



**WASHINGTON TOWNSHIP
HEALTH DEPARTMENT**

43 SCHOOLEY'S MOUNTAIN ROAD
LONG VALLEY, MORRIS COUNTY, NEW JERSEY

Telephone (908) 876-3650
Fax (908) 876-5138

DIRECTIONS FOR COMPLETING THE CERTIFICATE OF POTABILITY APPLICATION

Washington Township Board of Health Ordinance requires that prior to the transfer of the title of any residential dwelling serviced by an individual water supply, a certificate of potability shall be obtained. The certificate will indicate the water supply meets the current primary potable water supply standards of the state of New Jersey and the Washington Township Board of Health.

To obtain a certificate of potability, you must provide the following information:

1. *A completed application:*

- **On this application you must provide the source of water.** This is a very important piece of information. If you do not know the source of water, we advise you not to assume that it is a "well". We may have information on your water source in our files or you may contact a licensed well pump installer, well driller or plumber to provide you with information on the well. **Dug wells, springs and cisterns are not approved sources of water and we will not issue the certificate of potability if the source is not a true "well".** Washington Township Ordinance prohibits you from transferring title without a certificate of potability. If you discover that the source is a dug well, spring or cistern, you must apply to the NJDEP and this department for a permit to drill a new well and abandon the unused supply.
- **The buyer's name and address is required.** Your certificate will not be processed without this information. A copy of the completed certificate will be mailed to the buyer or the attorney if that information is provided.
- **It is very important to find out if the water supply is connected to water treatment devices.** You must ask the seller about this information and the date the unit was last serviced.

2. *Water results from a licensed laboratory testing for the following parameters:*

1. total coliform bacteria*
2. gross alpha*
3. uranium*
4. nitrates*
5. volatile organics*
6. pH
7. iron
8. manganese
9. lead**
10. arsenic*
11. copper **(required in addition to the Private Well Testing Act requirement)

The results are valid for (12) months for all parameters except total coliform bacteria, which is valid for (6) months. Total coliform bacteria, gross alpha, uranium, nitrates, arsenic, and volatile organics must meet primary standards before a certificate of potability will be issued. The remaining secondary parameters are not required to pass state standards; however, all non-compliant results will be noted on the certificate.

- The laboratory or an authorized agent of the lab must sample the water. Please be sure that they are aware of the required tests, as incomplete results will delay the issuance of the certificate. All holding time requirements on the samples must be met. ***You may not bring the water to the laboratory. If the water is improperly sampled, the results will not be valid for use for the certificate.***
- The water supply must be taken in accordance with the Private Well Testing Act (N.J.A.C. 7:9E). If water treatment/purification devices are in place, an additional test for total coliform bacteria, plus any other primary drinking water parameter(s) treated for by the system, must be performed at a primary cold water non-aerated tap with the treatment device functioning.

* indicates a primary standard

** indicates an action level

Please bring the original water results to the health department, or have the laboratory fax the results directly to our department (Fax: 908- 876-5138). If the laboratory wishes to email the results they can be sent to health@wtmorris.net.

You will need to provide the following items before we will process the certificate:

- Complete application including the buyers and sellers names and addresses
- Source of Water- if you are unsure, do not guess.
- Knowledge of water treatment devices- do not guess.
- Water results (see #2 above).
- **\$50.00 application fee is required. Cash or check is accepted. Please make checks payable to the Washington Township Health Department and be sure to include the Block and Lot numbers on the check.**

Once we receive a completed application with valid results and payment, you may pick up the certificate the next working day. If you would like the original certificate mailed, please be sure to specify this request on the application and provide a correct address.

For your convenience, the following is the list of parameters and their associated standards:

<u>Parameter</u>	<u>Cannot Exceed</u>
Total Coliform	0, negative, or <1
Nitrates	10mg/L
Volatile Organics	Vary
pH	6.5-8.5 pH units
Iron	0.3 mg/L
Manganese	0.05 mg/L
Lead	Action Level is 0.015 mg/l or 15 ppb
Copper	Action Level is 1.3 mg/l or 1,300 ppb
Arsenic	0.005 mg/l or 5 ppb
Gross Alpha (Initial)	5 pCi/l
Gross Alpha (Final)	15 pCi/l
Uranium	30 ug/L

Please do not hesitate to contact us at (908) 876-3650, Monday – Friday, 8:00 a.m. – 4:00 p.m. if you have any questions regarding this procedure.

WATER TESTING LABORATORY REFERENCE LIST

Advanced Water Technology Inc.

