level (MPL) Non-Compliance Treatment Technique violation of lead and/or copper in source water. The C1105 violation type code for MPL violations is 63. For this violation, the C1103 contaminant code to be reported is 1030 for lead and 1022 for copper, as appropriate. Should both contaminants exceed the MPLs, two violations should be reported.

5.3.4 Default Codes

As mentioned above, SDWIS/FED will provide a default of the contaminant code of 5000 for all LCR/LCRM violations except for the MPL violation type code 63 when you choose not to report the contaminant code. Because the violation/compliance period end date is not allowed to be reported for all LCR/LCRM violations except WQP M/R and Non-Compliance Treatment Technique violations, type codes 53 and 59 respectively, SDWIS/FED will provide a default value of December 31, 2105. Submitted values other than the acceptable default value will result in **rejection** of the inappropriate data or, in some cases, the entire violation. For example, if you include a DTF transaction with C1103 for the LCR/LCRM violations other than 5000, the entire violation will be rejected. On January 14, 2000 and thereafter, SDWIS/FED will provide only the listed default values for violations which are shown in Table 9.

Table 9 SDWIS/FED Violation Default Values after January 14,2000			
Violation Type	Violation Description	DTF Data Element	Default Value
51	Initial Lead and Copper Tap M/R	C1103 C1109	5000 December 31, 2015
52	Follow-up Lead and Copper Tap M/R	C1103 C1109	5000 December 31, 2015
53, 54, 55	Initial, Follow-up, or Routine WQP M/R	C1103	5000
56	Initial, Follow-up, or Routine Source Water M/R	C1103 C1109	5000 December 31, 2015
57, 61	Treatment Study / Recommendation	C1103 C1109	5000 December 31, 2015
58, 62	Treatment Installation / Demonstration	C1103 C1109	5000 December 31, 2015
59, 60	WQP Noncompliance	C1103	5000
63	MPL Noncompliance	C1109	December 31, 2015
64	Lead Service Line Replacement	C1103 C1109	5000 December 31, 2015

Table 9 SDWIS/FED Violation Default Values after January 14,2000			
65	Public Education	C1103 C1109	5000 December 31, 2015
Notes: C1103 = Contaminant Code C1109 = Compliance Period End Date C1103 values for MPL Noncompliance are required to be reported by you. Appropriate values: 1022 Copper, 1030 Lead			

This table reflects the 15 original LCR violations. The default values under the 10 consolidated violations are the same as listed in this table for the consolidated violation type code.

5.4 Monitoring and Reporting Violations

Monitoring and Reporting (M/R) violations fall into 3 major categories:

- M/R for lead and copper at customers' taps
- M/R for WQPs at entry points and taps in the distribution system
- M/R for lead and copper in source water

A detailed discussion of each violation is provided, including the definition of the violation and instructions on how the violation should be reported to SDWIS/FED. In addition, examples are provided after the discussion of each violation, including examples of DTF transactions.

5.4.1 Initial Lead and Copper Tap M/R

When Is Initial Lead And Copper Tap Monitoring Required?

The LCRM clarify that initial tap sampling for lead and copper is required for all CWSs and NTNCWSs, regardless of size. Initial monitoring for large systems are required to be completed in two consecutive six-month compliance periods. Sampling during the second six-month period is optional for medium and small systems if the system exceeds the lead or copper action level in the first six-month compliance period. The second round of sampling is optional because these systems are immediately triggered into OCCT requirements. If the medium or small system does not exceed the lead or copper action level during the first 6-month period, the system is required to sample during a second consecutive six-month monitoring period before being eligible for reduced monitoring. As an exception to this requirement, some small systems may have been granted monitoring waivers prior to April 12, 2000 (also known as "pre-existing" waivers) which did not require lead and copper tap monitoring to be conducted as a condition of the waiver. The LCRM clarify that these systems are required to complete **one round** of lead and copper monitoring by September 30, 2000. However, the majority of systems were required to begin lead and copper monitoring according to the regulatory schedule outlined in Table 10.

Table 10 Initial Monitoring Periods for Lead and Copper Tap Sampling		
System Size	1 st Compliance Period	2 nd Compliance Period
Large Systems (Over 50,000 people)	Jan. 1 to June 30, 1992	July 1 to Dec. 31, 1992
Medium Systems (3,301 to 50,000 people)	July 1 to Dec. 31, 1992	Jan. 1 to June 30, 1993*
Small Systems (3,300 and fewer people)	July 1 to Dec. 31, 1993	Jan.1 to June 30, 1994*

* Optional, if the system exceeds the lead or copper action level in the first six-month compliance period.

Note: Initial Tap Monitoring and Reporting violations are considered major monitoring violations and are to be included in State Annual Compliance Reports.

When Does An Initial Lead and Copper Tap M/R Violation Occur?

This violation type does not currently apply to most systems, as the initial tap monitoring period is long past. This violation type would still apply to new water systems and those systems granted "pre-existing" waivers which were not previously required to monitor, as well as those systems which failed to conduct 2 consecutive rounds of initial tap monitoring. For these systems, an initial lead and copper tap M/R violation is required to be reported if these systems **fail** to complete **ANY** of the activities listed in Table 7 above, during either 6-month compliance period or for those systems with "pre-existing" waivers which did not conduct the required single 6-month monitoring by September 30, 2000.

How Does A System Return to Compliance for This Violation Type?

A system will return to compliance (RTC) when it meets all appropriate M/R requirements as mentioned above, for **two consecutive** 6-month monitoring periods, or when it is a medium or small system which meets all appropriate M/R requirements for one round which exceeds the action level, or when the system had a pre-existing waiver and subsequently meets all appropriate M/R requirements for a single 6-month monitoring period. Previously, when a system incurred a M/R violation and subsequently conducted the required monitoring, it was considered "returned to compliance". However this is inconsistent with the regulation which requires two consecutive 6-month rounds of monitoring to achieve compliance with the Initial Tap monitoring requirements. The same applies to Follow-Up monitoring and the first set of Routine monitoring requirements. Therefore, we are clarifying the definition for returned to compliance to require compliance of all monitoring requirements for 2 consecutive 6-month periods except the pre-existing waiver violations which require only one 6-month round. New violations for these requirements are required to be reported in the following manner. A system would incur a single 51 violation which would cover the first day after the first missed monitoring period and would continue to the date the system completed 2 consecutive rounds of 6-

month monitoring periods. The only exception to the requirement for two consecutive 6-month rounds of sampling is for those medium and small systems which exceed the action level. These systems have basically completed their monitoring requirements because they are now triggered into corrosion control treatment activities. Once a system is reduced to annual or triennial monitoring, or is granted a monitoring waiver, the old RTC definition applies.

The initial tap violations have been reported in various ways to include 2 consecutive 6-month violations, a series of 6-month violations, and a single 6-month violation. The required RTC data has been reported for some violations but not necessarily all but the latest one and in some cases no RTC data has been reported. Under this reporting clarification, previously reported violations data need not be modified to reflect a violation begin date from the first 6-month period violation. If more than one, or a series of initial tap violations have been reported for a single system, all but one should be returned to compliance. If none have been returned to compliance, we recommend returning all but the first one to compliance. Systems which have NOT completed the 2 consecutive 6-month monitoring period requirements should be considered in violation for the entire time for all follow-up and enforcement activities. Regardless of how these violations have been reported, all but the very newest systems are considered SNCs. The following section describes the impact of this clarification on the SNC definition and the related changes made to SDWIS/FED's SNC identification algorithm.

Those systems with a "pre-existing" monitoring waiver which fail to meet the September 30, 2000 Initial Tap monitoring deadline will return to compliance when it subsequently completes all requirements. Because this requirement is effective 90 days after publication (April 12, 2000), water systems only have 6 months to become aware of this requirement and conduct the sampling.

Also, depending on the cause of the violation, the LCRM expands the definition of RTC to include a system that:

- collects replacement samples that meet sample location criteria in §141.86(f);
- meets the conditions of monitoring waiver outlined in §141.86(g) and/or provides required information for waiver to State in §§141.90 (a)(4)(ii)-(iv);
- provides needed sample information for State calculation of 90th percentile levels as required in §141.90(h); *or*
- meets sampling requirements in §141.86(b)(5) for the collection of non-first draw samples.

Can This Violation Result in A System's Becoming An SNC?

Yes. A system that incurs an initial lead and copper tap M/R violation will become an SNC if the system does not RTC and/or you do not report the RTC enforcement/follow-up action to SDWIS/FED and properly link the action to the initial tap M/R violation. Prior to the clarification of the RTC definition for initial tap monitoring, a large system had an additional 3 months, a medium system had an additional 9 months, and a small system had an additional 15 months in which to return to compliance before it would be identified as an SNC. These time frames were calculated from the end of the 6-month monitoring period (51 violation). The additional time was provided to distinguish recalcitrant systems from those who were a little late and to reduce the number of SNCs during the initial implementation of the LCR. Because the initial monitoring period is well past for all systems except the very new or those having had a “pre-existing waiver”, the additional time period is no longer appropriate. As of April 2001, SDWIS/FED will no longer include any additional time for a system to return to compliance prior to being identified as an SNC. Additional information about SNCs is presented in Section 8.2.

What Data Needs To Be Reported for This Violation?

The following table presents the reporting requirements under the LCRMR for each Initial Lead and Copper Tap M/R violation:

Initial Tap M/R Violation: Required Reporting	
DTF Data Element Number	Data Element Description
C101	PWS-ID
C1103	Contaminant Code 5000 (SDWIS/FED defaults - May be reported by State)
C1101	Violation ID
C1105	Violation Type Code = 51
C1107	Violation/Compliance Period Begin Date = the first day after the end of the 6-month compliance period in violation

SDWIS/FED will provide default values for the following data elements for this violation type. Reporting of the contaminant code (C1103) is optional, but may be reported if it facilitates reporting. The compliance period end date, (C1109) and the violation duration (C1111) may NOT be entered for this violation type. When reported, they will be rejected.

**EXAMPLES FOR REPORTING
INITIAL LEAD AND COPPER TAP VIOLATIONS (51)**

EXAMPLE 1

A new small system (TX1230567) was required to conduct its first round of initial monitoring during the period January 1, 2001 to June 30, 2001. It completes the monitoring late and submits all required information to the State on August 29, 2001.

By August 15, 2001 you would report an Initial Lead and Copper Tap M/R violation as follows:

DTF Data Element Number	Data Value	Data Element Description
C101	TX1230567	PWS-ID
C1101	0100001	Violation ID
C1103	5000	Contaminant Code - 5000 (SDWIS/FED Defaults - May be reported)
C1105	51	Violation Type Code
C1107	2001/07/01	Violation Begin Date
NOTE: C1109 and/or C1111 may NOT be entered by the State. SDWIS/FED will default a compliance period end date of 12/31/2015.		

The DTF transactions for this violation are:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	TX1230567	0100001		I	C1103	5000		
D1	TX1230567	0100001		I	C1105	51		
D1	TX1230567	0100001		I	C1107	20010701		

The system subsequently completes its second consecutive round of monitoring and submits the results to the state on December 29, 2001. By February 15, 2002, you would report a RTC enforcement/follow-up action as follows:

DTF Data Element Number	Data Value	Data Element Description

C101	TX1230567	PWS-ID
C1201	0200022	Enforcement ID
C1203	2002/12/29	Enf-Action-Date
C1205	SOX	Enf-Action-Code = SOX for RTC
Y5000	0100001	Link Record Y5000 serves as a mechanism for linking the follow-up action to the violation by the violation ID

The DTF transactions for this record are:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
E1	TX1230567	0200022		I	C1203	20011229		
E1	TX1230567	0200022		I	C1205	SOX		
E1	TX1230567	0200022		I	Y5000	0100005		

In this example we have displayed the Y5000 link method which links the enforcement/follow-up action to the violation(s) by the violation ID. Other link methods available to the lead and copper violations are the Z5000 which links the enforcement/follow-up action to the violation by the violation type, contaminant type, and compliance period begin date. The data to be reported for the Z5000 link method would be as follows:

DTF Data Element Number	Data Value	Data Element Description
C101	TX1230567	PWS-ID
C1201	0200022	Enforcement ID
C1203	2001/12/29	Enf-Action-Date
C1205	SOX	Enf-Action-Code = SOX for RTC
Z5000	51500020010701	Link Record Z5000 serves as a mechanism for linking the follow-up action to the violation by the viol. Type (51) the contam. (5000) and the begin date (07/01/2001)

Refer to the SDWIS/FED Data Entry Instructions for more detailed information on enforcement/follow-up action link reporting requirements. The Data Entry Instructions and other SDWIS/FED documents are maintained on the EPA Web site <http://www.epa.gov/safewater>.

EXAMPLE 2

A small water system (VD2222333) was granted a monitoring waiver on July 10, 1996 and was not required to monitor. The LCRM clarify that systems granted pre-existing waivers are required to complete one round of monitoring by September 30, 2000. The system completes this monitoring and reports the results to the State on June 19, 2001. The system is in violation for failure to meet the September 30, 2000 deadline. The violation compliance period begin date is October 1, 2000.

By February 15, 2001, you would report an Initial Lead and Copper Tap M/R violation.

DTF Data Element Number	Data Value	Data Element Description
C101 C1101 C1103 C1105 C1107	VD2222333 0100313 5000 51 2000/10/01	PWS-ID Violation ID Contaminant Code (SDWIS/FED Defaults - May be reported Violation Type Code Violation Begin Date
NOTE: C1109 and/or C1111 may NOT be entered by the State. SDWIS/FED will default a compliance period end date of 12/31/2015.		

The DTF transactions for this violation record are as follows:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	VD2222333	0100313		I	C1103	5000		
D1	VD2222333	0100313		I	C1105	51		
D1	VD2222333	0100313		I	C1107	20011001		

By August 15, 2001, you would report a RTC follow-up action with the link information to the violation above, as follows:

DTF Data Element Number	Data Value	Data Element Description
C101 C1201 C1203 C1205 Z5000	VD2222333 0100021 2001/06/19 SOX 51500020001001	PWS-ID Enforcement ID Enf-Action-Date Enf-Action-Code = SOX for RTC Link Record Z5000 serves as a mechanism for linking the follow-up action to the violation by the viol. Type (51) the contam. (5000) and the begin date (10/01/2000)

The DTF transactions for this record are:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
E1	VD2222333	0100001		I	C1203	20010619		
E1	VD2222333	0100001		I	C1205	SOX		
E1	VD2222333	0100001		I	Z5000	51500020001001		

What Key Points Should I Remember?

- ☞ An Initial Tap M/R violation only applies to the two consecutive 6-month initial rounds of lead and copper tap monitoring and to the one round of monitoring required to be conducted prior to September 30, 2000 for those systems with “pre-existing” waivers.
- ☞ As of January 14, 2000, only one violation should be given for initial tap violations.
- ☞ A system is required to have two consecutive rounds of 6-month monitoring before it returns to compliance unless it is a medium or small which exceeds one round, or a system which had a pre-existing waiver which missed their single 6-month required round.
- ☞ This violation can lead to a system becoming an SNC if the system does not return to compliance (RTC), and/or you do not report the RTC to SDWIS/FED. The RTC is required to be properly linked to the Initial Tap M/R violation.

Note: Most LCRM violation and enforcement data elements to be reported and their related DTF transactions are the same. The violation data and DTF transaction tables will not be displayed for all remaining violation examples unless the reporting for that specific violation or enforcement is different.

5.4.2 Follow-up or Routine Lead and Copper Tap M/R

When Is Follow-up or Routine Lead and Copper Tap Monitoring Required?

Follow-up monitoring for lead and copper refers to the tap samples collected during two consecutive six-month periods **AFTER corrosion control treatment** has been installed. These results and the results of water quality parameter (WQP) monitoring are used by the State to set the Optimal Water Quality Parameter values that reflect optimal corrosion control treatment (OCCT).

Routine monitoring is conducted:

- During two consecutive six-month periods **AFTER OWQPs** have been set by the State, **or**
- By those systems not having to install OCCT.

The results are used by the State to determine if the system qualifies for reduced monitoring.

When Does A Follow-up or Routine Lead and Copper Tap M/R Violation Occur?

The same violation type code (i.e., 52) is used for the reporting of both follow-up and routine tap M/R violations (including systems on a reduced monitoring schedule). A follow-up or routine lead and copper tap M/R violation is defined similarly to the initial tap violation. Previously you would have reported a violation, for each compliance period in which the violation occurred. As mentioned in the initial tap section, we are changing the non-compliance and RTC definition for follow-up monitoring requirements as well as for the first set of routine monitoring requirements to require two consecutive 6-month rounds before the requirement is met. Therefore, for new violations reported after January 14, 2000, only one 52 violation would be reported for these “initial, follow-up, and routine” monitoring violations. Once on reduced annual or triennial monitoring, or for those systems with a monitoring waiver, only one round of monitoring is required to achieve compliance with those requirements. Follow-up and Routine violations are defined as the failure to complete **ANY** of the requirements listed in Table 7 above.

The LCRMR added two additional new criteria to the definition of a 52 violation for systems on reduced monitoring. These are:

- §141.86(d)(4)(vii) - Systems that collect lead and copper samples less often than once every six months must report to you, a change in treatment, or the addition of a new source, within 60 days of making this change (or earlier if you require). Failure to do so, would be reported as a 52 violation.
- (per §141.86(d)(4)(iv)(A-B) - You have the option to allow systems to collect reduced samples during periods other than June to September if these alternate periods represent periods of normal operation when lead levels are likely to be their highest. Systems which are transitioning to an alternate monitoring period are required to monitor in the “next” 4 month period designated by you, **and**, that sampling is to be completed within 21 months from the previous monitoring period for systems on annual monitoring, and within 45 months for systems on triennial monitoring. The 21 and 45 month deadlines are calculated from the previous round of monitoring (actual sampling period). “Previous round of monitoring” is defined here as the June to September period, or the actual period they had sampled. The 21 month transition period is to allow the alternate monitoring period to be reached without requiring the system to monitor twice in the same current annual monitoring period, or to extend the period of monitoring beyond a full annual compliance period. The same philosophy applies to the 45 month transition period for those on triennial monitoring. Failure to meet these deadlines would result in a 52 violation. Violations of these transition periods should have a violation begin date of the first day after the end of the designated alternate monitoring period, not the first day of the 22nd or 46th month. Examples are provided below.

Will my monitoring schedule change after I have incurred a follow-up/routine M/R violation?

A system on reduced monitoring would not be required to return to original monitoring for incurring an M/R violation. A system's reduced monitoring only can be affected if:

1. The system exceeds the lead or copper action level. The system would then be required to collect and analyze the original or "standard" number of samples; or
2. The system fails to operate within its OWQPs. The system would be required to return to semiannual monitoring.

Similarly, a system which is granted a 9-year waiver would not be required to return to standard monitoring for incurring an M/R violation. The system's monitoring waiver can be revoked if the system no longer satisfies the monitoring criteria, materials criteria, and/or you notify them in writing that their waiver has been revoked. If you revoke the waiver, the system would be subject to corrosion control requirements and lead and copper monitoring as follows: if system does NOT exceed the action levels, it returns to a monitoring frequency of no less than once every three years and the reduced number of samples; if it DOES exceed the action level(s), it is required to implement corrosion control treatment and is subject to all applicable requirements in Section 141.86. See Section 141.86 for all lead and copper monitoring requirements.

Waiver renewals

- Systems are required to submit a re-certification that they are lead-free and/or copper-free every nine years, along with their lead and copper tap water results and 90th percentile calculations. States can require this information sooner.
- IF system still meets criteria, waiver is renewed automatically.

