RTCR monitoring and reporting compliance checklist for Public Water Systems serving 1000 people or less

Please note: If the PWS is subject to the Ground Water Rule (GWR), this guidance document does not cover any of the GWR requirements. Please contact the ADEQ rule specialist, or visit the GWR webpage at http://www.azdeq.gov/environ/water/dw/gw_rule.html for further information.

- These tables provide a checklist of actions that systems must take if they have a violation or certain events occurred (for example, a total coliform-positive sample, an *E. coli*-positive sample or an assessment trigger) during their monitoring period.
- Systems must take appropriate actions to protect public health in a timely manner, for example, notify the regulatory agency, issue public notification, conduct an assessment, monitor at a more frequent rate, etc.
- **Go through the entire checklist,** excluding the items that are not applicable, for example, for community water systems, skip the items that are specific to non-community water systems.

PWS Name			
PWS ID		**RTCR Monitoring Period (MM/YY)**	

A. Do you have a total coliform-positive ROUTINE sample?	**Yes** ☐	**No** ☐
If you answered yes, take the following action(s):	Check when completed	
• Notify your regulatory agency.	☐	
• Provide a copy of the Microbiological Sample Siting Plan (MSSP) to your regulatory agency if the MSSP has not been submitted previously.	☐	
• Take 3 repeat samples within 24 hours of being notified of your result, and send these samples to the lab immediately. **Refer to the MSSP for sampling locations.**	☐	
• Make sure the lab tests the total coliform-positive ROUTINE sample for the presence of *E. coli.*	☐	
If you answered no, continue with your ROUTINE monitoring.		

B. Do you have an *E. coli*-positive ROUTINE sample?	**Yes** ☐	**No** ☐
If you answered yes, take the following action(s):	Check when completed	
• Notify your regulatory agency by the end of the business day (5 pm) when you learn of the positive result, or by the end of the next business day if you learn of the positive result after the agency office is closed and the agency has no after-hours notification system.	☐	

C. Do you have a total coliform-positive REPEAT sample?	**Yes** ☐	**No** ☐
If you answered yes, take the following action(s): **See Section E, for triggering the Level 1 Assessment.**	Check when completed	
• Make sure the lab tests the total coliform-positive REPEAT sample for the presence of *E. coli*	☐	

D. Do you have an *E. coli* MCL violation? If yes, indicate what caused the violation, below.	**Yes** ☐	**No** ☐
• An *E. coli*-positive repeat sample following a total coliform-positive routine sample.	☐	☐

• A total coliform positive repeat sample following an *E. coli*-positive routine sample.	☐	☐
• Failure to collect all required repeat samples following an *E. coli*-positive routine sample.	☐	☐
• Failure to test for *E. coli* when any of the repeat samples is total coliform-positive.	☐	☐
If you answered yes to any of the items in "D" above, take the following action(s):	Check when completed	
• Notify your regulatory agency by the end of the business day (5 pm) when you learn of the *E. coli* MCL violation, or by the end of the next business day if you learn of the MCL violation after the agency office is closed and the agency has no after-hours notification system.	☐	
• Notify the public by issuing a Tier 1 public notice (PN) (**Boil Water Advisory**) as soon as practical but no later than 24 hours after learning of the *E. coli* MCL violation.	☐	
• Within 10 days of issuing the public notice (PN), provide a copy and the Certificate of Public Notice Distribution to the regulatory agency and copy ADEQ.	☐	
• Make sure a Level 2 Assessment is conducted. See Item F.	☐	
• If you are on quarterly or annual monitoring, go to increased (MONTHLY) monitoring beginning the following month.	☐	

E. Did you trigger a Level 1 Assessment? If yes, indicate what caused the trigger, below.	**Yes** ☐	**No** ☐
• Two or more total coliform-positive samples in the same sampling period (include results of both routine and repeat samples).	☐	☐
• Failure to take every required repeat sample after any single routine total coliform-positive sample.	☐	☐
If you answered yes to any of the items in "E" above, take the following action(s):	Check when completed	
• Have the owner or operator perform a Level 1assessment.	☐	
• After the Level 1 assessment has been conducted, correct all sanitary defects found and submit the Level 1 Assessment form to your regulatory agency within 30 days of learning of the trigger.	☐	

F. Did you trigger a Level 2 Assessment? If yes, indicate what caused the trigger, below.	**Yes** ☐	**No** ☐
• An *E. coli* MCL violation (See Section D., above).	☐	☐
• A second Level 1 trigger within a rolling 12-month period.	☐	☐
• For systems on approved reduced annual monitoring, a Level 1 treatment technique trigger in two consecutive years.	☐	☐
If you answered yes to any of the items in "F" above, take the following action(s):	Check when completed	

• Check with your regulatory agency to determine who can conduct a Level 2 Assessment.	☐
• After the Level 2 Assessment has been conducted, correct all sanitary defects found and submit the Level 2 Assessment form to your regulatory agency within 30 days of learning of the trigger.	☐

