



State Water Resources Control Board

Division of Drinking Water

Name of System:	Rainer Mutual Water Company System No.: 4300520
Population:	132 Service Connections: 40
	uals served each day by the system (Number of residences and/or buildings served
Sources: Moody	Gulch Stream
	(List all water supply sources - wells, springs, lakes, etc.)
Map or Diagram:	Attach a map or diagram showing the location of routine and repeat sample sites and the entry point of water from the source into the system.
Water System Type:	Community Water System
	(i.e. State Small, Community water system, Non-community systems, or Transient-non-community systems)
	ROUTINE SAMPLING
Sampling Frequency: _	
	oling sites below. One sampling site is usually sufficient. Complex water systems with rate areas require each zone or area to be sampled routinely.
pressure zones or sepa	Tate areas require each zone of area to be sampled routinery.
Sampling schedule Si	te 1 on odd months and Site 2 on even months.
Routine Sample Site No	b. 1: 18230 Idylwild Road (by playhouse along fence beside Idylwild Road)
of being notified of the location must have a consite, please list each see which serve one service building. Systems with the	REPEAT SAMPLING ains coliform bacteria, the water system will collect a repeat sample set within 24 hours result. Please list the location of the repeat sample set below. Each routine sample presponding set of repeat sample locations. If you have more than one routine sample set of corresponding repeat sample site on a separate sheet. Non-community systems to connection (i.e. a building) may collect all the four follow-up samples from within the cone or more groundwater wells must conduct triggered source monitoring at each ground the sort of being notified of a positive routine sample.
Repeat Sample Site No	. 1: 18230 Idylwild Road (by playhouse along fence beside Idylwild Road) (Collect one sample at the original routine sample site)
Repeat Sample Site No	. 2: 19255 Raineri Lane (behind house in middle of house) (Collect one sample within five connections upstream)
Repeat Sample Site No	. 3:18200 Idylwild Road (left of front door) (Collect one sample within five connections downstream)
Repeat Sample Site No	. 4:20490 Madrone
	om another water system in a recent time prior to conducting your routine sampling, ater system from which you purchase water within 24 hours of being notified of a sitive sample result

E. JOAQUIN ESQUIVEL, CHAIR | EILEEN SOBECK, EXECUTIVE DIRECTOR

Name of wholesaler contact:	
Phone number of wholesaler contact:	
Routine Sample Site No. 2: System Tap (West End of Wright Main)	
REPEAT SAMPLING If a routine sample contains coliform bacteria, the water system will collect a repeat sample set within 24 ho of being notified of the result. Please list the location of the repeat sample set below. Each routine sam location must have a corresponding set of repeat sample locations. If you have more than one routine sam site, please list each set of corresponding repeat sample site on a separate sheet. Non-community syste which serve one service connection (i.e. a building) may collect all the four follow-up samples from within building. Systems with one or more groundwater wells must conduct triggered source monitoring at each groundwater well within 24 hours of being notified of a positive routine sample.	ple ple ms the
Repeat Sample Site No. 1: System Tap (West End of Wright Main) (Collect one sample at the original routine sample site)	
Repeat Sample Site No. 2: 20340 Hebard Road (by garage on right side) (Collect one sample within five connections upstream)	
Repeat Sample Site No. 3: 19953 Wright Road (Right of separate garage door) (Collect one sample within five connections downstream)	
Repeat Sample Site No. 4: 18230 Idylwild Road (by playhouse along fence beside Idylwild Rd.	
SAMPLING DURING THE MONTH FOLLOWING A POSITIVE SAMPLE If one or more samples are positive for total coliform in a month, the water system is required to collect to routine samples during the following month. These five samples can be collected over the course of the moor all on the same day. Please list the location from which these extra samples would be collected:	
 1. <u>20490 Madrone</u> 2. <u>19255 Raineri Lane</u> 3. <u>20340 Hebard Road</u> 4. <u>19953 Wright Road</u> 5. <u>Site 1 Routine</u>, <u>System Tap</u> 	
PERSONNEL AND NOTIFICATION	
Sampler: Gary Mackenzie (and Gary Mackezie's company personnel) (Sample collection must be performed by a person trained in sample collection. Provide name of sampler)	
Laboratory: Soil Control Lab (831) 724-5422 -or- Alpha Analytical Laboratories (925) 828-6226 (Provide the name and phone number of the certified lab doing your water analysis. Arrangements must be made for weekend and holiday analysis)	I
Notification: Laboratory is to notify persons designated below within 24 hours whenever a sample is four to contain coliform bacteria:	ıd
1. Gary Mackenzie (831) 682-1848 (831) 682-1848	

NOTIFICATION OF THE DIVISION: The water system will notify the State Water Resources Control Board – Division of Drinking Water, within 24 hours whenever a sample contains fecal coliform, *E. coli* bacteria or whenever a follow-up sample is coliform positive.

(Daytime Phone #)

(Daytime Phone #)

(408) 348-3934

Santa Clara District Office:

(Name)

(Name)

2. Marty Feldman

510-620-3474 (day or night, leave message)

(Evening Phone #)

Eric Lacy, District Engineer:	510-620-3453
Tsungchu George Chien, Staff Engineer:	510-620-3461

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NOTES

When responding to a laboratory report of bacterial contamination, keep in mind the following:

- 1. Coliform bacteria should not be present in drinking water and the presence of coliforms indicates a potentially serious problem. Appropriate investigation should be performed immediately.
- 2. Check water systems components such as water sources, filtration and /or chlorination equipment and storage tanks for indications of unusual conditions or problems.
- 3. Correct problems immediately, do not wait for results of follow-up samples to take action.
- 4. If the System has two or more total coliform-positive samples in the same month, or fails to take every required repeat sample after any single total coliform-positive sample, the System must conduct a Level 1 Assessment and conduct a public notice. Templates for the Level 1 Assessment can be found at the following SWRCB website: https://www.waterboards.ca.gov/drinking_water/certlic/drinkingwater/rtcr.html
- 5. If a triggered source sample result is *E. coli*-positive, the system must conduct the Tier 1 notification and collect five (5) additional source samples within 24 hours of being notified of the *E. coli*-positive sample result, and contact the District office.
- 6. Templates for many public notifications are available at the SWRCB website: http://www.swrcb.ca.gov/drinking_water/certlic/drinkingwater/Notices.shtml

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