How Does a System Return to Compliance for this Violation?

A system will return to compliance (RTC) when it meets all appropriate M/R requirements as presented in Table 7, for **two consecutive** 6-month monitoring periods for follow-up monitoring and for the first set of routine monitoring requirements. A single violation should be reported for either condition after January 11, 2000. As with initial tap violations, previously reported violations data need not be modified to reflect a single violation. RTC data is required to be reported and linked to each violation. Those systems which have failed to complete 2 consecutive rounds of 6-month monitoring should be considered out of compliance from the end of the first violation for follow-up and enforcement activities. If a system has one or more violations which has not returned to compliance, regardless of whether it is the first, middle or last violation, it will be considered out of compliance by EPA.

Once a system is reduced to annual or triennial monitoring, or is granted a monitoring waiver, the system returns to compliance when it meets the monitoring requirements mentioned above during a subsequent round of monitoring which is conducted in the appropriate designated monitoring period.

Systems on reduced monitoring which changed their treatment or added a new source of water which fail to notify you within 60 days of making this change (or earlier if you require) would RTC when they provide the appropriate notification.

What Data Needs to be Reported for this Violation?

You should report the following data for each Follow-up or Routine Lead and Copper Tap M/R violation:

Follow-up or Routine Tap M/R Violation: Required Reporting	
DTF Data Element Number	Data Element Description
C101	PWS-ID
C1101	Violation ID
C1103	Contaminant Code = 5000 (SDWIS/FED defaults - may be reported by State)
C1105	Violation Type Code = 52
C1107	Violation Begin Date= the first day after the end of the designated monitoring period

**EXAMPLES FOR REPORTING
FOLLOW-UP OR ROUTINE LEAD AND COPPER TAP VIOLATIONS (52)**

The procedure for reporting follow-up or routine tap violations are the same as initial tap violations. The following examples focus on the new criteria which may lead to a follow-up or routine lead and copper tap violation.

EXAMPLE 1

A small system (HD0012345) has been granted a monitoring waiver. It had previously collected one round of samples for the compliance period July 1 to December 31, 1994. It is required to collect another round within 9 years, (by December 31, 2003), but fails to do so. You have designated the months of August through November as the months in which the levels would likely be the highest. The system would incur a 52 follow-up/routine lead and copper tap violation.

The violation non-compliance period begin date is the first day after the last month of the designated monitoring period and would be reported as December 1, 2003. This system would remain in violation until it takes the required number of samples, etc., during a subsequent August through November monitoring period. It conducts the required monitoring in 2004 and returns to compliance as of November 30, 2004.

By February 15, 2004, you would report a Follow-Up/Routine Lead and Copper Tap M/R violation as follows:

DTF Data Element Number	Data Value	Data Element Description
C101	HD0012345	PWS-ID
C1101	0400002	Violation ID
C1103	5000	Contaminant Code (SDWIS/FED Defaults - May be reported by State)
C1105	52	Violation Type Code
C1107	2003/12/01	Violation Begin Date

The DTF transactions for this violation are:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	HD0012345	0400002		I	C1103	5000		
D1	HD0012345	0400002		I	C1105	52		
D1	HD0012345	0400002		I	C1107	20031201		

Every nine years, a system which was granted a monitoring waiver is also required to re-certify that it meets the materials criteria for monitoring waivers. If it fails to do so, it would incur a follow-up/routine lead and copper tap M/R violation even if it conducted the monitoring. The begin date for the violation in the above example would be January 1, 2004. It would not return to compliance until the re-certification request was received. In this example this system would have two 52 violations, one beginning on December 1, 2003, and the other beginning on January 1, 2004.

Reminder: In both these examples, SDWIS/FED will default the violation/compliance period end date to December 31, 2015. When you report the RTC data and link it to the violations, SDWIS/FED will replace the defaulted end date with the RTC action date.

EXAMPLE 2

A system (DH0005678) on an annual compliance period (January through December) conducts its monitoring during the designated monitoring period of July through October 2001. It is required to collect 10 samples. The system submits these results and a request, with supporting documentation, for two samples to be invalidated on November 8, 2001. The State reviews the information and grants the system's request to invalidate the two samples in a letter which the system receives on December 15, 2001. The LCRMR require the system to collect replacement samples if they are needed to meet sampling requirements, within 20 days of the State's decision or by the end of the compliance period, whichever is later. In this example the deadline

would be January 4 (20 days after the State's decision). The system fails to collect these samples on time and incurs a routine lead and copper M/R violation. In addition, the system would then be required to collect a full set of samples in the next designated monitoring period before it would meet the RTC criteria.

By May 15, 2002, you would report a Follow-Up/Routine Lead and Copper Tap M/R violation as follows:

DTF Data Element Number	Data Value	Data Element Description
C101	DH0005678	PWS-ID
C1101	0200031	Violation ID
C1103	5000	Contaminant Code
C1105	52	Violation Type Code
C1107	2002/01/04	Violation Begin Date

EXAMPLE 3

A small system (NF0009876) is allowed to collect non-first draw samples from sites with the longest standing times, in accordance with its site sampling plan. It is on an annual compliance period (January to December 2002) with the standard designated monitoring period of June through September. The system fails to collect samples from the sampling sites with the longest standing times. It therefore incurs a follow-up/routine lead and copper tap M/R violation. By November 15, 2002, you would report a Follow-Up/Routine Lead and Copper Tap M/R violation with a violation begin date of October 1, 2002. This system would not be able to collect samples until the next annual period of June through September in 2003 in order to sample at the period of highest lead levels.

EXAMPLE 4

A NTNCWS (VD6123456) is a seasonal system (not open during the summer months) on annual monitoring. The system last submitted samples on July 7, 2001. On September 19, 2001, you notify the system that you have designated an alternate monitoring period of October to December. The LCRM require that monitoring be completed within a maximum of 21 months from the end of its current round of monitoring (September 30, 2001). Even though the system was notified on September 19, 2001 it would not be required to monitor in the October to December period of 2001, but rather the October to December period of 2002. It fails to monitor in the October to December period of 2002 and incurs a follow-up/routine lead and copper tap M/R. Note that the system does not actually have until June 30, 2003 to complete its monitoring. The violation begin date for the transition monitoring period is January 1, 2003. The earliest this system could RTC would be during the October to December period of 2003 when it has completed the required sampling and reported the results to you.

By February 15, 2003, you would report a follow-up/routine lead and copper tap M/R violation as follows:

DTF Data Element Number	Data Value	Data Element Description
C101	VD6123456	PWS-ID
C1101	0300005	Violation ID
C1103	5000	Contaminant Code
C1105	52	Violation Type Code
C1107	2003/01/01	Violation Begin Date

5.4.3 WQP M/R Violations

When are Initial, Follow-up, and Routine Tap and Entry Point WQP Monitoring Required?

The LCRMR do not change which systems are required to conduct WQP monitoring; however, they clarify that those systems which you deem to have optimized corrosion control under §141.81(b)(3) are not required to collect WQP samples. WQP monitoring is required for all large systems, except those meeting the (b)(3) criteria, and is required for medium and small systems for those compliance periods in which they exceed the lead or copper action level.

- Initial** WQP monitoring for large systems is conducted at each point of entry to the distribution system, and at selected taps within the distribution system, during the same 6-month sampling periods as initial tap sampling for lead and copper. For medium and small systems, it is performed during the initial six-month monitoring period in which the lead or copper action levels are exceeded, or during the first Follow-up or Routine lead and copper tap monitoring period in which the system exceeds the lead or copper action level. Under certain circumstances, medium and small systems which fail to monitor for WQPs during the compliance period in which they exceed lead or copper action levels are required to complete the WQP monitoring in the following compliance period before they may return to compliance. Examples of these circumstances are provided below.
- Follow-up** WQP monitoring is conducted at entry points, and at selected taps, during the two consecutive 6-month monitoring periods **AFTER** the installation of corrosion control treatment by all large systems, and only by medium and small systems if they continue to exceed the lead or copper action level after treatment is installed. These data are used by the State to review the performance of treatment and to modify the treatment or WQPs levels, as needed. During follow-up monitoring, the frequency of entry point monitoring changes from semi-annually to biweekly. The frequency for WQP tap monitoring remains at the semi-annual frequency. Under certain circumstances, systems which fail to monitor for WQPs during the compliance period in which they exceed lead or copper action levels are required to complete the WQP monitoring in the following compliance period before they may return to compliance. Examples of these circumstances are provided below.
- Routine** monitoring is performed after the State has set OWQPs. Routine monitoring at tap locations

is conducted during the same compliance period, and with the same frequency, as Routine lead and copper tap sampling as established by you. Monitoring may be conducted on a 6-month, annual, or triennial basis depending on whether the system qualifies to sample at a reduced monitoring frequency. For large systems, routine WQP tap monitoring is conducted every 6-month period; the first six-month period begins on the date the State specifies the optimal values under §141.82(f). A small or medium-size system that is subject to a reduced monitoring frequency for lead and copper tap sampling (§141.86(d)(4)) at the time of the action level exceedance, is required to monitor for tap WQPs before the end of the lead and copper tap compliance period. Entry point WQP monitoring is to be conducted every two weeks during that period.

For systems on reduced monitoring WQP tap sampling (routine annual, triennial, etc.) are to be evenly distributed throughout the entire compliance period (entire year, etc.). Entry point samples are to continue to be collected no less frequently than every 2 weeks.

When Does a WQP M/R Violation Occur?

The 1992 LCR reporting guidance required you to report separate types of WQP violations for initial WQP violations, follow-up or routine entry point WQP violations, and follow-up or routine tap WQP violations. These violations have been consolidated into a single violation type code = 53. Beginning January 14, 2000, you may report these violations using the violation type code of 53.

A new optional criterion has been added to WQP violations. Ground water systems can limit WQP monitoring to representative entry points if they demonstrate that these sampling points are representative of water quality conditions throughout the system, and they receive your prior approval. If you choose to allow this provision, you are required to incorporate it into your revised State drinking water regulations.

A WQP M/R violation would occur when any of the following WQP requirements are not met:

- Use appropriate sampling procedures in accordance with §§141.87(a)(1), (b)-(e);
- Collect required number of samples in accordance with §141.87(a)(2) or (e);
- Ensure samples are analyzed properly in accordance with §141.89(a);
- Submit all required monitoring information on time in accordance with §141.90(a); *or*
- If adopted, meet their State approved sampling plan for collecting WQPs at representative entry points in accordance with §§141.87(a)(5) and (c)(2).

How Does a System Return to Compliance for this Violation Type?

A system is considered to have returned to compliance if in a subsequent monitoring period it:

- collects WQP samples at each location where samples were not properly collected in accordance with §§141.87(a)(1), (2) & (b)-(d), or analyzed in accordance with §141.89(a); *and/or*
- reports the required information to the State in accordance with §141.90(a).

A large system is required to continue to monitor every 6-month period beginning from the day you designate the optimal water quality parameters. Therefore, it can not make up for missed samples and is required to complete all WPQ monitoring requirements in the following 6-month period before it may be returned to compliance.

For a medium or small system, WQP monitoring is only required during the period of lead and/or copper tap exceedance; however, because this information is required to evaluate the need for or effectiveness of CCT, one round of monitoring is required to be completed before the system is considered to be RTC. WQP tap and entry point samples are required to be taken in the next appropriate period as designated by you.

Number of WQP Tap Samples Per Parameter - Per Site		
System size (No. people served)	No. of sites for initial water quality parameters	No. of sites for reduced water quality parameters
>100,000	25	10
10,001-100,000	10	7
3,301 to 10,000	3	3
501 to 3,300	2	2
101 to 500	1	1
≤100	1	1

Number of Entry Point WQP Samples Per Parameter - Per Site		
System Size	Initial Number of Samples	Reduced Number of Samples
large	2 per entry point	1 per entry point (GW PWS at representative entry point sites)
medium/small	2 per entry point when exceeding lead and/or copper tap	1 per entry point when exceeding lead and/or copper tap (GW at representative entry point sites)

What Data Needs to be Reported for this Violation?

If the State has not adopted the new OWQP compliance procedure . . .

The reporting of begin and end dates remains unchanged from that described in the original LCR monitoring guidance (i.e., Lead and Copper Rule, Definitions and Federal Reporting for Milestones, Violations and SNCs, May 1992), except that SDWIS/FED can accommodate a WQP tap M/R violation with a compliance period of 36 months. Previously, SDWIS/FED accepted WQP tap M/R violations with a

compliance period of 6 or 12 months only.

Initial WQP M/R

For an initial WQP M/R violation, the begin date is the first day of the 6-month monitoring period in which the monitoring was required to be conducted and the end date is the last day of this period. If a system is out of compliance for both its entry point and tap WQP monitoring requirements during initial monitoring, only one violation is reported.

Follow-up/Routine WQP M/R and OWQP Noncompliance Violations

After corrosion control treatment has been installed, monitoring for tap and entry point WQPs occurs on different monitoring frequencies (i.e., entry point monitoring is biweekly, and tap WQP monitoring is semi-annual, annual, or triennial). In addition, the State may set OWQPs with which the system is required to comply.

Entry Point WQP Violations

All entry point WQP violations and OWQP noncompliance violations are quarterly violations. All entry point M/R violations that occur in one quarter are reported as one violation. Similarly, all entry point OWQP noncompliance violations that occur in a quarter are reported as one violation. If both M/R and OWQP noncompliance violations occur during the same quarter, both violation types are reported.

Tap WQP Violations

Tap WQP M/R and OWQP noncompliance violations are 6-month, 12-month, 36, or 108-month violations. A system can incur both a tap M/R and OWQP non-compliance violation during the same compliance period. In this event, two separate violations are reported (i.e., a separate 53 and 59 violation type).

If the State has adopted the new OWQP compliance procedure . . .

Compliance is based on a fixed 6-month period. The violation/compliance period begin date is the first day of the compliance period. The end date the last day of the compliance period. (Defaulted end dates are not used for WQP violations.) To simplify reporting, **any** combination of WQP noncompliance violations during a 6-month period will be reported as a **single** violation for that 6-month period. Similarly, one M/R violation is reported per 6-month period, regardless of whether the system incurred a violation at both a tap and entry point location.

Initial WQP M/R

An initial WQP M/R violation would occur before the State sets OWQPs. Therefore, the procedure for reporting this violation is the same whether or not the State adopts the new OWQP compliance procedure.

Follow-up/Routine WQP M/R and OWQP Noncompliance Violations

A 6-month fixed compliance period is used to report both entry point or tap WQP M/R violations. This change was made because the revised procedure for determining compliance with OWQPs is always based

on a 6-month period, regardless of the system's monitoring schedule (e.g., daily, biweekly, semi-annually, annually, triennially) or whether the WQP results are from an entry point or tap samples. The violation is specific to the 6-month period for which compliance with OWQPs is being determined. This means that if a system was on annual WQP tap monitoring and it did not conduct its monitoring, it would incur two, separate, 6-month violations. Similarly, if the system did not conduct its triennial WQP tap monitoring, it would incur six, separate, 6-month violations.

During reduced routine monitoring, if a large system failed to monitor for tap OWQPs during Jan - June 2001 as well as failed to monitor all entry points during the January - December 2001 period, you would report two separate 53 violations; one for the combined January - June entry point and tap violation and one for the July - December entry point violation.

A medium or small is only required to monitor WQP **IF** they exceed during the Lead or Copper tap monitoring period.. For any such small and medium-size system that is subject to a reduced [lead and copper tap] monitoring frequency pursuant to §141.86(d)(4) at the time of the action level exceedance, the end of the applicable six-month period under this paragraph shall coincide with the end of the applicable monitoring period under §141.86(d)(4).

The regulations establishes 6-month, annual and triennial monitoring periods. While the regulation does not specifically say it, the regulatory intent is that the sampling frequency for annual or reduced monitoring is to be 1 year apart for annual, 3 years apart for triennial, and 9 years apart for waivers. Reduced monitoring periods are to be performed during the designated 4-month monitoring period, 1, 3, or 9 years, from the previous designated monitoring period.

Under the LCR: The OWQP violation compliance period is described as a 1, 3, or 9 year period for OWQP tap violations (quarterly for entry point)

Under the LCRMR: Because medium and small systems are only required to monitor OWQPs during the compliance period in which lead and/or copper exceeds the action level(s), the OWQP M/R violation compliance period would apply only to the last 6-month period in the reduced monitoring period. Therefore a medium or small system would receive only ONE 6-month OWQP M/R violation for the entire 1, 3, or 9 year compliance period. Entry point and tap WQP sampling would occur during the same period and monitoring compliance would be determined for both as one violation. Large water systems would receive a violation for every 6-month period within the entire compliance period for which it failed to comply with all of the monitoring requirements.

Therefore, a medium or small system on triennial Lead and Copper tap monitoring (1/2000 - 12/2002) which has a June through September 2002 designated monitoring period, learns of his exceedance in August of 2002 and fails to conduct the WQP entry point monitoring at the required number of samples for all required sample sites between July and December 2002 would receive a 6-month M/R violation.

The following data would be reported for both WQP Tap and Entry Point initial, follow-up, or routine M/R

violations :

WQP M/R Violation: Required Reporting	
DTF Data Element Number	Description
C101	PWS-ID
C1101	Violation ID
C1103	Contaminant Code = 5000 SDWIS/FED will default or may be reported
C1105	Violation Type Code = 53
C1107	Compliance Period Begin Date = the first day of the compliance period
C1109, or	Compliance Period end date = 3, 6, 12, 36, or 108 months later than C1107
C1111	Compliance Period Duration = number of months in compliance period
Note: Either C1109 or C1111 is required for WQP M/R or TT violations	

EXAMPLES FOR REPORTING WQP VIOLATIONS (Code: 53)

EXAMPLE 1

LCR and LCRM Compliance:

A new water system serving 10,000 people completes the first round of initial lead and copper tap monitoring by December 31, 1992 and **does not exceed** the lead or copper action level. The system **does not** collect WQP samples during this sampling period.

Unlike large systems, medium and small systems are only required to conduct WQP testing in those compliance periods in which they exceed the lead or copper action level. In this example, the system has not incurred a WQP violation because it did not exceed an action level, and therefore was not required to test for WQPs.

EXAMPLE 2

Another new medium-sized system (AX0003456) completes initial lead and copper tap sampling by December 31, 2001 and exceeds the copper action level. On January 1, 2002, the system begins collecting WQPs and the State receives these results on April 1, 2002.

LCR and LCRM Compliance:

The system is in violation because it is required to complete the WQP monitoring during the same compliance period as lead and copper tap monitoring (in this example, from July 1 - December 31, 2001). Medium and

small systems should complete tap sampling early enough in the compliance period to allow them to conduct WQP monitoring and reporting in the event they exceed an action level. The system is now triggered into CCT actions. However, because the system collected the WQP samples in the subsequent monitoring period, it has returned to compliance on April 1, 2002.

By February 15, 2002, the State would report:

DTF Data Element Number	Data Value	Data Element Description
C101	AX000345	PWS-ID
C1101	6	Violation ID
C1103	0200011	Contaminant Code (SDWIS/FED defaults - May be reported)
C1105	5000	Violation Type Code
C1107	53	Compliance period begin date
C1109 or	2001/07/01	Compliance period end date
C1111	2001/12/31	Compliance period duration
	006	

The DTF transactions for this violation are:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	AX0003456	0200011		I	C1103	5000		
D1	AX0003456	0200011		I	C1105	53		
D1	AX0003456	0200011		I	C1107	20010701		
D1	AX0003456	0200011		I	C1109	20011231		

By August 15, 2002 you would report the RTC information to SDWIS/FED.

