

# Sanitary Survey Rating

**PWSID:** \_\_\_\_\_

**Water System Name:** \_\_\_\_\_

**Survey Date:** \_\_\_\_\_

**System Category (Points):** -

421 - Consecutive Systems/Distribution Only  
 488 - Treatment Systems/Wholesalers  
 599 - Both Treatment and Distribution

## 1. System Management and Operation (94)

	Requirement	Points Range	Deduction	Comments
A.	Record Keeping 0400-45-01-.20	(0)	Narrative	
B.	Construction Projects 0400-45-01-.05, 0400-45-01-.17	(1-5)		
C.	Submission of Monthly Operations Reports 0400-45-01-.17	(0)	Narrative	
D.	Reporting Requirements 0400-45-01-18	(4-30)		
E.	Public Notification 0400-45-01-.19	(3-10)		
F.	Facility Maintenance Fee	(0)	Narrative	
G.	Enforcement - TCA §68-221-701 et seq	(4-10)		
H.	Emergency Operations Plan 0400-45-01-.17	(3)		
Deficiency Subtotal				

## 2. Operator Compliance (23)

	Requirement	Points Range	Deduction	Comments
A.	Certified Operator – Plant and Distribution System 0400-45-01-.17(1) and 0400-49-01- 04	(3-15)		
Deficiency Subtotal				

## 3. Source (25)

	Requirement	Points Range	Deduction	Comments
A.	Source Adequacy 0400-45-01-.02, .05, .16, .17(13) and .34(3)	(3-5)		
B.	Intake 0400-45-01-.05, .17	(2)		
C.	Wellhead/Springbox Construction 0400-45- 01-.05(12),16 and 17(3) and (16)	(2)		
D.	Source Protection Plans 0400-45-01-.34	(1-2)		
Deficiency Subtotal				

#### 4. Treatment (153)

	Requirement	Points Range	Deduction	Comments
A.	Aerator 0400-45-01-.05, .17	(2)		
B.	Chemicals / Chemical Feeders 0400-45-01- .05 (8) and .17,36	(2)		
C.	Mixing 0400-45-01-.02, .05, .17	(2)		
D.	Flocculation 0400-45-01-.02, .05, .17	(2)		
E.	Sedimentation 0400-45-01-.02, .05, .17	(2)		
F.	Filtration / Alternative Technology 0400-45- 01-.17(12) and (27)	(2-30)		
G.	Re-Wash / Filter-to-Waste 0400-45-01- .17(35)	(2)		
H.	Turbidimeters / Calibration 0400-45-01- .05(11), .17, .31, .39	(2-4)		
I.	Disinfection/Calibration 0400-45-01-.02, .17, .31, .36	(2-30)		
J.	Disinfection Contact Time 0400-45-01-.02, .17,31	(2-4)		
K.	Master Meter 0400-45-01.17(2) and (3)	(1-2)		
L.	Maintenance of Equipment, Buildings and Grounds 0400-45-01-.02, .17(3), (17) and (19)	(1)		
M.	Laboratory Facilities 0400-45-01-.02, .14, .17(3)	(1-3)		
N.	Safety 0400-45-01-.02	(2)		
O.	Sludge Handling/Backwash Handling 0400- 45-01-.05	(2)		
P.	Sanitary Conditions 0400-45-01-.17(17)	(2)		
Q.	Fluoridation Techniques 0400-45-01-.06, .12, .17	(2)		
R.	Design Capacity 0400-45-01-.05(10)	(2-4)		
S.	Filter Backwash Recycling 0400-45-01-.31(9)	(1)		
Deficiency Subtotal				

### 5. Monitoring, Data Verification and Compliance (175)

	Requirement	Points Range	Deduction	Comments
A.	Laboratory-Process Monitoring (excluding Turbidity and Chlorine Residual) 0400-45-01-17(3)	(2-4)		
B.	Bacteriological Monitoring	(3-6)		
C.	Bacteriological Compliance 0400-45-01-.06	(4-7)		
D.	Turbidity Monitoring	(2-3)		
E.	Turbidity Compliance	(4-7)		
F.	Chlorine Residual Monitoring 0400-45-01-.17,31,36, 40	(2-3)		
G.	Primary Chemicals Monitoring	(2-3)		
H.	Primary Chemicals Compliance	(4)		
I.	Lead and Copper Monitoring 0400-45-01-.33	(2-3)		
J.	Lead and Copper Action Level 0400-45-01-.33	(3-5)		
K.	Disinfection/Disinfection By-Products and Precursors Monitoring 0400-45-01-.36, .37, .38	(2-3)		
L.	Disinfection/Disinfection By-Products and Precursors Compliance 0400-45-01-.06, .36	(2-30)		
M.	Secondary Chemicals 0400-45-01-.12	(2)		
N.	Secondary Chemicals Compliance 0400-45-01-.12	(3)		
O.	Cryptosporidium Monitoring 0400-45-01-.39	(0)	Narrative	
Deficiency Subtotal				

### 6. Finished Water Storage (25)

	Requirement	Points Range	Deduction	Comments
A.	Adequate Storage 0400-45-01-.17(14)	(3-15)		
B.	Inspection and Maintenance of Reservoirs, Tanks and Clearwell 0400-45-01-.17(16), (17), (33) and (34)	(1-10)		
Deficiency Subtotal				

**7. Pumps, Pump Facilities and Controls (18)**

	Requirement	Points Range	Deduction	Comments
A.	Pump Facilities 0400-45-01-.17(9) and (13)	(1-4)		
B	Maintenance of Pumping Equipment 0400-45 - 01-.17(13)	(1-3)		
Deficiency Subtotal				

**8. Distribution System and Cross Connection Controls (86)**

	Requirement	Points Range	Deduction	Comments
A.	Notification, Inspection, Disinfection and Sample Collection of New or Existing Facilities 0400-45-01-.17(8), (19)	(3-5)		
B	Flushing Program / Blow Offs 0400-45-01-.17(10) and (23)	(3-4)		
C.	Fire Hydrants 0400-45-01-.17(18)	(0)	Narrative	
D.	Adequate Pressure 0400-45-01-.17(9)	(5)		
E.	Map of Distribution System 0400-45-01-.17(15)	(3)		
F.	Approved Cross Connection Policy or Ordinance and Plan 0400-45-01-.17(6)	(4)		
G.	Working Cross Connection Program 0400- 45-01-.17(6)	(3-9)		
H.	Percent Estimated Water Loss( real loss/water produced)	(0)	Narrative	
Deficiency Subtotal				

**Rating**

- 95% - 100% Approved
- 90% - 94% Provisionally Approved
- 0% - 89 % Unsatisfactory

Total Deficiency Points	
Overall Rating	
	100%

Inspectors Signature Cameron Byrd

Additional Comments/Explanation: