VERMONT
ENVIRONMENTAL CONSERVATION

FORM

Drinking Water and Groundwater Protection Division

Monthly Operations Report
for Groundwater Systems and Systems Purchasing Groundwater

For the Month of October 2014 WSID# 5096 Name of Water System Jericho Underhill Water District

Town/City Underhill Operator Name Marc Maheux Phone: 802-899-3810

Please provide the following information:

1. Is a master meter which measures total water production of the system installed and functioning
YES [X] NO [ ] (If YES, please complete items 2-6; if NO, skip to item 5)

2. Meter Reading on Last day of reporting month: 36,395,500 Gallons
3. Meter reading on Last day of previous month: 34,453,900 Gallons

4. Difference in readings: 1,941,600 Gallons

5. Have the results of all water quality compliance analyses performed during this month been submitted to the Water Supply Division? YES [X] NO [ ]

   (If NO, please submit a copy of all results with this monthly report.)

6. If you disinfect, fluoridate or otherwise treat your water on any day of the month, or if your operating permit requires that you report daily values of flow (or other), you must also complete the reverse side of this form.

7. For systems with population greater than 3,300 (Continuous monitoring for free chlorine residuals is required):
   - Did continuous monitoring equipment fail at any time this month? YES [ ] NO [ ]
   - If so, were grab samples collected every 4 hours until continuous monitoring equipment was returned to service? YES [ ] NO [ ]
   - If continuous monitoring equipment failed, give:
     _____ Date & _____ Time equipment failed
     _____ Date & _____ Time it was returned to service

I certify, as the **owner or authorized representative*** of this water system, that I have completed this form, or reviewed it if completed by another, and that I have taken the necessary steps to ensure that the information shown is correct. In making this certification, I understand that civil and or criminal penalties may be imposed for submitting false information

Marc Maheux 11/1/14 Marc Maheux

Signature Date Please Type or Print Name

*__Owner__ means the person who owns or has an ownership interest in a Public or Non-public water system. An Owner may designate an **Authorized Representative** that has the authority to act on the owner's behalf in all matters regarding the Public or Non-public water system, and is designated to be the contact person in place of the owner for all communications from the Secretary regarding the water system. A form designating an authorized representative and signed by the Owner must be on file with the Drinking Water and Groundwater Protection Division.

Groundwater Systems and Systems Purchasing Groundwater

For the Month of October 2014 WSID# 5096 Name of Water System Jericho Underhill Water District

Minimum free chlorine residual required for 4 Log viral inactivation (mg/l):

Day of Month	Water Production	Disinfection/Chlorination (Free CL, in mg/l)		Fluoride (mg/l)	PO4
	Metered Values (Gallons/Day)	Entry Point Daily Low[1]	Distribution System (When taking coliform sample)	Entry& Distribution Point	Entry Point
1	*52000*	0.16		0.9 #196	0.96
2	52000	0.12	0.04	0.9	0.96
3	76329	0.10		1.2	1.02
4	76329	0.18		1.0	1.02
5	76329	0.20		0.9	1.02
6	76329	0.19		1.0	1.02
7	76329	0.32		1.0	0.92
8	76329	0.19		0.9 #197	0.92
9	76329	0.22		1.1	1.00
10	54100	0.20		1.0	1.25
11	54100	0.11		0.8	1.25
12	54100	0.20		1.0	1.14
13	54100	0.19		1.0	1.15
14	54100	0.11		0.9	1.15
15	54100	0.19		1.0 #198	1.31
16	54100	0.09		1.0	1.31
17	62128	0.13		1.0	1.09
18	62128	0.09		1.0	1.09
19	62128	0.28		1.1	1.09
20	62128	0.30		1.0	1.09
21	62128	0.31		1.1	1.09
22	62128	0.09		1.1 #199	1.09
23	62128	0.18		1.0	1.09
24	50857	0.10		1.0	0.90
25	50857	0.08		1.0	0.90
26	50857	0.11		1.0	0.91
27	50857	0.07		1.0	0.91
28	50857	0.07		1.0	0.91
29	50857	0.07		1.0 #200	0.94
30	50857	0.06		1.0	0.94
31	133700	0.05		1.0	1.14
Totals	1941598	0.15			1.05

Note: [1] Daily low for systems with continuous monitoring. Others – during the hour of peak flow.

***Please submit this form within 10 days after the end of the month to the following address:**

Drinking Water and Groundwater Protection Division
1 National Life Drive, Main, 2nd Floor
Montpelier, VT 05620-3521
Toll free 1-800-823-6500
Out of State 1-802-241-3400
Fax 1-802-828-1541

This form is available electronically at http://www.vermontdrinkingwater.org