EXAMPLE 3

A large system (MS0003456) fails to collect any follow-up entry point samples from January 1 to May 31, 2002. Follow-up and routine entry point monitoring is to be conducted at least every two weeks.

LCR Compliance:

Entry point follow-up compliance is determined quarterly. Two type 53 violations would be reported; January 1, through March 31 for failure to take any samples, and April 1, through June 30, for failure to take all required samples.

LCRMR Compliance:

Compliance is determined on a 6-month fixed period. A single violation is reported for each 6-month period

in which one or more entry point sampling events were not conducted in accordance with §§141.87, 141.89, and 141.90. In this example, the system collected the WQP samples during the July 1 - December 2001 period but failed to meet the biweekly sampling requirements for 5 of the 6 months during the January 1 - June 30, 2002 period. Because violations are determined for the 6-month period, you would report one violation for that period by August 15, 2002.

Further, the system is required to sample for an additional 6 months (July through December of 2002) to provide 2 consecutive 6 month periods of WQP data on which the State can make a decision regarding optimal WQP values or ranges. An exception to this requirement would be a small or medium system that is no longer required to install OCCT because it meets the lead and copper action levels for two consecutive compliance periods.

EXAMPLE 4

A large system (MA0003456) fails to collect any routine entry point samples during July and August 2002. In this example, under LCRMR compliance, the system would incur a violation for the 6-month period, July 1 - December 31, 2002, and you would report a type 53 violation by February 15, 2003. Under LCR compliance, this system would incur a violation for the 3-month (quarterly) period, July 1, through September 30, 2002.

For large systems, except (b)(3) systems, routine WQP monitoring occurs for the lifetime of the system. Unlike initial and follow-up sampling that occur for a limited period of 12 months each (two consecutive 6-month periods), a system cannot make up the 2 months of missed samples for routine entry point WQP monitoring. Therefore, a system will return to compliance for routine entry point WQP monitoring if it successfully monitors and reports for the entire next 6-month period.

EXAMPLE 5

A medium system (VT1003356) conducts routine lead and copper tap sampling and exceeds the lead action level for the compliance period July 1 - December 31, 2000. The system does not collect any entry point WQP samples during this compliance period. The system completes the next round of lead and copper tap sampling from January 1 - June 30, 2001, and no longer exceeds the lead action level.

Medium and small systems are only required to collect entry point WQP samples in the same compliance period(s) in which they exceed an action level. In this example, the system failed to collect biweekly samples. Under LCR compliance, 2 quarterly monitoring violations would be reported for the July through September and October through December periods. Under LCRMR one routine OWQP violation for the compliance period July 1 - December 31, 2000 would be reported by February 15, 2001.

The system is not in violation for failure to collect WQP samples during January 1 - June 30, 2001, because it did not exceed the lead or copper action level. On the other hand, a system should bear in mind that if it does not start WQP sampling at the beginning of the lead and copper tap monitoring period and waits for the lead and copper monitoring results, it risks missing some of the required biweekly monitoring should the

results exceed the action level and incur a routine WQP monitoring violation.

For a medium or small system, the system is considered to have returned to compliance when it successfully monitors and reports for one compliance period.

EXAMPLE 6

A system, (NB6003356) is on semi-annual routine tap WQP M/R and does not collect any entry point or tap WQP from July 1 - December 31, 2003.

LCR Compliance:

Because entry point WQP compliance is determined quarterly and no biweekly samples were taken during either quarter, two type 53 violations would be reported; July - September, and October - December. In addition, one type 53 violation would be reported for the 6-month tap violation; July - December. In this example, three type 53 violations with different compliance periods would be reported.

LCRMR Compliance:

Because tap and entry point WQP M/R violations are no longer reported separately, by February 15, 2004, a single violation would be reported for the July 1 - December 31, 2003 period.

EXAMPLE 7

A large system (TN1103356) did not collect some of its biweekly OWQP samples at its entry points during January 1 to June 30, 2004. In addition, this system is on annual OWQP tap monitoring and failed to collect any OWQP tap samples during January 1 to December 31, 2004. The designated monitoring period for tap lead and copper is the standard June through September 2004.

LCR:

Two quarterly WQP entry point monitoring violations would be reported; one for January - March, and one for April - June. In addition, one annual WQP tap monitoring violation would be reported for the January - December violation.

LCRMR:

Two 53 violations would be reported for this system. One violation for January through June which covers both tap and entry point OWQP violations and one violation for the July through December tap OWQP violations.

By August 15, 2004, you would report the following for the January - June entry point and tap WQP violations:

DTF Data Element Number	Data Value	Data Element Description
C101	TN1103356	PWS-ID
C1101	0400001	Violation ID
C1103	5000	Contaminant Code (SDWIS/FED defaults - May be reported)
C1105	53	Violation Type Code
C1107	2004/01/01	Compliance period begin date
C1109 or	2004/06/30	Compliance period end date
C1111	006	Compliance period duration in months

By February 15, 2005, you would report a second WQP M/R violation for the July through December tap WQP violation:

DTF Data Element Number	Data Value	Data Element Description
C101	TN1103356	PWS-ID
C1101	0500001	Violation ID
C1103	5000	Contaminant Code (SDWIS/FED defaults - May be reported)
C1105	53	Violation Type Code
C1107	2004/07/01	Compliance period begin date
C1109 or	2004/12/31	Compliance period end date
C1111	006	Compliance period duration

EXAMPLE 8

A large system (TN1103356) on reduced annual monitoring fails to collect any OWQP tap samples during July 1, 2003 - June 30, 2004. In this example, the system missed the sampling requirements for one 12-month compliance period (July 1, 2003 to June 30, 2004).

LCR:

One routine 12 month WQP tap violation would be reported by August 15, 2004. The compliance period begin date is July 1, 2003 and the compliance period end date is June 30, 2004.

LCRMR:

Two routine WQP tap violations would be reported. The first by February 15, 2004 and the second by August 15, 2004. Each violation covers a 6-month period.

A system on triennial monitoring which fails to collect any WQP tap samples from July 1, 2004 to June 30, 2007 would incur the following violations:

- a large system would incur a 53 violation for every 6-month period it failed to sample because it is required to distribute the WQP sampling throughout the entire three year compliance period.

- a medium or small system would incur a single 53 violation for the last 6 month period to coincide with the designated lead and copper tap monitoring period. Remember, the medium and small system's WQP monitoring period is to coincide with the system's lead and copper tap sampling period. Therefore, it would only receive one WQP M/R violation for the latest July through December period which is July through December 2006 in this example. There is no requirement to monitor in the January through June 2007 period. However, in order for this system to return to compliance, it is required to monitor in the next compliance period as designated by you in 2007.

5.4.4 Lead and Copper Source Water M/R

When is Lead and Copper Source Water Monitoring Required?

Any system which exceeds the lead or copper action level is required to perform source water monitoring **within six months of the exceedance** at all entry points to the distribution system to determine if source water concentrations of lead or copper contributed to the exceedance, and thus, source water treatment (SOWT) is needed. The sample location, collection methods, and number of samples required is the same as for Phase II/V contaminants. Ground water systems are required to take at least one sample at every entry point to the distribution system which is representative of each well after treatment. Surface water systems are required to take at least one sample at every entry point to the distribution after the application of treatment or in the distribution system at a point which is representative of each source after treatment. Compositing is also allowed under the LCR. Systems are also required to provide to the State a source water treatment recommendation with their source water monitoring results; no treatment may also be a recommendation. A systems is required to install source water treatment within 24 months of State's decision to install treatment. Failure to do so is a treatment technique violation.

- **Initial** monitoring: is conducted at each entry point to the distribution system within six months after the lead and copper tap action level is exceeded.
- **Follow-up** monitoring: lead and copper tap samples and source water samples are required to be collected during two, consecutive 6-months immediately following the installation of treatment. This is to be completed no later than 36 months after the State determines the type of source water treatment to be installed.
- **Routine** monitoring is performed after the State specifies maximum permissible source water levels (MPLS) for lead and copper, or determines that SOWT is unnecessary. Systems using ground water as their only source are required to monitor during 3-year compliance periods. These are the same compliance periods that were established under the Standardized Monitoring Framework (SMF) for Phase II/V contaminants (e.g., 1993 - 1995, 1996 - 1998, 1999 - 2001, 2002 - 2004, etc.). Therefore, systems can coordinate their source water monitoring for lead and copper with other monitoring requirements. Systems using surface water or surface water combined with ground water are required to monitor annually. The first annual monitoring period begins on the date that the State

determined the type of treatment to be installed or that no treatment was required.

- **Reduced Monitoring:** qualified systems can reduce the frequency of monitoring to once every 9 years. The 9-year schedule also follows the 9-year monitoring cycle established under the SMF. A ground water system qualifies for reduced monitoring if it does not exceed either the lead or copper MPL for 3 consecutive, 3-year compliance periods (equals 9 years). A surface water system or system using a combined source can qualify for 9-year monitoring if they do not exceed either MPL for 3 consecutive years.

Ground water and surface water systems which you determine do not require source water treatment may be reduced to once every 9 years after completion of 3 consecutive compliance periods of monitoring with concentrations of lead in the source water being less than or equal to 0.005 mg/L and the concentration of copper in the source water being less than or equal to 0.65 mg/L. The begin date for the compliance period is the date you make the determination that source water treatment is not required.

When Does a Lead and Copper Source Water M/R Violation Occur?

Initial, follow-up, or routine source water sampling for lead and copper violations are required to be reported for each PWS that fails to complete the following activities, for each compliance period in which the violation occurs:

- Using the appropriate sampling procedures in accordance with §§141.88(a)(1) and (2);
- Collecting the required number of source water samples in accordance with §§141.88(a)(1) - (e);
- Ensuring samples are analyzed properly in accordance with §141.89(a); *or*
- Submitting all required sampling information on time in accordance with §141.90(b).

Reminder: Lead and Copper source water monitoring is only required when the lead or copper tap action levels are exceeded.

Once a system exceeds either the lead or copper action level, it is always subject to source water monitoring requirements. However, a system is not required to collect any source water samples if its 90th percentile lead or copper level does not exceed the action level during the entire source water monitoring period in effect (e.g., 6-month, annual, triennial, or 9-year period).

For example, a system qualifies for reduced source water monitoring for the compliance cycle of 2002-2010. During this time period, the system is on triennial lead and copper tap monitoring. It conducts lead and copper tap monitoring during 2001-2003, 2004-2006, 2007-2009, and 2010-2012. Both the lead and copper 90th percentile levels are below the lead and copper action levels for all three monitoring periods. The system is not required to conduct source water monitoring.

NOTE: Once a system qualifies for reduced monitoring, it is not required to return to standard monitoring. In other words, an additional exceedance of an action level or of an MPL has no impact on a system’s reduced source water monitoring schedule.

How Does a System Return to Compliance for this Violation Type?

A system is considered to have returned to compliance if in a subsequent monitoring period it:

- Collects source water samples at each location where samples were not properly collected in accordance with §§141.88(a)-(e), or analyzed in accordance with §141.89(a); *and/or*
- Reports the required information to the State in accordance with §141.90(b).
- Because a system is only required to conduct source water monitoring when it exceeds the lead and/or copper tap action levels, if it is below both action levels during the entire source water monitoring period in effect, it would be considered in compliance without taking any source water samples after receiving a source water monitoring violation. In this case, we recommend “S06/E06 - Intentional No Action Required” be reported, rather than “SOX/EOX - Compliance Achieved (RTC)” because the system did not actually complete its monitoring. However, either action is acceptable.

What Data Needs to be Reported for this Violation?

The same violation type code is used (i.e., 56) for the reporting of initial, follow-up, and routine source water sampling violations. The violation begin date is reported as the first day after the monitoring requirement is missed. Initial source water monitoring is to be conducted within 6 months after the exceedance (or the end of the designated monitoring period for lead and copper tap monitoring). If the designated tap monitoring period was January through June 2002, the source water monitoring period would be July through December and the violation begin date would be January 1, 2003. If the designated tap monitoring period was March through August 2003, the source water monitoring period would be September through February 2004 and the violation begin date would be March 1, 2004. No violation period end date is reported by you. SDWIS/FED will generate a default date of December 31, 2015. When you report the returned to compliance (RTC) data, SDWIS/FED will replace the defaulted end date with the RTC date.

A single violation will represent the single 6-month initial compliance period, the 2 consecutive 6-month follow-up compliance period (as with Initial Tap lead and copper monitoring), each subsequent routine annual or triennial period for surface source systems, and each subsequent routine triennial period for ground water only systems as well as the 9 year period.

You would report the following data for each Source Water Sampling violation:

Initial, Follow-up, or Routine Source Water M/R: Required Reporting	
DTF Data Element Number	Description

Initial, Follow-up, or Routine Source Water M/R: Required Reporting	
C101	PWS-ID
C1101	Violation ID
C1103	Contaminant Code = 5000 (Defaulted by SDWIS/FED, May be reported by State)
C1105	Violation Type Code = 56
C1107	Violation Begin Date = the first day after the designated monitoring period

Reminder: C1109 - Violation/Compliance Period End Date and/or C1111 Violation/Compliance Period Duration is NOT reported for these violations.

**EXAMPLES FOR REPORTING
SOURCE WATER MONITORING VIOLATIONS (Code: 56)**

EXAMPLE 1

A new system (PA1103666) exceeds the copper action level during its first round of initial lead and copper tap monitoring (i.e., January 1 - June 30, 2000) and fails to collect source water samples within six months of exceeding an action level, or by December 31, 2000 in this example. The violation begin date is January 1, 2001.

By May 15, 2001, you would report the following:

DTF Data Element Number	Data Value	Data Element Description
C101	PA1103666	PWS-ID
C1101	0100001	Violation ID
C1103	5000	Contaminant Code (SDWIS/FED Defaults - May be reported)
C1105	56	Violation Type Code
C1107	200101/01	Violation Begin Date

The DTF transactions for this violation are:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	PA1103666	0100001		I	C1103	5000		
D1	PA1103666	0100001		I	C1105	56		

D1	PA1103666	0100001		I	C1107	20010101		
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To achieve compliance, the system is required to fulfill the monitoring and reporting requirements in accordance with §§141.88(a)(1) and 141.89, and 141.90(b) for one six-month compliance period. When the required monitoring is completed and reported to you, you would report the enforcement/follow-up action RTC (SOX/EOX) record and link it to this violation as described in previous examples. SDWIS/FED will then replace the defaulted end date of 12/31/2015 with the date of the RTC action data.

EXAMPLE 2

A system (MD0103666) installs SOWT on April 30, 2001 and collects the first round of follow-up source water samples but does not collect the second round of source water samples.

All systems, required to install SOWT, are required to collect follow-up source water samples during **two** consecutive six-months compliance periods which begin with the installation of SOWT, to provide data on which States can set MPLs for lead and copper in source water. In this example, the system is in violation for failure to collect follow-up samples during the compliance period May 1 - October 31, 2002.

By February 15, 2003, you would report the following MPL M/R violation with the begin date of November 1, 2002.

DTF Data Element Number	Data Value	Data Element Description
C101	MD0103666	PWS-ID
C1101	0300029	Violation ID
C1103	5000	Contaminant Code (SDWIS/FED Defaults - May be reported)
C1105	56	Violation Type Code
C1107	2002/11/01	Violation Begin Date

If this system had collected the first 6-month samples but failed to collect the 2nd consecutive 6-month round (November-April 2002) the violation begin date would be May 1, 2002. The system takes a round in the May - October 2002 period, however if fails to collect the second consecutive 6 month round, again. As with Initial Tap lead and copper monitoring, a single violation will represent the entire period from this system’s first missed round (May 1, 2002) through the date it completes 2 consecutive 6-month rounds. You should not report the RTC (SOX/EOX) action data until the system completes 2 consecutive 6-month rounds of source water monitoring.

EXAMPLE 3

A system with a ground water source (DE0103666), on a three year compliance period, does not collect any source water samples (routine) for the compliance period January 1, 2005 - December 31, 2007.

Once a system installs SOWT, it is not required to collect source water samples for lead and/or copper, **unless** its 90th percentile lead and copper levels exceed the action levels. If during any lead and copper tap monitoring conducted during an effective source water compliance period (in this example from January 1, 2005 - December 31, 2007 compliance cycle), the action level(s) are exceeded, the system is required to collect source water samples. Assume the system exceeded the copper action level during the tap compliance sampling period of January 1, 2005 - December 31, 2007. The designated monitoring period is June through September 2007. The copper action level exceedance occurs during the source water compliance period; therefore, the system would be in violation for failure to sample for copper in source water during the same compliance period. The violation begin date would be January 1, 2008.

By May 15, 2008, you would report:

DTF Data Element Number	Data Value	Data Element Description
C101	DE0103666	PWS-ID
C1101	08600031	Violation ID
C1103	5000	Contaminant Code (Defaulted by
C1105	56	SDWIS/FED)
C1107	2008/01/01	Violation Type Code
		Violation Begin Date

If the system had exceeded both the lead and copper action level, it would be required to sample for both contaminants in source water. Failure to conduct source water sampling in this case would not be treated as two violations but as a **single** violation.

Note: Unlike tap monitoring for lead, copper or WQPs, a system on **source water** reduced monitoring is never required to return to its original monitoring schedule, regardless of whether it properly monitors and reports or meets State-specified or approved MPLs.

EXAMPLE 4

Another ground water system, on a nine-year monitoring cycle, does not collect any source water samples for the compliance cycle, January 1, 2002 - December 31, 2010. The system is on triennial monitoring for lead and copper tap monitoring. During the triennial tap compliance period January 1, 2009 - December 3, 2011, the system exceeds the copper action level. The following bullets summarize the system's schedule and lead and copper tap monitoring results:

- 9-year source water monitoring cycle of 1/1/02 - 12/31/10
- triennial lead and copper tap monitoring schedule and results
 - 1/1/00 - 12/31/02: Pb 90th = 0.006 mg/L; Cu 90th = 1.1 mg/L
 - 1/1/03- 12/31/05: Pb 90th = 0.007 mg/L; Cu 90th = 1.0 mg/L

1/1/06 - 12/31/08: Pb 90th = 0.006 mg/L; Cu 90th = 1.2 mg/L

1/1/09 - 12/31/11: Pb 90th = 0.007 mg/L; Cu 90th = 1.5 mg/L

Remember: Source water monitoring periods are to coincide with the following Phase II/V Standardized Monitoring Framework schedule:

Compliance Cycle 1	Compliance Cycle 2	Compliance Cycle 3
1/1/93 - 12/31/95	1/1/02 - 12/31/04	1/1/11 - 12/31/13
1/1/96 - 12/31/98	1/1/05 - 12/31/07	1/1/14 - 12/31/16
1/1/99 - 12/31/01	1/1/08 - 12/31/10	1/1/17 - 12/31/19

The system exceeded the copper action level during the tap monitoring compliance period of Jan. 2009 to Dec. 2011, but did not have exceedances in any of the prior monitoring periods. If the system collected the tap samples during 2009, the exceedance would occur during the 9-year source water compliance period of January 1, 2002 - December 31, 2010, and therefore, source water sampling would be required. Because this system did not take any source water samples during this period, you would report a violation with a begin date of January 1, 2011.

