Nontransient Noncommunity Water Supply Capacity Development Plan

Under Michigan Rule, 325.1004, Sec. 4. (2) (4), 325.1008, Sec. 8 and 325.1015, Sec 15. (2), this form must accompany construction plans submitted for all **new nontransient noncommunity public water supplies**, and existing transient supplies applying to become a nontransient water supply.

Technical Plan:

New nontransient noncommunity public water supplies shall complete an "Application and Permit to Install Water Supply Facilities" from Department of Environment, Great Lakes, and Energy (EGLE) or an authorized local health department. The completed application must include plans and specifications for the new waterworks system.

An existing transient water supply that will become a nontransient water supply shall provide plans and specifications of the waterworks system. The information must include a site plan showing the existing well location isolation from buildings, property boundaries, potential sources of contamination, etc., and all available information regarding the well, e.g., Water Well and Pump Record. A sanitary survey must be completed by the local health department to assess the status of compliance of the water supply prior to approval for use as a nontransient noncommunity water supply.

Managerial Plan:

For all nontransient noncommunity water supplies, the owner is required to identify an operator responsible for the water supply. Operator certification and nine hours of continuing education training every three years is required. Identify the person who is or will be the certified operator for the nontransient water supply, including their signature and date.

Operator Name	
Street Address	
City, State, Zip Code	
Telephone	
Water Supply Serial Number (WSSN)	
Operator Signature	Date
Detection of records	
Retention of records: Bacteria sample results	
Chemical sample results	
Documentation of corrective actions 10 years	

Emergency Response Plan:

An emergency response plan for an appropriate response to temporary loss of normal water service is required as part of the managerial capacity assessment. The attached emergency response plan worksheet is to be completed and submitted with the rest of this application.

A Financial Plan: A Financial Plan Worksheet is included in this document to help identify relevant costs and sources of information.	
Provide cost analysis/estimates for the following (from the worksheet):	
Estimated cost for construction of new nontransient noncommunity water supply system	
Is connection to a community water supply system available?	
If connection to community water is available, provide the cost for connecting to the community system	
Annual EGLE Water Supply Fee	
Annual operator certification and training	
Annual operation and maintenance for utilities, treatment, etc.	
Annual sample collection and laboratory analysis	
Emergency repairs and contingency plan funds	
By signing this document. I certify that I have assessed the actual and notential costs and	

By signing this document, I certify that I have assessed the actual and potential costs and responsibilities of operating a noncommunity water supply and have the ability to acquire and manage sufficient resources to maintain the technical, managerial and financial capacity of the water system as it relates to the requirements of the Safe Drinking Water Act. I am the supply owner, manager, chief financial officer, or chief executive officer.

Operator Signature	Name (print)
Title	Date

For LHD use	Reviewer	Date of Review
Technical Capacity Plan		
Emergency Response Plan		
Managerial Capacity Plan		
Financial Capacity Plan		

Worksheet 1 Emergency Response Plan for Drinking Water Emergencies Noncommunity Public Water Supplies

Water Supply Name					
Water Supply Serial					
Number (WSSN)			Soui —	rce IDs	
water supply, it is necess the context of this plan, e of water supply, and thre normally would require of may also warrant such a been determined unsafe approval of the appropria dependent on providing a to not consume the pipe and contacts to address local health department f	sary temere tats of losur ction to dr ate lo an ap d wat such	o act promptly argencies could incomplete could incomplete could incomplete could incomplete could be actioned as a could be actioned as	nd effectively to protectlude complete loss of alism to water supply Threats or contaminate certain situations whorities, it may be pocies. If approved, op f water for consumpt This work sheet is in an emergency occu	y pertaining to the drinking ect public health and welfare. In f water pressure, contamination of Complete loss of water ation with unknown substances where water is flowing but has essible to operate the facility with peration for an interim period is ion and notification to the users attended to outline procedures rs, immediately contact your	
				on(s) in routine charge of water one number (include land line	
Name	Title)	Phone	Email	
	Owi	ner			
	Оре	erator			
<u>Contacts</u> List contacts for	or em	nergencies involvi	ing drinking water.		
Local Health Departmen	nt	Name		Phone & Email	
Department of Environment, Great Lak and Energy	Environment, Great Lakes,			Phone & Email	
District					
Lansing					
Certified Laboratories	ertified Laboratories Address			Phone & Email	
(Lab for emergency use*)					
*Lab that would be open on the weekend or in another region that may not be affected by the emergency event.				affected by the emergency event.	
Contractors		Name		Phone & Email	
Well Driller					