G. Do you have a treatment technique violation? If yes, indicate what caused the violation, below.	**Yes**	**No**
• Failure to conduct a required assessment within the required time period.	☐	☐
• Failure to perform corrective actions within the required timeframe.	☐	☐
• Seasonal system: Failure to complete a primacy agency-approved start-up procedure.	☐	☐
If you answered yes to any of the items in "G" above, take the following action(s):	Check when completed	
• Report the violation to your regulatory agency no later than the end of the next business day after you learn of the violation.	☐	
• Notify the public by issuing a Tier 2 public notice as soon as practical but no later than 30 days after learning of the violation.	☐	
• Within 10 days of issuing the public notice (PN), provide a copy and the Certificate of Public Notice Distribution to the regulatory agency and copy ADEQ.	☐	

H. Do you have a monitoring violation? If yes, indicate what caused the violation(s), below.	**Yes**	**No**
• Failure to take all required routine and additional routine samples.	☐	☐
• *E. coli* not analyzed following a total coliform-positive routine sample.	☐	☐
If you answered yes to any of the items in "H" above, take the following action(s):	Check when completed	
• Report the violation to your regulatory agency within 10 days of learning the violation.	☐	
• Notify the public by issuing a Tier 3 public notice within a year of learning of the violation.	☐	
• Within 10 days of issuing the public notice (PN), provide a copy and the Certificate of Public Notice Distribution to the regulatory agency and copy ADEQ. *Community water systems may utilize the Consumer Confidence Report to issue the PN, if the system meets the requirements in rule.*	☐	

I. Do you have a reporting violation? If yes, indicate what caused the violation(s), below.	**Yes**	**No**
• Failure to submit the monitoring report (within 10 days after the end of the monitoring period) after system properly conducts monitoring.	☐	☐

• Failure to submit the assessment form within required timeframe after system properly conducts an assessment.	☐	☐
• Failure to notify your regulatory agency of an *E. coli*-positive sample within the required timeframe.	☐	☐
• Failure of a seasonal system to certify that they have completed the start-up procedure before serving water to the public (the notice must be submitted at least 10 days prior to serving water).	☐	☐
If you answered yes to any of the items in "I" above, take the following action(s):	Check when completed	
• Notify the public by issuing a Tier 3 public notice within a year of learning of the violation.	☐	
• Within 10 days of issuing the public notice (PN), provide a copy and the Certificate of Public Notice Distribution to the regulatory agency and copy ADEQ. *Community water systems may utilize the Consumer Confidence Report to issue the PN, if the system meet the requirements in rule.*	☐	

J. If you are a non-community water system (including seasonal systems) on a QUARTERLY monitoring schedule, did any of these events occur?	**Yes** ☐	**No** ☐
• A Level 2 Assessment or two Level 1 Assessments are triggered in a rolling 12-month period.	☐	☐
• An *E. coli* MCL violation (See Section D., above).	☐	☐
• A coliform treatment technique violation (See Section G., above).	☐	☐
• Two monitoring violations in a rolling 12-month period (See Section H., above).	☐	☐
• One monitoring violation and one Level 1 Assessment in a rolling 12-month period.	☐	☐
If you answered yes to any of the items in "J" above, take the following action(s):	Check when completed	
• Begin monthly monitoring the month following the trigger event(s).	☐	

K. If you are a non-community water system (including seasonal systems) on an ANNUAL monitoring schedule, did any of the following events occur?	**Yes** ☐	**No** ☐
• Level 2 Assessment or two Level 1 Assessments are triggered in a rolling 12-month period.	☐	☐
• An *E. coli* MCL violation (See Section D., above).	☐	☐
• A coliform treatment technique violation (See Section G., above).	☐	☐
If you answered yes to any of the items in "K" above, take the following action(s):	Check when completed	
• Begin monthly monitoring the month following the trigger event(s).	☐	

L. If you are a non-community water system (including seasonal systems) on an ANNUAL monitoring schedule, did the following event occur?	**Yes**	**No**
• A monitoring violation (See Section H., above).	☐	☐
If you answered yes to any of the items in "L" above, take the following action(s):	Check when completed	
• Begin QUARTERLY monitoring the calendar quarter following the trigger event(s).	☐	

M. If you are a community water system on a QUARTERLY monitoring schedule, did any of the following events occur?	**Yes**	**No**
• Loss of certified operator (the system did not have continuous coverage).	☐	☐
• A Level 2 Assessment or two Level 1 Assessments triggered in a rolling 12-month period.	☐	☐
• An *E. coli* MCL violation (See Section D., above).	☐	☐
• A coliform treatment technique violation (See Section G., above).	☐	☐
• Two monitoring violations in a rolling 12-month period.	☐	☐
If you answered yes to any of the items in "M" above, take the following action(s):	Check when completed	
• Begin MONTHLY monitoring the month following the trigger event(s).	☐	

For assistance, please contact your regulatory agency or ADEQ Rule Specialist:

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