If the tap samples were collected during 2011 which resulted in the exceedance of the action level, the system would be required to collect source water samples during the January 1, 2011 - December 31, 2019 source water compliance cycle. The system would not be in violation for having taken no samples for the 2002 through 2010 source water compliance cycle.

5.5 Treatment Technique Violations

Treatment technique (TT) violations can be incurred for failure to meet the requirements for OCCT, SOWT, Public Education, and LSLR. Under the LCR, a total of 9 types of treatment technique violations were required to be reported. We have consolidated these 9 violation types into 6 violation types as follows:

- Treatment Study/Recommendation (OCCT/SOWT)
- Installation/Demonstration (OCCT/SOWT)
- Water Quality Parameter (WQP) Noncompliance (Entry Point/Tap)
- Maximum Permissible Level (MPL) Noncompliance
- Lead Service Line Replacement (LSLR)
- Public Education

Under the LCRMR, compliance determinations for all treatment technique violations except WQP Noncompliance violations remain the same as under the LCR. However, reporting of the compliance period begin and end dates for ALL treatment techniques violations has changed. WQP Noncompliance is discussed separately.

For the remaining treatment technique violations the compliance period end date is not reported by you, but is defaulted by SDWIS/FED with a date of December 31, 2015. When an RTC is reported for this violation, SDWIS/FED will replace the RTC date for the defaulted compliance period end date. The violation begin date is defined as the first date after the requirement was due. This method of reporting will more accurately portray the actual length of time the system is in violation.

Under the LCRMR an alternative method for determining WQP Noncompliance is provided. Under this method compliance is determined on a fixed 6 month compliance period and is reported with the compliance period begin and end dates. Noncompliance is determined on the number of both entry point and tap WQP “daily average” values which do not meet their designated limit value or range.

We have provided definitions for each treatment technique violation and provide discussions with examples of how to report the violation to SDWIS/FED.

5.5.1 Optimal Corrosion Control Treatment (OCCT) Study/ Recommendation

When is an OCCT Study/Recommendation Required?

All large systems were required to conduct corrosion control evaluations or studies beginning January 1, 1993, except for those systems that are deemed to have optimized corrosion control under §§141.81(b)(2) or (b)(3). With the completion of the study (i.e., by June 30, 1994), the system is required to make a recommendation on the type of corrosion control treatment to be installed.

Medium and small systems exceeding the lead or copper action levels are required to make a recommendation regarding the treatment to be installed within six months after the action level exceedance, unless they have been deemed to have optimized corrosion control (i.e., they are below the lead and copper action levels for two consecutive monitoring periods, or meet the criteria of §§141.81(b)(2) or (b)(3)). In addition, the State **may** require medium and small systems to conduct corrosion control studies. A recommendation is required for the State to determine if a study will be required. Therefore, medium and small systems are in violation of this requirement when they fail to make their recommendation within 6 months of the action level exceedance even if the State requires them to do a study and a recommendation may be included in that study.

If you decide to make the recommendation on behalf of the medium and/or small systems and fail to do so within 6 months of the action level exceedance a recommendation violation is to be issued and reported because a specific regulation requirement was not met.

When does an OCCT Study/Recommendation Violation Occur?

An OCCT Study/Recommendation violation is to be reported for a system that fails to provide or complete the following:

- Submit an OCCT recommendation on time in accordance with §§141.82(a) and 141.90(c)(2);
- Submit an “acceptable” study on time in accordance with §§141.82(c) and 141.90(c)(3); **or**
- Provide information needed by the State to make an OCCT determination in accordance with §141.82(d)(2).

NOTE: An “acceptable” study meets the requirements of §141.82(c) and needs only minor clarification(s), if any, to be useful to you in making its OCCT determination.

A violation for OCCT recommendation is reported for those medium and small systems that fail make their recommendation within 6 months after the end of the compliance period in which the lead or copper action level was exceeded.

A violation for OCCT study is reported for:

- Large systems that fail to meet the OCCT study requirements by June 30, 1994;

- Medium or small systems that do not meet the study requirements within 18 months from the date you notify them that they are required to conduct a study.

How Does a System Return to Compliance for this Violation Type?

A system is considered to have returned to compliance when the following criteria are met:

- Submits the OCCT recommendation in accordance with §§141.82(a) and 141.90(c)(2);
- Completes and submits an OCCT study to the State which meets the requirements of §§141.82(c) & 141.90(c)(3); *or*
- Provides additional information to the State which is needed to make an OCCT decision in accordance with §141.82(d)(2).
- System serves ≤ 50,000 people and is below both action levels during 2 consecutive monitoring periods after incurring this violation. *Note:* In this case, we recommend “SO6/EO6 - Intentional No Action Required” would be reported, rather than “RTC”. Either action is acceptable.

What Data Needs to be Reported for this Violation?

The violation begins on the first day after the event or requirement was due. Therefore, if the recommendation was due by December 31, 2002 (six months after the lead exceedance in the January 1 - June 30, 2002 monitoring period), the violation begin date is January 1, 2003. SDWIS/FED will provide a defaulted end date of December 31, 2015. As mentioned above, this method more accurately describes the actual period the system was out of compliance. Compliance period end date (C1109) and compliance period duration (C1111) may not be reported by the State. When the system meets the recommendation requirements and you submit the return to compliance data, SDWIS/FED will replace the defaulted end date with the RTC date.

You should report the following for each OCCT Study/Recommendation violation:

OCCT Study/Recommendation Violation: Required Reporting	
DTF Data Element Number	Description

C101	PWS-ID
C1101	Violation ID
C1103	Contaminant Code = 5000 (SDWIS/FED Defaults - May be reported by State)
C1105	Violation Type Code = 57
C1107	Violation Begin Date for:
	<ul style="list-style-type: none"> • OCCT Recommendation: <ul style="list-style-type: none"> - Large systems = Not applicable as it is required as part of the Study - Medium/Small systems = 1st day after the event or requirement was due (i.e., within 6 months after the end of the compliance period in which the Pb or Cu action level was exceeded) • OCCT Study <ul style="list-style-type: none"> - Large systems = 7/1/1994 - Medium/Small systems = 18 months + 1 day after the date of State letter to system requiring a study be conducted.

Note: C1103 Contaminant Code = 5000 (May be reported by the State)
C1109 Violation period end date = December 31, 2015 (May **NOT** be reported by the State)
C1111 Violation duration = NO Default - (May **NOT** be reported by State)

EXAMPLES FOR REPORTING OCCT STUDY/RECOMMENDATION VIOLATION (Code: 57)

EXAMPLE 1

In a letter dated September 10, 2001, the State notifies a medium system (RI0103644) that it is required to conduct an OCCT study. The system conducts the study in accordance with §141.82(c), but does not submit the study within the required 18 months (by March 9, 2003 in this example). The State receives the study from the system on September 10, 2003, 6 months late. The violation begin date is March 10, 2003.

By May 15, 2003, you would report an OCCT Study/Recommendation Violation for the system as follows:

DTF Data Element Number	Data Value	Data Element Description
C101	RI0103644	PWS-ID
C1101	0300031	Violation ID
C1103	5000	Contaminant Code (SDWIS/FED Defaults - May be reported)
C1105	57	Violation Type Code
C1107	2003/03/10	Violation Begin Date

The DTF transactions for this record are:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
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Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	RI0103644	0300031		I	C1103	5000		
D1	RI0103644	0300031		I	C1105	57		
D1	RI0103644	0300031		I	C1107	20030310		

Receipt of the study by the State on September 20, 2003 “returns this system to compliance” for this violation. SDWIS/FED will replace the defaulted compliance period end date of December 31, 2015 with the RTC date of September 20, 2003. By November 15, 2003 you would report the following enforcement/follow-up action with the enforcement to violation link information (this example displays the Y5000 Violation ID link method):

Enforcement/Follow-up RTC Data:

DTF Data Element Number	Data Value	Data Element Description
C101	RI0103644	PWS-ID
C1201	03000111	Enforcement ID
C1203	SOX	Enforcement/Follow-up Action Code
C1205	2003/09/20	Enforcement/Follow-up Action Date
Y5000	0300031	Y5000 Link method (links the Enforcement/Follow-up Action by violation ID)

The DTF transactions for this enforcement/follow-up action record are:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
E1	RI0103644	03000111		I	C1203	20030920		
E1	RI0103644	03000111		I	C1205	SOX		
E1	RI0103644	03000111		I	Y5000	0300031		

Note: A large system which is required to conduct a study, but fails to complete the study or make an OCCT recommendation, would not incur a separate OCCT recommendation violation because the recommendation is a required component of the study. However, because a medium or small water system is required to make a recommendation and is required to conduct a study only if the State specifically requires one, a medium or small water system would receive a separate violation for each requirement if both requirements were individually violated.

EXAMPLE 2

A medium-sized system submits the results of the study to the State within the required 18-month period, or by June 9, 2003 in this example. However the system evaluated the effectiveness of only one of the three types of corrosion control treatments that were required to be evaluated. By August 15, 2003, the State would report a corrosion control study violation because the study was incomplete. The compliance period begin date to be reported is June 10, 2003.

This system modifies its study and includes the other types of corrosion control treatments and delivers it to the State on September 25, 2003. By November 15, 2003, you would report an RTC enforcement/follow-up action with an action date of September 25, 2003 and the data which is required to link the action to the violation. SDWIS/FED will replace the defaulted compliance period end date of December 31, 2015 with the RTC date of September 25, 2003.

The following violation and enforcement/follow-up data is to be reported:

DTF Data Element Number	Data Value	Data Element Description
C101	PU0103644	PWS-ID
C1101	0300033	Violation ID
C1103	5000	Contaminant Code (Defaulted by SDWIS/FED)
C1105	57	Violation Type Code
C1107	2003/06/10	Violation Begin Date

The DTF transactions for this violation record are:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	PU0103644	0300033		I	C1103	5000		
D1	PU0103644	0300033		I	C1105	57		
D1	PU0103644	0300033		I	C1107	20030610		

Enforcement/Follow-up RTC Data:

DTF Data Element Number	Data Value	Data Element Description
C101	PU0103644	PWS-ID
C1201	03000121	Enforcement ID
C1203	SOX	Enforcement/Follow-up Action Code
C1205	2003/09/25	Enforcement/Follow-up Action Date
Y5000	0300033	Y5000 Link method (links the Enforcement/Follow-up Action by violation ID)

The DTF transactions for this enforcement/follow-up action record are:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
E1	PU0103644	03000121		I	C1203	20030925		
E1	PU0103644	03000121		I	C1205	SOX		
E1	PU0103644	03000121		I	Y5000	0300033		

EXAMPLE 3

A medium system (WV0163644) exceeds the lead action level during the compliance period January 1, 2000 to December 31, 2002. The State does not require the system to conduct a study and the system does not submit an OCCT recommendation to the State by June 30, 2003 as required (i.e., within six months of exceeding an action level). The system would incur a violation because it is required to recommend OCCT to the State, even though it was not required to conduct a study. The violation would be reported by August 15, 2003, with a compliance period begin date of July 1, 2003.

5.5.2 Source Water Treatment (SOWT) Recommendation

Under the LCRMR, compliance determination remains the same as under the LCR. However, we have changed noncompliance portrayal as follows: the violation code for reporting a SOWT recommendation violation is combined with the OCCT violation code 57, the violation begins the day after the missed requirement is due, the violation end date is not reported by you as SDWIS/FED defaults the 12/31/2015 date, which is replaced by the RTC action date when you report and link the enforcement/follow-up action data.

When is an SOWT Recommendation Required?

Any system exceeding the lead or copper action level is required to complete source water monitoring, and make a treatment recommendation to the State, within six months after exceeding the action level in accordance with §§141.83(a)(1) and (b)(1), and §141.90(d)(1).

When Does a Treatment Study/Recommendation (SOWT) Violation Occur?

An SOWT recommendation violation is to be reported for any system that fails to submit an SOWT recommendation to you within 6-months of the end of the compliance period in which the lead or copper action level exceedance occurred.

How Does a System Return to Compliance for this Violation Type?

A system is considered to have returned to compliance when the system provides a SOWT recommendation, even if the recommendation is that no source water treatment is required.

What Data Needs to be Reported for this Violation?

The following data should be reported for all SOWT treatment recommendation violations:

SOWT Treatment Recommendation Violation: Required Reporting	
DTF Data Element Number	Description
C101	PWS-ID
C1101	Violation ID
C1103	Contaminant Code = 5000 (SDWIS/FED defaults - May be reported by State)
C1105	Violation Type Code = 57
C1107	Violation Begin Date = the date after the SOWT Recommendation was due (6 mos plus a day after the compliance period/designated monitoring period in which the exceedance occurred)

EXAMPLES FOR REPORTING SOWT RECOMMENDATION VIOLATION (Code: 57)

EXAMPLE 1

A system (AZ0063633) exceeds an action level, for the first time, in monitoring conducted during the compliance period January 1 - December 31, 2000. By June 30, 2001, the system completes initial source water monitoring but does not make a SOWT recommendation to the State. A SOWT recommendation violation would be reported by November 15, 2001 with a compliance period begin date of July 1, 2001.

By November 15, 2001, you would report:

DTF Data Element Number	Data Value	Data Element Description
C101	AZ0063633	PWS-ID
C1101	0100001	Violation ID
C1103	5000	Contaminant Code (Defaulted by SDWIS/FED)
C1105	57	Violation Type Code
C1107	2001/07/01	Violation Begin date

The DTF transactions for this record are:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch

D1	AZ0063633			I	C1103	5000		
D1	AZ0063633			I	C1105	57		
D1	AZ0063633			I	C1107	20010701		

5.5.3 Optimal Corrosion Control Treatment (OCCT) Installation/ Demonstration

When is OCCT Installation/Demonstration Required?

Each system requiring corrosion control treatment is to complete proper installation of this treatment, and submit a certification to you that this treatment is properly installed and operating, within 24 months of you designating the appropriate treatment to be installed. In addition, any system may be deemed to have optimized corrosion control by you, if the system meets the requirements specified in §§141.81(b)(1)-(3). For specific details regarding applicability of corrosion control treatment steps and deadlines for large systems see Section 141.81(d)(1-7), and Section 141.81(e)(1-8) for medium and small systems.

When Does an OCCT Treatment Installation/Demonstration Violation Occur?

An OCCT Installation/Demonstration violation is required to be reported for a system that fails to complete the following on time:

- Have the State-designated treatment properly installed and operating in accordance with §141.82(e);
- Submit a certification of proper installation and operation in accordance with §141.90(c)(4); **or**
- Demonstrate that it has optimized corrosion control in accordance with §141.81(b)(1), (b)(2) or (b)(3) and submitted the required documentation in §141.90(c)(1).

How Does a System Return to Compliance for this Violation?

A system is considered to have returned to compliance for an OCCT Installation/Demonstration violation when it:

- Properly installs and operates State-designated corrosion control treatment in accordance with §141.82(e); **and**
- Submits a certification of proper installation and operation in accordance with §141.90(c)(4); **or**
- Demonstrates that it has optimized corrosion control in accordance with §141.81(b)(1), (b)(2) or (b)(3) and submitted the required documentation in §141.90(c)(1).
- System serves $\leq 50,000$ people and is below both action levels during 2 consecutive monitoring periods after incurring this violation and is therefore, not required to complete CCT. In this case, we recommend you report “SO6/EO6 - Intentional No Action Required,” rather than “SOX/EOX - Compliance Achieved (RTC)”. Either action is acceptable.

Can This Violation Result in a System’s Becoming an SNC?

A system will become an SNC for incurring this violation if it has a 90th percentile lead level of 0.030 mg/L, or above, in samples collected during the **most recent** compliance period. *Refer to Section 8.3 for more information on this SNC type.*

What Data Needs to be Reported for this Violation?

The following data should be reported for each OCCT Installation/Demonstration violation:

OCCT Installation/Demonstration Violation: Required Reporting	
DTF Data Element Number	Description
C101 C1101 C1103 C1105 C1107	PWS-ID Violation ID Contaminant Code = 5000 (SDWIS/FED defaults - May be reported by State) Violation Type Code =58 Violation Begin Date for: <ul style="list-style-type: none"> • Large systems = 1/1/1997 • Medium and Small systems = 24 months from the date of the State's letter to system specifying OCCT to be installed, PLUS one day.

**EXAMPLES FOR REPORTING OCCT
INSTALLATION/DEMONSTRATION VIOLATIONS (Code: 58)**

EXAMPLE 1

A medium system (WA8976541) does not install OCCT within the 24-month time frame, in this example by June 29, 2000. Instead, the State receives a letter on March 15, 2001, that certifies OCCT has been installed and OCCT has been optimized. Further, the most recent 90th percentile level was 0.018 mg/L.

By November 15, 2000, you would report an OCCT Installation/Demonstration violation as follows:

DTF Data Element Number	Data Value	Data Element Description
C101 C1101 C1103 C1105 C1107	WA8976541 0100003 5000 58 2000/07/01	PWS-ID Violation ID Contaminant Code (SDWIS/FED defaults - May be reported) Violation Type Code Violation Begin Date

The DTF transactions for this violation are:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	WA897654 1	0100003		I	C1103	5000		

D1	WA897654 1	0100003		I	C1105	58		
D1	WA897654 1	0100003		I	C1107	20000701		

By May 15, 2001, you would report an RTC Enforcement/Follow-up record as follows:

DTF Data Element Number	Data Value	Data Element Description
C101	WA8976541	PWS-ID
C1201	0100055	Enforcement ID
C1203	2001/03/15	Enforcement Date
C1205	SOX	Enforcement Action Code = SOX for RTC
Y5000	0100003	Link record. Links RTC to Treatment Installation Violation

The DTF transactions for this record are:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
E1	WA897654 1	0100055		I	C1203	20010315		
E1	WA897654 1	0100055		I	C1205	SOX		
E1	WA897654 1	0100055		I	Y5000	0100005		

The system's 90th percentile lead level was less than 0.030 mg/L; therefore, it does not meet the definition of an SNC.

EXAMPLE 2

A system installs OCCT within the 24-month time frame but does not report it to the State.

As part of the requirement for installing OCCT, the system is required to certify to you that OCCT has been properly installed and is operating. This certification is required to be maintained in the official files for the water system. A violation should be reported pending receipt of the certification.

Note: Additional reporting examples for this violation are presented after the discussion of an OCCT Installation/Demonstration SNC in Section 8.3.

5.5.4 Source Water Treatment (SOWT) Installation

When is SOWT Installation Required?

A system is required to install source water treatment if you determine that such treatment is required based on the system's initial source water monitoring and source water treatment recommendation.

When Does an SOWT Installation Violation Occur?

A system will incur an SOWT installation violation if, within 24 months of your decision (and notification to the water system) of the type of SOWT to be installed, the system fails to:

- Properly install and operate SOWT in accordance with §§141.83(b)(3) and (5), *and*
- Submit certification to the State of proper SOWT installation and operation in accordance with §141.90(d)(2).

How Does a System Return to Compliance for this Violation?

A system is considered to have returned to compliance for an SOWT installation violation if it subsequently:

- Properly installs and operates State-designated corrosion control treatment in accordance with §§141.83(b)(3) and (5), *and/or*
- Submits a certification of proper installation and operation in accordance with §141.90(d)(2).

Can This Violation Result in a System's Becoming an SNC?

Yes. Any system that has a 90th percentile lead level of 0.030 mg/L or greater in its **most recent** tap samples will become an SNC if it incurs an SOWT Installation violation. Refer to Section 8.3 for more detail on this type of SNC.

What Data Needs to be Reported for this Violation?