Plumber				
Excavator				
Alternate Water Source	Name			Phone
Purchased water (bottled)				
(Other alternate approved source)				
Method of dispensing water	to individu	als in sanitary	/ manner:	
	•		•	may be directly connected to the
potable water supply. Indicat addressed.	e if any of	the listed wat	er uses are i	n the facility and thus need to be
addressed.				
Type of Water Using Fixture		Yes / No	Location	
Drinking fountains to shut of				
Ice machines (discard conte				
Post mix soft drinks to disco	nnect			
Coffee, tea, juice, soup, ven	dina			
Other	9			
		<u> </u>	<u> </u>	
Note: If the water supply lose	oc proceur	o or connot b	o used due to	n uncafo conditions, any
				red to the water supply will need
to be disinfected per the man				od to ano mater capply illimine a
		-,-	_	
Public Notification Consum	ers are to b	oe advised of	a problem w	ith the water and availability of
an alternate source of water f			•	•
	d any othe	r potential dri	nking water o	outlets that cannot be shut off.
List locations to be posted				
Retain copy of signed and dated public notice.				
List any other means to notify public				
(Schools/Child Care Centers/C		amps are recor	mmended to pi	rovide notice to parents.)

Consult your local health department for the required public notification language and format. You must have approval from your local health department prior to resuming use of your water supply for consumption.

Worksheet 2 Financial Plan Worksheet Cost Estimates for New Nontransient Noncommunity Water Supplies

This worksheet is to provide general information and ranges of cost for completing the Financial Plan portion of a Capacity Assessment Application. The intent is for the water supply owner to identify costs of operating a public water system including contingencies and plan accordingly. All costs may not be applicable to your water supply.

Construction Costs Estimates	
Well Construction/Pump Installation	
Storage Tank(s)	_
Treatment Equipment	_
Permit Fees	_
Total	_
Information sources: water well drilling contractors, water well pump installers, suppliers, water treatment firms, le health department fee schedule, consulting firms.	 ocal
Cost of Connection to Municipal Water (if available)	
Tap fee	
Hook up (excavation, materials, labor, etc.)	
Usage (estimated annual water bills)	
Total	
Information Sources (municipality, contractors, consultants)	_
Operator Certification and Training Certification Costs	
Examination/renewal	_
	_
Wages (3 hours per week to full time depending on system)	_
Outsource Operator	_
Training Costs (minimum of 3 hours continuing ed per year)	
Total	
Information sources: employee salary structures, travel costs, certified operators for hire, consulting firms	
Annual Water Supply Operation & Maintenance	
Electricity	
Treatment Chemicals/Treatment Equipment/Service	
Backflow Prevention Device Testing	_
EGLE Annual Water Supply Fee	_
Other	_
Total	_
Information sources: utilities, chemical/equipment suppliers, plumbing contractors, consulting firms.	

Water Sample Collection and Analysis

Annualized costs for analysis based on <u>routine</u> sampling for all parameters with waivers and <u>EGLE</u> laboratory fees (subject to change).

Analyte	Estimated Cost Annually		Actual Cost
Total Coliform	4 @ \$16	\$64.00	
Nitrate	1 @ \$18	18.00	
Arsenic	1 @ \$18 / 3 yrs.	6.00	
Metals	1 @ \$102 / 3 yrs.	34.00	
Cyanide	1 @ \$25 / 3 yrs.	8.00	
VOC	1 @ \$100 / 6 yrs.	17.00	
SOC	3 @ \$365 / 6 yrs.	183.00	
PFAS	1 @ \$290	290.00	
Lead Copper	5 @ \$26 / 6 months	260.00	
Total		\$590.00*	

^{*}Your cost may differ per year due to size of system, sampling requirements, or water quality issues.

Information sources: certified drinking water laboratories, consulting firms, EGLE monitoring requirements.

Disinfection/Flushing		
Bottled Water (cost for 2 week supply)		
Pump Replacement		
Emerging Contaminants Testing		
Other		
	Total	

Information sources: well drilling/pump contractors, bottled water suppliers.