The following data should be reported for each SOWT Installation violation:

SOWT Installation Violation: Required Reporting	
DTF Data Element Number	Description
C101	PWS-ID
C1101	Violation ID
C1103	Contaminant code = 5000 (Defaulted by SDWIS/FED)
C1105	Violation Type Code= 58
C1107	Violation Begin Date= 24 months plus 1 day after the date of the State's determination/notification

EXAMPLES FOR REPORTING SOWT TREATMENT INSTALLATION VIOLATIONS (Code: 58)

EXAMPLE 1

A system (KS0003456) has 24 months to install SOWT (from January 1, 1999 to December 31, 2000.) The system does not install the treatment. In addition, its most recent 90th percentile value for lead was 0.020 mg/L.

The system is in violation for failure to install the SOWT. The most recent 90th percentile value is less than 30 mg/L and therefore is not SNC. By February 15, 2001, you would report a violation with a compliance period begin date of January 1, 2001. The data to be reported is the same as displayed in the OCCT Installation/Demonstration section above. Additional examples for this violation are presented at the end of the discussion of Treatment Installation SNCs in Section 8.3.

5.5.5 WQP Noncompliance (Entry Point and Tap)

During routine monitoring, all systems are required to maintain OWQPs at or above minimum values or within designated or approved ranges. Large systems are to collect OWQP samples according to the schedules laid out in the rule. Medium or small systems are required to collect OWQP samples during monitoring periods in which the lead or copper action level is exceeded. Follow-up WQP or routine OWQP monitoring is to occur at entry points to the distribution system as well as at selected taps.

The LCRMR offers an alternative procedure for assessing compliance with OWQPs. This new alternative is an optional LCRMR provision (States can decide not to adopt this provision). EPA strongly recommends, however, that all States adopt this alternative way of assessing compliance because it encourages more frequent WQP monitoring. The old method for assessing compliance under the LCR can, in effect, punish systems for more frequent monitoring. This revised OWQP compliance procedure is discussed in detail in the document, *How to Determine Compliance with Optimal Water Quality Parameters as Revised by the Lead and Copper Rule Minor Revisions*, February 2000. We present examples of both compliance determination processes and the appropriate reporting requirements for each procedure.

LCR Compliance Determination Process:

Under the LCR compliance determination process, the compliance periods vary significantly; entry point monitoring is always conducted biweekly, whereas tap monitoring is conducted either semiannually, annually, or triennially.

When Does A OWQP Noncompliance Violation Occur?

This type of violation can only occur after you have designated OWQPs. An **entry point OWQP violation** is to be reported for any system in which the OWQP values of any sample are below the minimum value or outside the range established by the State. To simplify reporting, any combination of exceedances during a quarter will be reported as a single violation for that quarter. Unlike lead and copper tap samples that require all samples be collected to determine if an exceedance of an action level has occurred, a violation for failure to meet entry point values can be incurred even if the system has not collected all the required samples. For example, if a system collects entry point samples at three out of the four entry points and any of the OWQPs fail to meet the State-designated or approved ranges, the system would incur an entry point noncompliance violation as well as an entry point M/R violation for the same compliance period.

Systems are allowed to take a confirmation sample for any WQP within 3 days after the first sample. The results are to be averaged with the first sampling result and the average is to be used to determine whether the system is in compliance with the State-designated value or range. The State also has discretion to delete results of obvious sampling errors from this calculation. Systems that collect entry point WQPs at a greater frequency than biweekly should report the average of the samples collected over the two-week period for each WQP.

The method for determining and reporting **tap OWQP Noncompliance** is the same as that for entry point sampling, with the exception that a single violation will be reported on a semiannual or annual basis. As is true with entry point OWQP Noncompliance, tap OWQP Noncompliance can occur even if the system does not conduct all the required sampling. In such a case, a system can incur both tap OWQP M/R and tap OWQP Noncompliance violations. Confirmation samples are also allowed, if taken within 3 days and are to be averaged with the original sample.

Should you choose NOT to adopt the LCRMR alternative procedure for determining compliance, you are to continue to determine compliance as defined under the 1991 LCR.

How Does a System Return to Compliance for this Violation Type?

A system subsequently achieves compliance with OWQP Noncompliance violations when it:

- Completes all OWQP monitoring at all locations for the entire next compliance period and meets each parameter range and/or limit for the entire compliance period (e.g., quarterly, 6-month, annual, etc.).
- System serves $\leq 50,000$ people and is below both action levels during 2 consecutive monitoring periods after incurring this violation and is therefore, not required to complete OWQP. In this case, we recommend you report "SO6/EO6 - Intentional No Action Required," rather than "SOX/EOX - Compliance Achieved (RTC)". Either action is acceptable.

Can This Violation Result in a System Becoming an SNC? No.

What Data Needs to be Reported for this Violation?

Previously, there were two separate violation type codes for OWQP Non-compliance; 59 for entry point, and 60 for tap. As of January 2000, these violation types have been consolidated under a single violation type code of 59. All violations previously reported as violation type codes of 60, were converted to 59. SDWIS/FED will continue to convert these codes until the January 2002 deadline. At that time, should the violation type code for 60 be submitted, the violation will be rejected as invalid as will any enforcement link record. Because the violation/compliance period will be different for entry point and tap violations, and because they have the same violation type code, the data for systems having both types of violations may appear odd until we get used to it. However, because the entry point violation/compliance period is based on a quarterly violation, we can distinguish which is which to ensure we do not have violation duplication.

You should report the following data for each OWQP Noncompliance violation:

OWQP Noncompliance Violation: Required Reporting	
DTF Data Element Number	Description
C101	PWS-ID
C1101	Violation ID
C1103	Contaminant Code = 5000 (SDWIS/FED Defaults - May be reported by State)
C1105	Violation Type Code =59
C1107	Compliance Period Begin Date = the first day of the 3, 6, 12, 36, or 108 month period in which the violation was determined.*
C1109, or	Compliance Period End Date = the last day of the 3, 6, 12, 36, or 108 month period in which the violation was determined*
C1111	Compliance Period Duration in months
Note: 1. * 3 month compliance periods are appropriate for OWQP entry point violations only, 6, 12, 36, and 108 month compliance periods are appropriate for OWQP tap violations only. 2. Compliance Period End Date, OR Compliance Period Duration is to be reported for OWQP M/R and Noncompliance Treatment Technique violations	

RTC (SOX/EOX) and all formal enforcement/follow-up actions are also required to be reported AND linked to these violations.

LCRMR Compliance Determination Process:

1. **Each OWQP and each sampling point are to be evaluated separately.** Each sampling point is considered separately because aggregating the results from multiple locations could mask a problem that affects only a part of the system.

2. **Compliance determinations are always based on a 6-month period,** regardless of the system's

monitoring schedule (e.g., daily, biweekly, semi-annually, annually, triennially) or whether the OWQP results are from an entry point or tap samples.

3. **Systems cannot be outside the OWQP ranges or below the OWQP minimum for more than a total of 9 days** during a 6-month period at a specific sampling point or combination of sampling points, or for a specific OWQP or combination of OWQPs. The 9 days can occur any time during the 6-month period and do not have to be consecutive. The 9 days allow systems to make necessary repairs that may be causing the system to have excursions.

4. **Confirmation samples are no longer used.** The results of all samples collected during the 6-month period are to be reported to you by the system and used in determining compliance.

Because the violation type codes have been consolidated as mentioned above (59 entry point, 60 tap - both now reported as 59 OWQP non-compliance treatment technique violations), and because both entry point and tap non-compliance is combined within a single 6-month period, there is no longer any distinction required between entry point and tap violations in SDWIS/FED. Also, because compliance is based on a fixed 6 month period, regardless of the system's lead and copper monitoring schedule, and because medium and small systems are only required to monitor OWQP during monitoring periods in which they exceed lead and copper action levels, the period(s) of OWQP non-compliance to be reported can be a little confusing. Please refer to the *How to Determine Compliance with Optimal Water Quality Parameters as Revised by the Lead and Copper Rule Minor Revisions* guidance document for more examples and specific details. Highlights of those examples are presented below.

The LCRMR introduce two new terms with which you need to become familiar to fully understand the new compliance determination procedure. The first term is **“daily value”**. “Daily values” are calculated for each OWQP at each sampling location. The procedure for determining the “daily value” is based on the sampling frequency for that OWQP and that sampling point. It is possible for a system to collect several samples a day for a given OWQP at one sampling location and to conduct annual monitoring at another. Although the term “daily values” contains the word “daily”, in many instances, the daily value represents a measurement that was collected more or less frequently than once per day. The table below explains how to calculate the daily value based on the sampling frequency for a given OWQP.

Table 11
Daily Value Calculation Based on Monitoring Frequency

<i>If the system is monitoring for a specific WQP at a specific location:</i>	<i>Then the daily value is:</i>
More frequently than Daily	Calculated by averaging all of the results measured at the sampling location for that OWQP during the day (regardless of whether the results are measured through continuous monitoring, grab samples, or both.)
Daily	Results of each daily sample for that OWQP, at that location.
Biweekly	Results of each sample collected during the two-week period for that OWQP, at that location.
Semi-annually	Results of each sample collected during the 6-month period for that OWQP, at that location.
Annually or Triennially	<p>The most recent measurement(s) taken, even if that measurement was collected during a previous monitoring period.</p> <p>Example: A system is on annual WQP tap monitoring during January - December 2000. It measures pH at the tap on January 10, 2000 (pH = 7.5) and June 20, 2000 (pH = 7.6). For the 6-month period of January to June 2000, there are two daily values because both measurements were collected during the 6-month period being evaluated. For the 6-month period of July to December 2000, only the most recent value of 7.6 is used.</p>

Note: If a system collects additional OWQP samples during the monitoring period, these results are included in the compliance assessment.

The second term is an “**excursion**”. An excursion is any “daily value” for a OWQP that is below the minimum value or outside the range of OWQPs set by the State for that sampling location. The duration of an excursion is the number of days that elapse, starting with the day the excursion first occurs, until the day the daily value is within the OWQP range or above the OWQP minimum for that OWQP. These dates are based on the date the system **collected** the sample, not the date the system received the sample results.

When Does A OWQP Noncompliance Violation Occur?

This type of violation can only occur after you have designated OWQPs. For both entry point and tap monitoring, compliance is determined based on 6-month periods. If a system has more than 9 days with excursions for a given 6-month period, it has a violation. To simplify reporting, **any** combination of OWQP noncompliance violations during a 6 month period will be reported as a **single** violation for that 6 month period.

In addition, unlike lead and copper tap samples that require all samples be collected to determine if an exceedance of an action level has occurred, a violation for failure to comply with OWQP minimums or ranges can be incurred even if the system has not collected all the required samples. For example, if a system collects entry point samples at three out of the four entry points and any of the WQPs fail to meet the State-designated or approved ranges for 10 days or more, the system would incur a OWQP noncompliance violation as well as a OWQP M/R violation for the same 6-month compliance period.

How Does a System Return to Compliance for this Violation Type?

A system achieves compliance with OWQP Noncompliance violations when it:

- Completes all OWQP monitoring at all locations for the entire next six month period and is in compliance with all ranges and limits at all locations.
- System serves $\leq 50,000$ people and is below both action levels during 2 consecutive monitoring periods after incurring this violation and is therefore, not required to complete CCT. In this case, we recommend you report “SO6/EO6 - Intentional No Action Required,” rather than “SOX/EOX - Compliance Achieved (RTC)”. Either action is acceptable.

Can This Violation Result in a System’s Becoming an SNC? No.

What Data Needs to be Reported for this Violation?

You should report the following data for each OWQP Noncompliance violation:

WQP Noncompliance Violation: Required Reporting	
DTF Data Element Number	Description
C101	PWS-ID
C1101	Violation ID
C1103	Contaminant Code = 5000 (SDWIS/FED Defaults - May be reported by State)
C1105	Violation Type Code =59
C1107	Compliance Period Begin Date = the first day of the 6-month period in which the violation was determined.
C1109, or	Compliance Period End Date = the last day of the 6-month period in which the violation was determined
C1111	Compliance Period Duration in months = 6

These examples provide the basic reporting requirements for WQP noncompliance violations. They also present the basic differences between the two methods of compliance determination. Please refer to the *How to Determine Compliance with Optimal Water Quality Parameters as Revised by the Lead and Copper*

EXAMPLES FOR REPORTING WQP NONCOMPLIANCE VIOLATIONS (Code: 59)

The following examples assume the system has installed treatment and OWQPs have been designated.

EXAMPLE 1

A system (VA9163644) only collects OWQP samples at three out of four entry points during the period January 1, 2001 to June 30, 2001. The analyses of the samples indicated that the system did not meet the OWQP ranges for pH for 11 days or alkalinity for 12 days. (Compliance is determined per location, per parameter - then, combines excursion days from one or more locations for each parameter.)

LCRMR Alternative Compliance Determination:

In this example, the system would incur a violation for OWQP Noncompliance because it did not meet all OWQP values or ranges during all biweekly entry point sampling periods in the 6-month compliance period. Although the system did not meet its OWQP ranges for two OWQPs, the violations are aggregated into a single OWQP noncompliance violation for the 6-month period.

By August 15, 2001, you would report the following information:

DTF Data Element Number	Data Value	Data Element Description
C101	VA9163644	PWS-ID
C1101	0100001	Violation ID
C1103	5000	Contaminant Code (Defaulted by SDWIS/FED)
C1105	59	Violation Type Code
C1107	2001/01/01	Compliance Period Begin Date
C1109, or	2001/06/30	Compliance Period End Date
C1111	006	Compliance Period Duration in months = 6

The DTF transactions for this violation are:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	VA9163644	0100001		I	C1103	5000		
D1	VA9163644	0100001		I	C1105	59		
D1	VA9163644	0100001		I	C1107	20010101		

D1	VA9163644	0100001		I	C1111	6		
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The DTF example above displays reporting with the C1111 duration attribute instead of the compliance period end date, C1109. Even though the compliance period duration is acceptable for OWQP violations, we recommend you report the violation end date (C1109) instead. As mentioned earlier, SDWIS/FED does not post the duration, but rather calculates the end date from the begin date and the number of months reported in the duration attribute. Either end date or duration is currently acceptable. The following DTF example displays the same violation with the compliance period end date.

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	VA9163644	0100001		I	C1103	5000		
D1	VA9163644	0100001		I	C1105	59		
D1	VA9163644	0100001		I	C1107	20010101		
D1	VA9163644	0100001		I	C1109	20010630		

This system also failed to meet all its OWQP entry point sampling requirements (i.e., monitored at three and not all four entry points) and therefore would incur a OWQP M/R violation (violation type 53) for the same 6-month period. (Refer to examples for WQP M/R violations in Section 5.4.3.)

LCR Compliance Determination:

Recall that under the LCR provision for assessing OWQP compliance, entry point OWQP compliance is determined on a quarterly basis, and tap OWQP compliance is determined on a 6 or 12 month basis.

This system exceeded the pH parameter from at least one entry point location. Compliance for entry point OWQPs is determined on a quarterly basis. If this system incurred one or more exceedances during either or both the January through March and/or April through June 2001 compliance period, you would report a violation for each period with an exceedance. Because it did not collect the required samples at ALL locations in either compliance period, you would also report a monitoring violation (violation type 53) for both periods. The January through March OWQP noncompliance (59) and OWQP M/R (53) violations would be both reported to SDWIS/FED by May 15, 2001, the April through June violations would be reported by August 15, 2001.

If this system also exceeded it's pH tap OWQPs at one or more locations for one or both quarters, you would also report a single 6-month OWQP noncompliance violation (by August 15, 2001).

Therefore, in the worst case LCR compliance determination scenario for this system you could report:

- two quarterly OWQP entry point noncompliance violations (59),
- two quarterly OWQP entry point monitoring and reporting violations (53),
- one 6-month monitoring and reporting OWQP tap violation (53), and

- one 6-month OWQP tap noncompliance violation (59).

In the worst case alternative compliance determination process scenario under the LCRMR, you could report:

- a single 6-month OWQP noncompliance violation (59), and
- a single 6-month OWQP monitoring and reporting violation (53).

EXAMPLE 2

A small system (CA1111421) has 1 entry point and 1 distribution ("tap") site. It monitors biweekly at its entry point and every six months at its tap site. The State has designated a MINIMUM value of 7.5 for the pH at its entry point, and a MINIMUM value of 7.2 for the pH at its tap site. During the period of January 1, 2000 through June 30, 2000, the pH readings at the entry point were as follows:

Entry Point: pH Results for January to June 2000					
State-specified pH minimum = 7.5					
Collection Date	Result = Daily value	Collection Date	Result = Daily value	Collection Date	Result = Daily value
January 3	8.1	March 3	7.6	April 28	7.8
January 17	8.2	March 13	7.8	May 9	7.8
January 31	7.8	March 27	7.0	May 10	7.8
February 14	7.8	March 29	7.9	June 11	8.2
February 28	7.2	April 10	7.6	June 12	7.8

Entry Point: Number of Days with Excursions from January to June 2000		
Collection Date for Sample that Started the Excursion	Excursion Date Range	Number of Days with Excursions
February 28	February 28 to March 2	3 days
March 27	March 27 to March 28	2 days
Total Number of Days with Excursions = 5 days		

During the period of January 1, 2000 through June 30, 2000, the pH readings at the tap were as follows:

Tap: pH Results for January to June 2000			
State-specified pH minimum = 7.2			
Collection Date	Result = Daily value	Collection Date	Result = Daily value

Tap: pH Results for January to June 2000			
State-specified pH minimum = 7.2			
January 17	8.1	May 24	7.0
May 22	6.8	May 25	7.1
May 23	6.9	May 26	8.0

Tap: Number of Days with Excursions from January to June 2000		
Collection Date for Sample that Started the Excursion	Excursion Date Range	Number of Days with Excursions
May 22	May 22 - 25	4 days
Total Number of Days with Excursions = 4 days		

The table below summarizes the number of days that the system had an excursion at each sampling location.

Overall System Compliance with OWQPs for January - June 2000 (√ indicates an excursion)		
Day w/ excursion	Sampling Location	
	Entry Point	Tap
February 28, 2000	√	
March 1, 2000	√	
March 2, 2000	√	
March 27, 2000	√	
March 28, 2000	√	
May 22, 2000		√
May 23, 2000		√
May 24, 2000		√
May 25, 2000		√
Total Number of Days with Excursions = 9 days		

LCRMR Alternative Compliance Determination:

The system is in compliance during the compliance period of January to June 2000, because it had excursions for a total of 9 days. Remember, a system is in compliance if it has excursions on **no more than 9** days during a 6-month period. The system is within the designated range set by the State and would not incur a violation for OWQP noncompliance.

LCR Compliance Determination:

The system is in violation for OWQP entry point noncompliance for the January through March quarter because it had one or more exceedances during the quarterly compliance period. It was in compliance for the April through June quarter (no exceedances). Because tap noncompliance is determined in the same compliance period as the lead and copper compliance period which is on a 6-month basis in this example, the system had one or more exceedances during the period, therefore, it has a OWQP tap noncompliance for the entire 6-month period.

By May 15, 2001 you would report the following:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	CA1111421	0000001		I	C1103	5000		
D1	CA1111421	0000001		I	C1105	59		
D1	CA1111421	0000001		I	C1107	20000101		
D1	CA1111421	0000001		I	C1109	20000331		

By August 15, 2000, you would report the following violation data:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	CA1111421	0000001		I	C1103	5000		
D1	CA1111421	0000001		I	C1105	59		
D1	CA1111421	0000001		I	C1107	20000101		
D1	CA1111421	0000001		I	C1109	20000630		

Differences between the two compliance determination methods:

Under the alternative LCRMR method there are no violations.

Under the LCR method, there are two violations:

- a quarterly entry point violation (59), and
- a 6-month tap violation (59).

EXAMPLE 3

A medium system (AZ3363633) on reduced (annual) monitoring for the period July 1, 2003 to June 30, 2004. It samples for lead and copper at the tap during the June through September designated period and

learns its lead 90th percentile value exceeds the action level on October 10, 2003. Because it is only required to conduct routine OWQP monitoring during the same compliance period it exceeds the lead and/or copper tap action level, it begins to collect OWQP samples that same day and continues throughout the remainder of the annual compliance period. It fails to meet the range of one of the OWQP tap values for 11 days during the 6-month compliance period from July 1, 2003 to December 30, 2003. It adjusted treatment and the last OWQP tap sample was taken on December 29th and was within limits. The system did not experience any more EXCEEDANCES during the January through June 2004 6-month compliance period.

LCRMR Alternative Compliance Determination:

Determine the number of days excursions occurred for both tap and entry point. **Remember**, for systems that monitor less frequently than semi-annually, the daily value is the most recent measurement(s) taken, even if that measurement was collected during a previous monitoring period. In this example, the system was in compliance on July 1, 2003.

By February 15, 2004, you would report:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	AZ3363633	0400001		I	C1103	5000		
D1	AZ3363633	0400001		I	C1105	59		
D1	AZ3363633	0400001		I	C1107	20030701		
D1	AZ3363633	0400001		I	C1109	20031231		

LCR Compliance Determination:

OWQP tap compliance is determined on the same compliance period as the lead and copper tap compliance period which is annual. In this example, the system would be in violation for the entire 12 month compliance period if any parameter at any sampling site did not its designated value or range. Confirmation samples would have to have been taken within 3 days and the average of the two samples would have been used for the result. By February 15, 2004, you would report the following:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	AZ3363633	0400001		I	C1103	5000		
D1	AZ3363633	0400001		I	C1105	59		
D1	AZ3363633	0400001		I	C1107	20030701		
D1	AZ3363633	0400001		I	C1109	20040630		

Under both methods:

Because the system exceeded the lead action level AFTER installation of CCT, it is triggered into lead service line replacement. You notify the system of this requirement in a letter dated December 12, 2003. By February 15, 2004, you would also report a LSLR milestone record. *See Section 5.5.7 for specific examples.*

In addition, because this medium size system did not meet the State-specified limit or approved OWQP range, the system would no longer qualify to sample at a reduced frequency but would be required to collect samples semiannually for both lead and copper and OWQPs at the original number of samples and sites until it achieves compliance with the lead and copper tap action level for 2 consecutive 6-month periods. For small or medium-size systems, OWQP sampling is only required in those monitoring periods in which the system exceeds the lead or copper action levels or as per a State-specified schedule. The LCRM states “For any such small and medium-size system that is subject to a reduced monitoring frequency pursuant to §141.86(d)(4) [reduced lead and copper tap] at the time of the action level exceedance, the end of the applicable six-month period under this paragraph shall coincide with the end of the applicable monitoring period under §141.86(d)(4) . Compliance with State-designated optimal water quality parameter values shall be determined as specified under §141.82(g).

The system may then return to reduced annual OWQP monitoring upon receipt of your written approval to do so. If the system had been on reduced triennial monitoring when it exceeded, it would likewise return to triennial monitoring once 2 consecutive 6-months compliance had been achieved and receives written approval from you.

Differences between the two compliance determination methods:

Under the LCRM alternative method:

- a single 6-month violation
- a single 12-month violation

5.5.6 Maximum Permissible Level (MPL) Noncompliance

Systems that are above either MPL, incur a treatment technique violation. A system can take a confirmation sample within 2 weeks of the original sample. The results of the original and confirmation samples are averaged to determine whether a system is in compliance with its MPLs. MPLs are federally-enforceable standards.

The only change to this reporting requirement is the defaulting of the compliance period end date to December 31, 2015 by SDWIS/FED. SDWIS began defaulting the end date in January 2000. The violation begin date is the day you determine an MPL exceedance occurred.

When is Compliance with MPLs Required?

After SOWT is installed, the State will evaluate data representing source water quality before and after treatment is installed. Based on these data, the State will designate or approve MPLs for lead and copper for finished water entering the distribution system..

When Does an MPL Noncompliance Violation Occur?

MPL Noncompliance is to be reported for a system that fails to meet either State-designated or approved MPLs in accordance with §141.83(b)(5). A system which fails to install SOWT within 24 months of the State's decision that SOWT is required is also a treatment technique violation.

A system can incur separate violations for exceeding the lead MPL or copper MPL. However, to simplify reporting, if a system exceeds the MPL for only lead or copper in more than one source water sample, you would report a **single** violation for that period for each contaminant. Therefore, if the lead MPL is exceeded in **one** or more source water samples, the State would report one lead MPL violation. On the other hand, if the system exceeds the MPL for copper, as well as for lead, you would report **two** separate violations, one with the copper contaminant code of 1022, and one with the lead contaminant code of 1030. The compliance period begin date would be the same.

Compliance with MPLs is based on the routine samples collected. A system which has only ground water sources is required to collect one sample from each entry point to the distribution system during the 3 year compliance period in effect at the time you designated the MPLs. A surface water system with or without ground water sources is required to collect one sample from each entry point to the distribution system during each year, the first annual monitoring period to begin on the date on which you designate the MPLs. According to Section 141.83(d)(2), a system is not required to conduct source water sampling for lead and/or copper if the system meets the action level for the specific contaminant in tap water samples during the entire source water sampling period applicable to the system as stated above.

If a system fails to collect source water samples at all entry points to the distribution system and exceeds one or both MPLs in the samples collected, the system would incur a single source water M/R violation as well as an MPL violation for each contaminant (lead or copper) that exceeded the MPL.

A system could potentially incur three source water violations in the same compliance period:

- 1 Lead MPL violation,
- 1 Copper MPL violation, and
- 1 Source water M/R violation.

The first day of the violation period is the day the you determine a violation exists for either Lead or Copper MPL.

How Does a System Return to Compliance for this Violation Type?

A system will return to compliance for this violation type when:

- Meets State-designated or approved MPL values and collects samples from all locations, during a subsequent compliance period, for the 1, 3, or 9-year compliance period (whichever is in effect at the time of the violation) in accordance with §141.83(b)(5).
- Is below both action levels during the entire source water monitoring period in effect, after incurring this violation and is therefore, not required to conduct source water monitoring for MPL compliance determination. In this case, we recommend you report “SO6/EO6 - Intentional No Action Required,” rather than “SOX/EOX - Compliance Achieved (RTC)”. Either action is acceptable.

What Data Needs to be Reported for this Violation?

You should report the following data for each MPL Noncompliance violation:

MPL Noncompliance Violation	
DTF Data Element Number	Description
C101	PWS-ID
C1101	Violation ID
C1103	Contaminant Code: Lead = 1030, Copper = 1022
C1105	Violation Type Code= 63
C1107	Violation Begin Date= the date the State determines a violation exists.

Note: As with other treatment technique violations for this rule, you do not report the Violation/Compliance Period End Date (C1109) or Violation Duration (C1111). SDWIS/FED defaults the violation/compliance period end date to December 31, 2015. When you report and link the RTC (SOX) record for this violation, SDWIS/FED will replace the defaulted end date with the RTC action date.

What Key Points Should I Remember?

- ☞ Once a system exceeds either the lead or copper action level, it is always subject to source water monitoring requirements. However, a system is not required to collect any source water samples if its 90th percentile lead or copper level does not exceed the action level during the entire source water monitoring period in effect.
- ☞ Section 141.88(b)(5) - [After installation of SOWT] Each water system shall maintain lead and copper levels below the maximum permissible concentrations designated by the State at each sampling point monitored in accordance with §141.88.
- ☞ Systems using ground water as their only source are required to monitor during 3-year compliance periods. These are the same compliance periods that were established under the Standardized Monitoring Framework (SMF) for Phase II/V contaminants (e.g., 1993 - 1995, 1996 - 1998, 1999 - 2001, 2002 - 2004, etc.).
- ☞ Systems using surface water or surface water combined with ground water are required to monitor annually. The first annual monitoring period begins on the date that the State determined the type of treatment to be installed or that no treatment was required.
- ☞ Compliance with MPLs is conducted AFTER SOWT is installed AND you have designated MPLs.

EXAMPLES FOR REPORTING MPL NONCOMPLIANCE (Code: 63)

EXAMPLE 1

A surface water system (NV0163600) installs SOWT in February 1999. You designate MPLs on March 28, 2000. The system exceeds the lead and copper action level during the January 2000 through December 2002 triennial monitoring period (tap samples collected by September 30, 2000. The 2 consecutive 6-month follow-up MPL monitoring periods began the day you designated the MPLs (3/28/2000) . Because SW systems are to collect routine MPLs annually, the system collects source water samples at all entry points to the distribution system beginning March 28, 2001. In one source water sample, it fails to meet the MPL for lead and in two source water samples it does not meet the MPL for copper. The State determines the violations exist on August 13, 2001.

Separate violations are reported for each contaminant, but violations of the same contaminant are aggregated into a single violation. In this example, a lead MPL violation would be reported as well as a separate copper MPL violation. However, only **one** violation would be reported for copper although the system did not meet the MPL for this contaminant in two samples. MCL and TT violations should be reported within 45 days after the end of the quarter in which they occur. By November 13, 2001 you would report:

For the **lead** MPL:

DTF Data Element Number	Data Value	Data Element Description
C101	NV0163600	PWS-ID
C1101	0200012	Violation ID
C1103	1030	Contaminant Code for Lead
C1105	63	Violation Type Code
C1107	2001/08/13	Violation Begin Date

For the **copper** MPL:

DTF Data Element Number	Data Value	Data Element Description
C101	NV0163600	PWS-ID
C1101	0200013	Violation ID
C1103	1022	Contaminant Code for Copper
C1105	63	Violation Type Code
C1107	2001/08/13	Violation Begin Date

The DTF transactions for these violations are:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	NV0163600	0200012		I	C1103	1022		
D1	NV0163600	0200012		I	C1105	63		
D1	NV0163600	0200012		I	C1107	20010813		
D1	NV0163600	0200013		I	C1103	1030		
D1	NV0163600	0200013		I	C1105	63		
D1	NV0163600	0200013		I	C1107	20010813		

Note: Once a system is on reduced monitoring for source water, it does not go off reduced monitoring, regardless of whether it incurs an M/R or MPL noncompliance violation.

EXAMPLE 2

A ground water system (WW1234567) has installed SOWT and completed its follow-up source water monitoring within 36 months after the State determines the type of source water treatment to be installed. It is now on triennial monitoring and failed to collect all the required samples during the January 1, 2001 - December 31, 2003 compliance period. In those samples it does collect, it exceeds the copper MPL. You determine the copper MPL is exceeded on August 15, 2002. The violation begin date is August 15, 2002. The data for this violation is the same as the data in example 1 above.

An MPL violation can be incurred if the system exceeds the MPL for lead or for copper in any sample collected. Therefore, you would report an MPL violation for copper with the copper contaminant code of 1022, as shown in Example 1, even though the system failed to collect all the required samples. In addition, the system would incur a source water M/R violation for the January 1, 2001- December 31, 2003 time frame. *(Refer to examples for Source Water M/R violations in Section 5.4.4.)*

The DTF transactions for these violations are:

By November 15, 2002 you would report:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	WY1234567	0300006		I	C1103	1022		
D1	WY1234567	0300006		I	C1105	63		
D1	WY1234567	0300006		I	C1107	20020815		

By February 15, 2004 you would report:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	WY1234567	0400023		I	C1103	5000		
D1	WY1234567	0400023		I	C1105	56		
D1	WY1234567	0400023		I	C1107	20010101		

5.5.7 Lead Service Line Replacement (LSLR)

When is Lead Service Line Replacement Required?

Systems that fail to meet the lead action level after installing OCCT and/or SOWT are to begin annual replacement of their lead service lines (LSLs). Section 181.84(b) states “The first year of lead service line replacement shall begin on the date the action level was exceeded in tap sampling...”. Replacement is to occur at the rate of 7 percent per 12 month “year”. In addition, systems are to replace LSLs at an accelerated rate (i.e., > 7 percent per year) where you find this feasible. A system may count any LSL, with lead concentrations of ≤ 0.015 mg/l in all samples, as being replaced.

A system may stop replacing LSLs if it meets the lead action level during each of two consecutive lead tap monitoring sampling periods and the system submits the appropriate information to you. However, if the system exceeds the lead action level in the future, the system is to resume replacing LSLs. LSLR does not apply to copper exceedances.

When Does an LSLR Violation Occur?

A LSLR violation is to be reported for each system that **fails** to complete any of the following activities, for each compliance period (12 month year) in which the violation occurs:

- Provide the following information to you within 12 months after the exceedance of the lead action level for the first year of LSL replacement only (§141.90(e)(1)):
 - Certification of a materials evaluation to identify LSLs in its distribution system
 - LSLR schedule for replacing annually at least 7% of the initial number of LSLs in its distribution system.
- Report to you in writing within 12 months after the end of the compliance period in which the exceedance of the lead action level occurred, and annually thereafter, (12 months later) that (§141.90(e)(2)):
 - at least 7% of the LSLs have been replaced (or greater if required by the State), *and/or*
 - sampling demonstrates a lead concentration ≤ 0.015 mg/l exists in all LSL samples for an individual line that was not replaced.

- The system is required to submit an annual letter to you, in accordance with §141.90(e)(3) that contains the following:
 - the number of LSLs that were scheduled to be replaced for the year,
 - the number and location of each LSL that was replaced that year, *and*
 - if measured, water lead concentration and the location of each LSL sampled, sampling method, and the sampling date.

The LCRMR expand the definition of what constitutes an LSLR violation in those instances where the system does not replace the entire line up to the building inlet (also known as partial replacement). Systems replacing only a portion of an LSL, can incur a violation if they do not:

- Provide notice and guidance to residents at least 45 days before LSLR begins (unless you allow a shorter notification period because the partial replacement is being done in conjunction with emergency repairs);
- Collect a tap sample within 72 hours of completing the partial LSLR;
- Mail and/or post results of the analysis to the owner and residents within 3 days of receipt of the results; *or*
- Report information that you deem necessary to assess whether the system met its partial LSLR monitoring and notification requirements (see paragraph below).

At your discretion, if a system collects LSL samples following partial LSLR in accordance with §141.84(d), it is required to report the analytical results to you within the first 10 days of the month following the month in which the system receives the analytical results, or as you specify. Systems are also required to report any additional information you require in order to verify that partial LSLR activities were performed.

As noted above, we have elected not to create a separate M/R violation for failure to conduct the notification, monitoring, and reporting requirements associated with partial LSLR. Failure to conduct these activities are included as a LSLR treatment technique violation. A **single** violation is reported if a system fails **any** lead service line replacement requirement.

How Does a System Return to Compliance for This Violation Type?

A system would return to compliance for this violation type if it corrects the reason for its noncompliance by:

- Meeting the 7 percent replacement rate (or higher if required by the State) by any one or a combination of:
 - demonstrates replacing that portion of the line which it owns [§141.84(d)]
 - replaces entire line [§§141.84(a) & (b)]; *and/or*
 - identifies the lead service lines which contribute ≤ 15 ppb of lead [§141.84(c) and §141.90(e)(2)(ii)];
- Reporting all required information to the State [§141.90(e)];
- Fulfilling its partial replacement notification requirements by:

- notifying the users of the replacement and measures to minimize their exposure to lead [§141.84(d),
- collecting a post-replacement lead sample and notifying the residents of the results [§141.84(d), *and/or*
- reporting the required information to the State [§141.90(e)(4)].
- System no longer exceeds the lead action level for two consecutive monitoring periods (even if it has not completed the 7% LSL replacement for that year) In this case, we recommend you report “SO6/EO6 - Intentional No Action Required,” rather than “SOX/EOX - Compliance Achieved (RTC)”. Either action is acceptable.

LSLR is an annual requirement of meeting at least a 7% replacement rate. The 7% may be met by actual % of lines replaced, credit for % of lines replaced in excess of the required rate in the prior year, credit for % of lines where the line contributed ≤ 0.015 mg/L of lead, or any combination of the above which totals 7% or more. If the system fails to meet the 7% replacement minimum within the designated 12 month period, a LSLR violation exists. At the time it achieves the 7% in the subsequent year, the State may report that it has returned to compliance for the previous year. The system is expected to complete the LSL shortage for the previous year and complete the required 7% for the current year or it will incur another LSLR violation for that year.

What Data Needs to be Reported for this Violation?

You should report the following data for each LSLR violation:

LSLR Violations: Required Reporting	
DTF Data Element Number	Description
C101	PWS-ID
C1101	Violation ID
C1103	Contaminant Code = 5000 (SDWIS/FED defaults - May be reported by State)
C1105	Violation Type Code = 64
C1107	Violation Begin Date = the first day after the 12 month replacement year period, or the first day after the due date or event required for the partial LSLR

EXAMPLES FOR REPORTING- LSLR VIOLATIONS (Code: 64)

EXAMPLE 1

A system (CA0223600) exceeds the lead action level in the January through June 2000 period, after installing OCCT. It is not required to install SOWT. The system is now required to begin LSLR, starting July 1, 2000. By July 11, 2001, the system had not submitted any of the required LSLR information to the State. On July 20, 2001, the State contacts the system to determine the LSLR status and finds out that the system only has replaced 5 percent of its LSLs.

The system is in violation because it failed to replace at least 7 percent of its LSLs, or show that LSLs contributed ≤ 0.015 mg/L in at least 7 percent of its LSLs, or some combination thereof totaling 7 percent; and because it did not submit any of the required information to the State.

Note: A system that is required to begin LSLR is a milestone reporting requirement. (Refer to Section 5.2.1 for examples on how to report this milestone.)

For this system, you would report an LSLR violation by November 15, 2001:

DTF Data Element Number	Data Value	Data Element Description
C101	CA0223600	PWS-ID
C1101	0100221	Violation ID
C1103	5000	Contaminant Code (SDWIS/FED Defaults - May be reported)
C1105	64	Violation Type Code
C1107	2001/07/01	Violation Begin Date

EXAMPLE 2

A system (CZ0223600) is required to replace the part of the LSLs it owns and does so during its 12 month replacement year of January through December 2002. It properly notifies the owners and residents of all buildings served by the lines before replacement, collects representative samples within 72 hours after the partial replacements, and notifies the owners and residents served by the lines within 3 business days as required.

For the last segment of line being replaced, it receives the laboratory results of LSL samples following partial LSLR on December 1, 2002. However, it does not report the results to the State until February 15, 2003. Although the system had properly performed sampling and notified the owners/users, it failed to report to the State by January 10, 2003. Therefore an LSLR violation should be reported, along with an RTC Enforcement/Follow-up record with an action date of February 15, 2003. Even though the violation reflects a reporting requirement to the state, it is still reported as a treatment technique violation. The LSLR violation begin date could be reported as January 1 or January 11, 2003. The January 11 violation begin date could be used to reflect the “report” noncompliance. Both the violation and RTC action should be reported by May 15, 2003.

EXAMPLE 3

A system replaces 7 percent of its LSLs, however, the State had required the system to replace 10 percent of its lines because it was feasible to do so.

Similar to noncompliance with State-designated or approved WQP ranges or MPLs, noncompliance with the LSLR schedule set by the State is a Federal violation and is to be reported to SDWIS/FED.

EXAMPLE 4

A medium system is notified on March 13, 2000 that it is to begin replacing its lead service lines. Its replacement year is March 2000 through February 2001. The replacement period begins when the system is notified by you. You would report the LSLR Milestone with the begin date of March 13, 2000. The system does not replace any LSLs during that period. However, the system continues to collect 6-month lead and copper tap samples during the July 1, 2000 - June 30, 2001 periods. During that same time period, the system does not exceed the lead action level (achieves 2 consecutive six-month compliance periods below the lead action level).

A system may discontinue replacing LSLs whenever it no longer exceeds the lead action level for two consecutive lead tap monitoring periods. In this example, the system would be in violation of the LSLR requirements for the March 2000 through February 2001 period. A violation should be reported with a begin date of April 1, 2001. However, because the system achieved two consecutive 6-month periods with lead levels at or below the action level it would no longer be subject to LSLR without ever having to actually replace any lines. In this example, in addition to the violation you would also report a RTC action at the time you determine it met the 2 consecutive 6-month requirement. So, if on June 2, 2001, you determine the system met requirements on June 2, 2001, you would report a RTC enforcement/follow-up action. SDWIS/FED will replace the defaulted end date of December 31, 2015 with the June 2, 2001 RTC date. You may choose to report the intentional no action enforcement/follow-up action code instead of the RTC action since the system failed to comply with the lead service line requirements.

Because the system is no longer required to conduct lead service line replacement and after installation and operation of its corrosion control treatment, and because it now meets the lead and copper action levels, you would report a Done milestone record with the date the system met its last requirement. In this example it would be the date you determined the 90th percentiles were at or below the action levels for the second consecutive 6 months.

EXAMPLE 5

A system replaces 5 percent of its lines and reports to the State the results of LSL monitoring indicating that 2 percent of its lines contribute ≤ 0.015 mg/L lead.

The system may count LSLs that contribute ≤ 0.015 mg/L lead toward its annual replacement rate. In this example, this system would be considered to have met its annual 7 percent requirement and is in compliance.

EXAMPLE 6

A system is required to replace 7 percent of its LSLs. The first year it replaces 15 percent of its lines and the second year it replaces none. This system is in compliance for the second 12 month replacement year because the extra 7% of lines replaced is carried as a credit to the following year.

EXAMPLE 7

A system is required to replace 7 percent of its LSLs annually. In the first year, it replaces 5 percent. In the second year, it replaces only 5 percent. The system is on annual lead and copper tap monitoring and is below the lead action for two consecutive years.

The system would incur an LSLR violation for the first year because it did not have 2 consecutive periods below the lead action level and because it did not complete the 7% replacement requirement. It would not incur an LSLR violation for the second year, because, if all samples meet the lead action level for two consecutive periods, it may stop replacing LSLs. You would report the system as returned to compliance for the first year's LSLR requirement when it completed replacement of the first 2% in the second replacement year.

NOTE: Because a medium and small system may discontinue LSL replacement when it meets the lead action level for two consecutive monitoring periods the system may never complete this requirement. It may be more appropriate to report **Intentional No Action** for these situations rather than RTC. Because the system has now met its final CCT requirement, you would also report a DONE milestone.

5.5.8 Public Education Requirements

When is Public Education Required?

A system which exceeds the lead action level is required to conduct a public education program and is required to demonstrate to you that it has properly delivered the public education materials. Public education program elements differ for CWSs and NTNCWSs as follows:

- CWSs:
 - are required to mail notices to each customer, deliver public service announcements (PSAs), and deliver pamphlets and/or brochures to locations likely to service pregnant women and/or children *within 60 days* of the lead exceedance;
 - repeat PSAs, *every 6 months* if they continue to exceed the lead action level; and
 - repeat notices to customers and deliver pamphlets and brochures, *every 12 months* if they continue to exceed the lead action level.
- For NTNCWSs:
 - post in public or common areas, distribute pamphlets/brochures *within 60 days* of the exceedance to each person served ; and
 - repeat the notification *every 12 months* if they continue to exceed,.

The LCRMR contain provisions that would allow your revised regulations to provide additional flexibility in mandatory language and delivery methods and reduce some delivery requirements for small CWSs serving 3,300 or fewer people.

When Does a Public Education Violation Occur?

A public education violation is to be reported for a system that **fails** to meet **any** (one or more) of the requirements as follows:

- At a minimum, include the mandatory language in all written materials, as specified in §141.85(a), or
- Include the mandatory information in all public service announcements (PSA), in accordance with §141.85(b), or
- Deliver all public education materials:
 - in all appropriate languages,
 - at the required frequencies, as defined by §141.85(c), or
- Provide written documentation to the State that demonstrates that the system properly delivered the public education materials, **within 10 days** after the end of each period in which the system is required to perform public education, as specified in the reporting requirement, under §141.90(f). **Note that this deadline is a result of the LCRMR.**

A CWS could conceivably be in violation for the 60-day, semiannual, and annual requirements and a NTNCWS could be in violation with both its 60-day and annual requirements. However, we expect that most systems which are required to conduct public education will be subject to annual requirements only. This is because:

1. The 60-day requirement only applies the first time a system exceeds the lead action level or exceeds again after having been below the lead action level.
2. Only PSAs are required to be repeated every six months. NTNCWSs are not subject to this requirement and the LCRMR allow small CWSs serving 3,300 or fewer people to forego the PSA requirements. We anticipate that most States will elect to include this provision for small CWSs in their revised drinking water regulations.

Under the 1991 Rule, a system was required to submit one letter at the end of the calendar year that demonstrated that it fulfilled its public education responsibilities for that year. In the 1992 LCR guidance, you were not required to report a violation if the system corrected the violation by the end of the calendar year. We specified this procedure because you would not learn of a system's noncompliance until the end of the calendar year.

The LCRMR require more timely notification by specifying that systems are required to submit this letter within 10 days after the end of **each period** in which it is required to deliver public education. This change in reporting requirement allows you to know if the system has fulfilled each of its public education delivery requirements (i.e., its 60-day requirement, 6-month requirements, and/or annual delivery requirements). Therefore, we are now requiring you to report a separate violation for a system's failure to meet its 60-day requirement, 6-month requirement, or annual requirement. Each subsequent requirement is timed based on

the previous requirement (e.g., the exceedance occurred June 30, 2000, the first PE notice is due August 30, 2000, the 6 month notice is due March 31, 2001, etc.)

The system may incur more than one public education violation in a year (e.g., the system failed to do its 60 day and 6 month requirement on time).

The period of violation is described by the first day after the 60 day, 6 month, or 1 year compliance period in which the public education requirements were to be performed. The violation period ends when the you determine those requirements have been met. The system has 10 days after the end of the 60 day, 6 month or 1 year compliance period to report to you. This 10 day period is not added to the compliance period. In other words, the system does not have 70 days to meet its requirements. It has 60 days to meet the requirements and 10 days to report to you. As in other treatment technique violations, SDWIS/FED will default a compliance period end date of December 31, 2015. When you report the RTC enforcement/follow-up action data (including the required violation link data), SDWIS/FED will replace the defaulted end date with the RTC date. This method more accurately describes how long the system took to perform the public education requirements.

How Does a System Return to Compliance for this Violation Type?

A system is considered to have achieved compliance, after it delivers one round of public education materials, or corrects the deficiencies which resulted in the violation, as follows:

- For CWSs, informing the following, using the mandatory language, in all appropriate languages:
 - consumers via notices
 - facilities/organizations in contact with sensitive populations via pamphlets and brochures
 - consumers via major newspapers, television, and radio, *(if required)* or
- For NTNCWSs, informing consumers, using the mandatory language through:
 - posting
 - distribution of pamphlets, brochures, and/or at State discretion, electronic transmission *(if allowed under your revised regulations)*
- For both CWSs and NTNCWSs, submitting written documentation that identifies the measures taken to meet their public education obligations.

Even if the system performs subsequent Public Education requirements, it is required to complete the requirements related to the existing violation before it is returned to compliance.

Can this Violation Result in a System's Becoming an SNC?

Yes. If a system has a 90th percentile lead level of 0.030 mg/L or over, and fails to deliver all the required

public education program elements and submit written documentation to the State, in accordance with §141.90(f), it will become an SNC. *Refer to Section 8.4 for more information on this type of SNC.*

What Data Needs to be Reported for this Violation?

You should report the following data for each Public Education violation:

Public Education Violation: Required Reporting	
DTF Data Element Number	Description
C101	PWS-ID
C1101	Violation ID
C1103	Contaminant Code = 5000 (SDWIS/FED Defaults - May be reported by State)
C1105	Violation Type Code=65
C1107	Compliance Period Begin Date= first day after the 60 day, 6 month, or 1 year requirement deadline in which the public education requirements were to be performed.

EXAMPLES FOR REPORTING PUBLIC EDUCATION VIOLATIONS (Code: 65)

EXAMPLE 1

A medium community water system (MN0212600) collects tap samples during the compliance period of July 1 to December 31, 2000. The results of the samples indicate a 90th percentile lead level of 0.020 mg/L. The system is required to complete its initial public education requirements by March 1, 2001 (i.e., within 60 days), and to submit written documentation to you by March 10, 2001, that demonstrates measures taken to comply with the public education requirements. The system submits written documentation to you by March 10, 2001, but it indicates that it has only delivered public education to its customers and has not submitted the public education information to major newspapers, facilities and organizations, and to radio and television stations that serve the community.

The CWS is in violation of the public education requirements for failure to deliver the public education requirements in accordance with §141.85 (c).

By May 15, 2001, you would report:

DTF Data Element Number	Data Value	Data Element Description

C101	MN0212600	PWS-ID
C1101	0100121	Violation ID
C1103	5000	Contaminant Code (Defaulted by
C1105	65	SDWIS/FED)
C1107	2001/03/02	Violation Type Code
		Violation Begin Date

The DTF transactions for this violation are:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
D1	MN0212600			I	C1103	5000		
D1	MN0212600			I	C1105	65		
D1	MN0212600			I	C1107	20010302		

Because the 90th percentile level is less than 0.030 mg/L, the system will not become an SNC for incurring this violation. To achieve compliance for this violation, the system is required to deliver public education to all the appropriate entities and submit a letter which demonstrates that fact.

EXAMPLE 2

A system exceeds the copper action level during the compliance period ending December 31, 1992 and does not conduct any public education.

The system is not in violation of the public education requirements because these requirements are **only** triggered by an exceedance of the **lead** action level, not of the copper action level.

EXAMPLE 3

A small system exceeds the lead action level during the compliance period January 1 - June 30, 2001. The system continues tap sampling in hopes their 90th percentiles will be at or below the action level. During the second compliance period, July 1, 2001 - December 31, 2001, it no longer exceeds the lead action level. The system does not conduct any public education during the entire calendar year.

Although this system may cease delivering public education materials once it meets the lead action level, the system is in violation for failure to deliver public education for the first period. To correct the violation, the system is required to conduct one round of public education, in accordance with §§141.85(a)-(c) [60 day notice requirements] and submit written documentation to the State that outlines what the system has done to meet its public education requirements. The system will not be required to conduct additional or continuing public education, unless its lead 90th percentile level again exceeds the action level.

An enforcement/follow-up action record should be reported and linked to this violation with the returned to compliance date you determined the system had “returned to compliance” by subsequently meeting its public education requirements.

6.0 Public Notification

The Public Notification Rule (PN) was revised May 4, 2000. States are required to adopt the revised rule by May 6, 2002. SDWIS/FED will begin accepting data under the revised PN reporting requirements as of July 15, 2001 for those states who have adopted the rule. Data which is submitted on or after May 5, 2002 needs to meet the revised format and reporting requirements to be accepted by SDWIS/FED. If it does not, it may be subject to rejection. Additional changes include a Rule Code (equivalent to the contaminant code) of 7500, a single violation type code of 75 for all PN violations with underlying NPDWR violations, and a single violation type code of 76 for "Other potential health risk situations" where there is no underlying NPDWR violation. Examples of these potential health risk situations are: water borne disease outbreaks, Nitrate levels above 10 mg/L and less than or equal to 20 mg/L for those systems allowed to meet 20 mg/L, exceedances of the Fluoride Secondary MCL, and systems operating under a variance.

PN requirements are defined within three tiers. Each tier establishes the specific public notice requirements which includes: method of delivery, due dates, frequency, and content. Tier 1 notification is required as soon as practical, but no later than 24 hours after the PWS learns of the violation or PN situation; Tier 2 notification is required no later than 30 days after; and Tier 3 notification is required not later than 1 year after.

The PN tiers for the LCRM are as follows:

- Tier 1: no Tier 1 PN requirements were defined for LCRM violations, nor were any conditions identified for potential upgrade to Tier 2 or Tier 1
- Tier 2: all treatment technique violations
- Tier 3: all monitoring and reporting violations

When is Public Notification Required?

A system that incurs any lead and copper rule violation must meet the public notification requirements contained in §141 Subpart Q.

When Does a Public Notification Violation Occur?

A public notification violation should not be confused with a LCR/LCRM public education violation. Public education requirements are informational notices in response to an exceedance of the lead action level which is a trigger for possible corrosion control rather than a violation. PN notices are to notify the public of the system's failure to meet a regulatory requirement. A PN violation occurs when the system incurs a violation of a NPDWR or other designated potential public health risk situation occurs and the system fails to provide timely notice to the public which contains the required content, meets the specific delivery requirements, and provides certification and a copy of the PN to you. The public notification timing varies with the type of violation. Tier 2 treatment technique notices are due within 30 days after the system becomes aware of the requirement and Tier 3 monitoring and reporting notices are due within 1 year. As with other reporting requirements, the system has 10 days after delivery of the notice to provide certification and a copy of the notice to the state. Failure to provide the certification and copy of the notice within the 10 day period is a reporting violation which is reported in the same manner as a failure to prepare and deliver the notice.

How Does a System Return to Compliance for this Violation Type?

A system is considered to have returned to compliance if it notifies the public in accordance with the requirements of §141 Subpart Q and/or provides certification and a copy of the notice to the State.

What Data Needs to be Reported for this Violation Type?

You should report the following data for each violation:

Public Notification Violation: Revised PN Reporting	
DTF Data Element Number	Description
C101	PWS-ID
C1101	Violation ID
C1103*	Contamination Code for lead and copper violation=7500
C1105	Violation Type Code: 75 - NPDWR Violation 76 - Other Non-NPDWR Potential
C1107**	Health Risk Situations Violation Violation Begin Date: Violation/Compliance Period Begin Date
C1109 or	Violation End Date: Not reported by the State - defaulted by
C1111	SDWIS/FED to 12/31/2015 (is replaced by the RTC date, etc.)
C1144	Violation Period Duration: Not Reported by the State
C1145	NPDWR Viol ID Link NPDWR Violation Type, Contaminant Code, Violation/compliance Period Begin Date Link

* C1103 - will be defaulted by SDWIS/FED or may be provided by the State

** C1107 - official data standard format for dates is YYYY/MM/DD; however, SDWIS/FED will accept dates in either YYYY/MM/DD or MM/DD/YYYY format.

Note: C1144 and C1145 are NEW data elements which are unique to PN violation records. These data elements contain the link data to the underlying violation. C1144 contains the violation identifier link to the underlying NPDWR violation and C1145 contains the substantive data link which consists of the underlying NPDWR violation's violation type code, contaminant code and the violation/compliance period begin date. These two data elements are restricted to PN violation type 75. Other non-NPDWR potential health risk situations, violation type code 76, do not have an underlying violation, therefore the link data elements are not allowed for violation type 76. Refer to the specific sections of the PN implementation and reporting guidance for specific details.

7.0 Consecutive Systems

What is a Consecutive System?

A consecutive system is one which obtains water from another public water system. The nature of consecutive systems varies greatly and can involve a single consecutive system that delivers water without further treatment, or a more complex arrangement involving several systems, some of which may further treat the water before delivering it to their customers.

What is Required for a Consecutive System?

Several States and public water systems have proposed the consolidation of lead and copper tap sampling and water quality parameter sampling in consecutive water systems. EPA's position on the consolidation of sampling requirements under the Lead and Copper Rule was stated in a January 10, 1992 memorandum, entitled "Consecutive Systems Regulated under the National Primary Drinking Water Regulations for Lead and Copper". Highlights and excerpts from this memorandum are presented below.

After a review of many proposals that were submitted by several States and water systems, EPA believes it is reasonable to reduce monitoring in consecutive systems if the systems can demonstrate they are interconnected in a manner that justifies treating them as a single system, in accordance with §141.29.

Prior to allowing consecutive systems to consolidate their sampling, the State is required to submit a written explanation of how the monitoring, treatment, and reporting requirements will be administered and enforced in consecutive systems that consolidate their operations for lead and copper to its EPA Regional office. These proposals should clearly identify which systems will be held accountable for violations of any of the rule's requirements. Should enforcement actions ever become necessary, it is vital that the party responsible for monitoring, or, if needed, subsequent treatment and/or other activities (including public education or lead service line replacement) be clearly identified and accept responsibility for any rule violations.

The key elements that should be contained in the proposal are:

1. Rationale for reduced monitoring

2. Explanations of the responsibilities among systems involved, including which water system(s) is (are) responsible for:
 - collecting and reporting to the State the results of the lead and copper tap monitoring and all WQP monitoring;
 - completing corrosion control requirements under §§141.81 and 141.82; and
 - lead service line replacement

Note: EPA expects that the parent water system will take responsibility for corrosion control throughout the entire area served. Depending on contractual agreements, the size and configuration of the satellite system(s), and the distance from the parent treatment facility, individual corrosion control treatment may need to be installed at a point or points other than the parent plant.

3. How the following provisions will be modified:
 - determination of 90th percentile lead and copper concentrations in the consolidated system
 - WQP monitoring to determine baseline values and ensure that OCCT is properly installed and maintained
4. If applicable, how the responsibility for public education, source water monitoring, and SOWT will differ from the responsibilities as assigned in the preamble.

Note: In 56FR26460, EPA has stated that responsibility for public education delivery resides with the retailer (i.e., the consecutive or "satellite" system) and responsibility for source water monitoring and treatment resides with the wholesaler) or "parent" system.

What Data Needs to be Reported for a Consecutive System?

Once the State has approved the written proposal, it should use this document to identify the system(s) for which it should report a particular milestone or violation.

Example:

Three water systems enter into a consecutive system agreement and provide the proper documentation to the State for approval. System One will be responsible for installing corrosion control treatment, all systems will be responsible for sampling their sites as designated in the site sampling plan, and public education will be conducted by System One, all systems will be required to replace LSL as appropriate within their distribution system.

Situation A: Initial Tap Sampling is not done - all three systems receive a monitoring violation

Situation B: Exceeds lead action level - public education not done - System One receives a violation*.

Situation C: System Three is required to replace LSLs and fails to do so - System Three receives a violation

* Public Education is similar to PN and therefore would probably be implemented similarly with the Seller notifying its immediate customers AND providing the notice to the Buyers for them to provide to

their immediate customers. However, as in the example above, exactly who and what they are responsible for is dependant upon the contract/agreement. For more specific information, consult with your Regional EPA program.

8.0 Significant Noncompliers

8.1 Overview

What is a Significant Noncomplier (SNC)?

A Significant Noncomplier (SNC) is a system that has more serious, frequent, or persistent violations. The SNC designation is reserved for those systems that are considered to pose the most serious threats to public health.

How were the SNC definitions Developed for the 1991 LCR?

The development of an SNC definition for the 1991 LCR was quite challenging due to the many unique aspects of the rule which included: treatment techniques instead of MCLs; requirements triggered by 90th percentile lead and copper levels in tap water and partly by system size; many deadlines for actions taken by the system are based on the date a State makes a determination; and several requirements are one-time occurrences or may not be in effect for several years.

We developed SNC definitions for the 1991 LCR for four types of violations (1 M/R violation type and 3 TT violation types) based on input from States and our Regional offices via workshops and national meetings. These four violation conditions SNC types were:

- Lead and Copper Initial Tap M/R
- Optimal Corrosion Control Treatment (OCCT) Installation/Demonstration
- Source Water Treatment (SOWT) Installation
- Public Education.

The violation consolidations as recommended by the State/EPA Data Sharing Committee combined the OCCT and SOWT violations which results in those SNC types to be consolidated as well. As of the January 2000 LCRMR implementation in SDWIS/FED, the number of SNC types was reduced to 3.

Why were the original four violation types selected for SNC status for the 1991 LCR?

We developed an SNC for initial tap M/R violation because the results from this sampling event determine subsequent monitoring requirements and may trigger the system into other requirements (e.g., corrosion control treatment, source water monitoring, public education). For medium and small systems, corrosion control treatment (CCT) requirements only are triggered by an exceedance of the lead or copper action level.

Although CCT requirements apply to large systems regardless of their 90th percentile lead and copper values, failure to collect initial lead and copper tap water samples often prevents a system from timely completion of each successive step in the CCT schedule.

OCCT Installation/Demonstration was selected because CCT is the major mechanism for reducing exposure to lead and copper in drinking water by minimizing the amount of lead and copper which leaches from pipes in the distribution system and from consumers' plumbing. Similarly, SOWT is necessary to reduce the concentration of lead in drinking water where high lead and copper concentrations exist in source water, although we recognized that few systems would be required to install this type of treatment. Public education also was considered to be of great significance because it informs the consumers of the health effects of lead, and the simple measures that they can take to reduce their exposure while water systems are completing treatment requirements.

Have the SNC definitions been revised as a result of the LCRMR?

We have not developed any new SNC conditions as a result of the LCRMR. However, some changes have been made to how SNCs will be determined due to the consolidation of the OCCT and SOWT installation violations into one violation code (58), changes in system public education reporting requirements, and use of December 31, 2015 as the compliance period end date for Initial Tap M/R violations, Treatment Installation/Demonstration, and Public Education treatment technique violations. The returned to compliance criteria for lead and copper initial tap, follow-up, and routine, and source water follow-up monitoring has been clarified to require two consecutive 6-month rounds of monitoring instead of one 6-month round.

Each quarter, SNCs are determined based on violations that fall within a specified 12-month period. For example, SNCs determined on April 1, 2003 would be based on systems with violations which fall in the SNC period of January to December 2002. These violations may begin and/or end inside or outside of this 12-month window. The violation(s) will qualify for SNC status as long as any part of the violation compliance period (defined by the compliance period begin date and the defaulted compliance period end date, including the SDWIS/FED defaulted date of December 31, 2015) falls within the 12-month window for SNC determination.

With the consolidation of the OCCT and SOWT installation violation types, we will no longer produce separate SNCs for these two violations. Instead, we will list a system that meets the OCCT Installation SNC criteria or SOWT Installation SNC criteria as a Treatment Installation/Demonstration SNC. Therefore, the number of discrete SNC types will be reduced to three.

With the deadline for systems to provide a letter which demonstrates it has fulfilled its public education requirements changing from the annual December 31st deadline, you will no longer be determining violations only at the end of the calendar year. Instead, the system can incur a public education violation for failure to meet its semi-annual or annual requirements (or 60-day requirements if the system is not already subject to public education requirements). Therefore, we will determine public education SNCs quarterly and not only on April 1st, as was previously our procedure. In addition, multiple public education violations could occur which would result in the SNC status for that system to continue as additional violations are incurred.

As a result of the changes to reporting of the violation/compliance period end date, SDWIS/FED will add a default value of December 31, 2015 for Initial Tap M/R, Treatment Installation/Demonstration (OCCT/SOWT) violations, and Public Education violations. When a return to compliance (SOX/EOX) or “intentional no action” (S06/E06) enforcement/follow-up action is linked to one of these violations, the compliance period end date of December 31, 2015 will be replaced by the enforcement/follow-up action date. Until the action is reported and linked to the one of these SNC violations, the system will continue to qualify for SNC status.

Using the December 31, 2015 defaulted end date ensures the violations remain in the SNC/Exceptions Tracking System as SNCs until compliance is achieved and they are appropriately returned to compliance.

Previously, systems with initial tap lead and copper violations were allowed additional time to return to compliance prior to their being identified as SNC. Large systems had 3 months, medium had 6 and small had 12 months. In addition, SDWIS/FED allowed an additional 3 months for the RTC data to be reported to SDWIS/FED for medium and small system. This additional time was intended to reduce the number of potential SNCs during the initial implementation of the LCR by targeting those systems who did not take timely corrective actions. We are well past the initial tap monitoring periods for all but the very new systems, therefore, the additional time is no longer appropriate. From April 2001 forward, systems will be evaluated against the revised SNC criteria in the 4th month following the quarterly compliance period as are all other SNC/violation conditions. Returned to compliance will be based on the system having completed all appropriate requirements and having monitored for 2 consecutive 6-month periods for the monitoring and reporting conditions listed above. In certain circumstances, completion of the specific requirement may be overtaken by other events, making completion moot. In those circumstances, the State should report the new follow-up action code of “intentional no action” instead of RTC. See Table 3 “When Intentional No Action Applies” for examples.

What are the SNC Definitions for the three SNC types?

Table 12 below provides the SNC definitions for the three types of SNCs.

Table 12 SNC Definition Under the Lead and Copper Rule Minor Revisions		
SNC Type	Systems Affected	Definition
Initial Pb/Cu Tap M/R	All System Sizes	A System which failed to meet all monitoring and reporting requirements
Treatment Installation / Demonstration (OCCT or SOWT)	Only systems with 90th percentile lead levels of ≥ 0.030 mg/L	System with this violation & 90 th percentile lead level of ≥ 0.030 mg/l in most recent monitoring period

<p align="center">Table 12 SNC Definition Under the Lead and Copper Rule Minor Revisions</p>		
Public Education	Only systems with 90th percentile lead levels of ≥ 0.030 mg/L	System with this violation & 90 th percentile lead level of ≥ 0.030 mg/l in most recent monitoring period

The remainder of this section provides a detailed discussion of each SNC type, including criteria for returning to compliance, and examples of how a system would become an SNC.

8.2 Lead and Copper Initial Tap M/R SNC

A system will become an SNC if it fails to achieve compliance with the initial lead and copper tap monitoring requirements by collecting 2 consecutive 6-month rounds of samples. Medium and Small systems need only collect one 6-month round should they exceed the lead or copper action level during that monitoring. Once the system has been identified as an SNC, it will be displayed as an unaddressed SNC until one of the “appropriate” formal enforcement actions or the RTC (SOX/EOX) is reported linked to the M/R violation.

A system is considered to have returned to compliance for an Initial Lead and Copper Tap M/R violation if:

- The required number of samples have been properly collected and analyzed in accordance with Sections 141.86(a)-(c) and 141.89 for the required 2 consecutive 6-month rounds, *and*
- All required monitoring information has been reported in accordance with Section 141.90(a) as follows:
 - Lead and copper results including the location of each site and the criteria for its selection;
 - Documentation for each tap sample for which the system requests invalidation;
 - 90th percentile lead and copper levels (unless you are calculating these levels for the system, as allowed under the LCRMR), **and if applicable**;
 - Documentation of locations for non-first draw sites.

If a system meets the above criteria for having returned to compliance, you or EPA is required to report Compliance Achieved (returned to compliance) in the enforcement action record, and successfully link this action to the violation. SDWIS/FED will create an SNC record if any of the violation period (the violation/compliance period begin date through the end date) falls within the 12 month SNC period being processed.

As discussed in Section 5.4.1, Initial Lead and Copper Tap M/R, most systems have completed initial tap monitoring. However, some systems may still be required to conduct initial tap monitoring, and the original timing between events (compliance periods, return to compliance, reporting of return to compliance, and SNC determination) would still apply. For example, a new system would be required to conduct initial tap monitoring. Also, a system which was granted a pre-existing waiver from the State prior to April 11, 2000

and was previously not required to conduct initial monitoring, would now be required to conduct one round of initial tap monitoring by September 30, 2000. For those systems with pre-existing waivers which do not meet the September 30, 2000 deadline, the compliance period begin date would be April 12, 2000 and would have a defaulted end date of December 31, 2015, until such time as an RTC record is successfully linked to the violation. The violation/compliance period begin date to be reported to SDWIS/FED would be the first day after the end of the missed monitoring period, October 1, 2000.

8.3 Treatment Installation SNC

A Treatment Installation SNC is defined as a system that incurs a Treatment Installation/Demonstration violation and also has a 90th percentile lead level of 0.030 mg/l or higher in its most recent monitoring period.

An SNC for Treatment Installation (OCCT) is considered to have returned to compliance if it :

- Installs State-designated treatment, *and*
- Submits proof of proper installation and operation, *or*
- Demonstrates that OCCT already exists.

An SNC for Treatment Installation (SOWT) is considered to have returned to compliance if it :

- Installs State-designated treatment, *and*
- Submits proof of proper installation and operation.

8.4 Public Education SNC

A Public Education SNC is defined as a system that incurs a public education violation and its 90th percentile lead level is 0.030 mg/l or higher in its most recent monitoring period.

A Public Education SNC is considered to have returned to compliance if it provides a letter that demonstrates that the required program elements have been completed as follows:

- For CWSs, informing the following, using the mandatory language, in all appropriate languages:
 - consumers via notices
 - facilities/organizations in contact with sensitive populations via pamphlets and brochures
 - consumers via major newspapers, television, and radio (*not required for systems serving 3,300 or fewer people if so written in your revised drinking water regulations.*)
- For NTNCWSs, informing consumers, using the mandatory language, through:
 - posting
 - distribution of pamphlets and brochures.

9.0 Enforcement/Follow-up Action and Violation Link Reporting

Enforcement/Follow-up actions and violation link data are to be reported using the SDWIS/FED DTF C1200-PWS-ENFORCEMENT ACTION form E1. We have provided a brief overview some DTF examples which illustrate how to report this data. The general format for the C1200 Enforcement/Follow-up Action Record is shown below:

Table 13 a Data Transfer Form E-1 SDWIS/FED DTF C1200 PWS-ENFORCEMENT Database Record Description		
DTF Data Element Number	Data Element Format	Data Element Description
C1201	C,7	Enforcement-ID
C1203	Date, 8 (yyyy/mm/dd)	Enforcement Action Date
C1205	C,3	Enforcement Action Type Code
X5000, or	C,40	Links enforcement to violations by a date range. Violations of any type, falling between these dates will be linked. (Not valid for RTC links)
Y5000, or		Links enforcement to violations by the violation ID
Z5000, or		Links enforcement to violations by the violation type, contaminant, and violation/compliance period begin date
J5000		Links enforcement to violations by the violation type, contaminant/rule code, violation/compliance period begin date, and a projected end date (date range). Reserved for long term compliance situations. (Not valid for RTC links)
Notes: C = character data		

The accompanying DTF transaction for this record is shown below.

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
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Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
E1	ZT0000000	0100055		I	C1203	20010315		
E1	ZT0000000	0100055		I	C1205	SOX		
E1	ZT0000000	0100055		I	Y5000	0100005		

The Enforcement record attributes are defined below:

Table 13 b SDWIS/FED Example DTF Transactions for Enforcement Data		
DTF Data Element Number	Data Value	Data Element Description
C101	ZT0000000	PWS-ID
C1201	0100001	Enforcement ID Pos 1-2 = FFY, Pos 3-7 = State Assigned ID
C1203	2001/01/239	ID
C1205	SOX	Enf-Action-Date
Y5000	0100231	Enf-Action-Code = SOX for RTC
		Link Record Y5000 serves as a mechanism for linking the follow-up action to the violation by the violation ID. Other link methods include X5000, Z5000, and J5000
<p>Note: Not shown in this table, the DIM Code in Column 26 of the DTF table above provides instructions to the edit/update software for processing the data for the following DTF Data. Values are I=Insert, M=Modify, D=Delete.</p>		

How do I report Enforcement/Follow-Up and RTC actions?

An enforcement/follow-up action, including RTC is reported to SDWIS/FED by providing a valid action code, the date of the action and the link data required to link the enforcement/follow-up action to the appropriate violation(s).

The list of valid enforcement/follow-up action codes and descriptions are available in the SDWIS/FED On-Line Data Dictionary and other SDWIS/FED documentation. A list of enforcement/follow-up action codes which are required to be reported is listed at the end of this section. The enforcement action code is comprised by three code values which are defined below:

- first position = E or S (EPA or State took the action)
- second position = I, F, O (Informal, Formal, Other - formality of action)
- third position = Various letters of the alphabet and other standard characters including /, !, + which stand for the specific action taken.

What link methods are available?

There are several methods to link the follow-up action to the violation, only one of which can be used at a time. For more detailed information on these enforcement to violation linking methods, please consult the SDWIS/FED Data Entry Instructions. Examples of enforcement/follow-up action data and each link method are provided below:

Y5000 (Associated Violation IDs). The Y5000 transaction link is the preferred method for linking actions to violations. Each enforcement is specifically linked to the violation by the Violation ID (record identifier). The DTF transactions for this enforcement action record are:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
E1	WY1160644	0200001		I	C1203	20011102		
E1	WY1160644	0200001		I	C1205	SOX		
E1	WY1160644	0200001		I	Y5000	0100001		

However, if the primacy agency does not maintain/supply its own record IDs (i.e., it uses group generation codes, or re-numbers these ID s in subsequent submissions), another alternative method should be used.

Z5000 (Associated Violation Contaminant Groups). The Z5000 transaction links actions to violations based on violation type, contaminant code, and compliance period begin date. In this method, the violation type, contaminant and begin date is stored in SDWIS/FED and any violation meeting this criteria will be linked, even if it is submitted to SDWIS/FED at a later date. In this example, the violation type is 51, contaminant code is 5000, and compliance period begin date is 07/01/1992, and would be reported in the DTF format as follows:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
E1	TX1230567	9200007		I	C1203	19920829		
E1	TX1230567	9200007		I	C1205	SOX		
E1	TX1230567	9200007		I	Z5000	51500019920701		

X5000 (Associated Violation Range). The X5000 transaction links actions to violations based on compliance begin and end dates for violations. In this example, a bilateral compliance agreement (SFK) was signed on February 15, 1993 and addressed all violations occurring between January 1 - December 31, 1992. The date

range could be any appropriate date range which covers the violations contained in the action. This action and link method would be reported as follows:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
E1	TX1230567	9300055		I	C1203	19930215		
E1	TX1230567	9300055		I	C1205	SFK		
E1	TX1230567	9300055		I	X5000	1992010119921231		

NOTE: ALL violations for this system, regardless of contaminant or violation type, which have a compliance period begin or end date that falls within the date range, would be linked to this enforcement. Linking RTC actions with the X5000 method is not valid. Therefore, care should be used with this option and it is not recommended.

J5000 (Associated J5000 Group). The J5000 transaction links actions to violations based on violation type, contaminant code and/or rule, and date range. The J5000 is only valid for long term compliance issues and was intended for formal enforcement actions. It is not appropriate for linking RTC records to violations. It was designed to capture violations during compliance periods where construction was required and additional violations would likely occur between the issuance of the formal action and the construction completion or compliance achievement date. If the system continues to have violations after the end date and the system has not RTC, the addressed flag in the SNC/Exceptions Tracking System reverts to unaddressed and will be displayed on the Management Tracking Report. This link method should be used cautiously. Again, it is not appropriate for RTC.

In this example, the administrative order action (SFL) was issued on November 2, 1992, the violation type is 64 (lead service line replacement), contaminant code is 5000, and the date range is from 01/01/1992 to 05/02/1993. The end date should reflect the compliance due date contained in the enforcement action. The DTF format for this action is as follows:

1-2	3-11	12-18	19-25	26	27-31	32-71	72-74	75-80
Form ID	PWS ID	Qual 2	Qual 3	DIM Code	Data Element Number	Data Value	Blank	Batch
E1	ZT0000000	9300005		I	C1203	19921102		
E1	ZT0000000	9300005		I	C1205	SFL		
E1	ZT0000000	9300005		I	J5000	5150001992010119930502		

The specific RTC requirements vary greatly between rules and violation types - the use of a blanket action (X5000 link method) or RTC action is not always appropriate. This method also results in conflict with

addressed violation status, SNC records and the mixed enforcement link usage by states. The appropriate use of this link method is being reviewed. We recommend you not use it routinely and that you consult with your Region on the impacts of its use, etc.

Mixing enforcement link methods within for a single enforcement action is not allowed.

Seek assistance from your Regional Data Management Coordinator and/or Regional Enforcement Coordinator for additional information on appropriate use of link methods.

**STATE ENFORCEMENT FOLLOW-UP ACTION
THAT ARE REQUIRED TO BE REPORTED TO SDWIS/FED**

<i>Enforcement Action Conducted by the State</i>	<i>Enforcement Code</i>
*Formal Notice of violation (NOV) issued	SFJ
*Bilateral Compliance Agreement signed	SFK
*Administrative Order (w/o penalty) issued	SFL
*Administrative Order (w/penalty) issued	SFO
*Administrative Penalty assessed	SFM
*Civil Case referred to Attorney General	SF9
*Civil Case filed	SFQ
*Civil Case concluded	SF%
*Criminal Case referred to Attorney General	SF&
*Criminal Case filed	SFV
*Criminal Case concluded	SFW
*Compliance achieved	SOX
*Variance/Exemption Issued	SOY
*No additional Formal Action needed	SO+
*Intentional No-Action	SO6
Public Notice issued	SFG
Boil Water Order	SFH
Show-cause Hearing	SFN
Civil Case under development	SFP
Consent Decree/Judgment	SFR
Default Judgment	SFS
Injunction	SFT
Temporary Restrain Order/Preliminary Injunction	SFU
Case appealed	SF3
Case dropped	SF4
*Denote actions that will address significant non-compliers (SNCs).	

10.0 Sources for Additional Information

Additional technical information on LCRMR SDWIS/FED reporting can be obtained by contacting Fran Haertel of the Information Management Branch, Implementation and Assistance Division, Office of Ground Water and Drinking Water at 214-665-8090. General SDWIS/FED information can be obtained by contacting SDWIS/FED User Support in the Information Management Branch, Office of Ground Water and Drinking Water (OGWDW), at 202-260-7077. Information is also available at the following EPA WEB site www.epa.gov/safewater/leadcop.html.

Additional System and User documentation relating to LCR/LCRM reporting is available in the SDWIS/FED Users Guide, the On-Line Data Dictionary, and the SDWIS/FED Data Entry Instructions. These documents and the On-Line Data Dictionary application are available on EPA's Internet web site [Insert web address] under SDWIS/FED/Documentation. Copies can be obtained by contacting Valerie Love-Smith of the Information Management Branch, OGWDW, at 202-260-5596.

Additional technical information regarding rule implementation or compliance determination issues can be obtained by contacting the Protection Branch, Drinking Water Protection Division, OGWDW at 202-260-7077.