286 Houses Corner Rd.
Sparta, NJ 07871

phone: 999.365.8378

Agra Environmental and Laboratory Service

85 East Basset Highway
Dover, NJ 07801

phone: 973.989.0010

Aqua Pro Tech Laboratory

1275 Bloomfield Ave.
Fairfield, NJ 07004

phone: 973.227.0422

CRC Services LLC

63 Holly Dr.
Eatontown, NJ 07724

phone: 732.548.7363

CSL Water Quality

PO Box 4246
Warren, NJ 07059

phone: 908.647.1400

Environmental Laboratory Network

15 Windsor Rd.
West Milford, NJ 07480

phone: 973.728.8044

Garden State Laboratory

140 Hillside Ave.
Hillside, NJ 07205

phone: 908.688.8900

NJ Analytical Laboratories

1590 Reed Rd.
Pennington, NJ 08534

phone: 609.737.3477

Ocean Environmental

31 Parallel St.
Nutley, NJ 07110

phone: 866.323.9355

Reliable Water Testing

101 Landing Rd.
Landing, NJ 07850

phone: 201.274.673

W.A.T.E.R Works

364 Glenwood Avenue
East Orange, NJ 07017

phone: 973.678.3787

Well Qualified

1 Old Wood Lane
Newton, NJ 07860

phone: 888.543.4028

(b) Regulations for chlorination are as follows:

1. The administrative authority shall approve the use of gas chlorination for public noncommunity and nonpublic water systems only if the use of hypochlorite feed systems are impractical for the specific application.
2. The chlorinating device shall be capable of producing a chlorine residual after the contact period as required pursuant to N.J.A.C. 7:10-11.16(e)3. A chlorine residual test kit shall be used to verify that the correct application rate is maintained.
3. The chlorination device shall be protected from freezing.
4. Gas chlorinating devices shall be located in above-grade separate rooms with an outside entrance only and shall have proper ventilation including an exhaust fan near floor level with an outside switch. An observation window to permit visual inspection without opening the door of the chlorine room shall be provided. The doors of such rooms shall open outward and shall be provided with panic type hardware (that is, a push bar for opening the door) on the inside of the door. A room heater shall be provided. Chlorine scale and storage rooms shall be equipped in the same manner.
5. Operation of the chlorinating devices shall be synchronized with the operation of the well pump.

(c) Regulations for disinfection by ultra-violet light are as follows:

1. Ultra-violet tubes shall be jacketed so that a temperature of 105 degrees Fahrenheit is maintained.
2. The jacket on the ultra-violet light tubes shall be quartz or high -silica glass with similar optical characteristics.
3. The ultra-violet light disinfection unit shall be designed to permit frequent mechanical cleaning of the water contact surface of the ultra-violet light tube jacket without disassembly of the unit.
4. The maximum water depth in the disinfection chamber, measured from the ultra-violet light tube surface to the outer walls of the chamber, shall not exceed three inches.
5. Ultra-violet radiation at a level of 2,537 Angstrom shall be applied at all points throughout the disinfection chamber at a minimum rate of 16,000 microwatt seconds per square centimeter.
6. An automatic flow control valve, accurate within the expected pressure range, shall be installed to restrict flow to the maximum design flow of the ultra-violet disinfection unit.

7. An accurately calibrated ultra-violet light intensity meter, filtered to confine its sensitivity to the range of disinfection spectrum, shall be installed in the wall of the disinfection chamber at the point of greater water depth from the light transmitting source.

8. A flow diversion valve or automatic shut-off valve controlled by the ultra-violet light intensity meter shall be installed so as to permit water flow into the water system only when the minimum radiation level specified at (c) 5 is applied. When power is not being supplied to the unit, the valve shall be in a closed (fail-safe) position to prevent the flow of water into the water system.

9. The ultra-violet light disinfection unit shall be installed in a manner such that it cannot be bypassed.

(d) Rules for disinfection by ozonation are as follows:

1. Ozonation may be used for disinfection of any public noncommunity or nonpublic water system.
2. Ozonation shall not be used as a substitute for postchlorination if the water system is required to maintain a chlorine residual in the distribution system pursuant to (a) 2 above.
3. Equipment used for ozonation shall be durable and corrosion resistant.

7:10-12.33 Chemical and physical treatment

(a) General requirements for chemical and physical treatment are as follows:

1. A public noncommunity water system using a surface water source is subject to the requirements of N.J.A.C. 7:10-11.8, 11.12, 11.13 and 11.14.
2. Treatment facilities shall be capable of producing water that meets the applicable State primary and/or secondary drinking water regulations at N.J.A.C. 7:10-5 and 7.
3. Treatment units shall be of sufficient capacity to produce the daily volumes of water required pursuant to N.J.A.C. 7:10-12.7.
4. All filter, shells, ion-exchange pressure tanks and chemical solution feed drums shall be constructed of corrosion resistant materials or contain non-corrodible liners.
5. Point of entry treatment (POET) devices may be used to treat water system in any public noncommunity or nonpublic water system. The Department recommends that such devices be certified to meet appropriate ANSI/NSF standards 42, 44, 53, 55, 58, and 62 as amended and supplemented, or the equivalent. POET devices shall also meet ANSI/NSF Standard 61 if used in public noncommunity water systems. In addition, POET devices shall meet the following requirements.

**WASHINGTON TOWNSHIP HEALTH DEPT., MORRIS COUNTY, NJ
APPLICATION FOR CERTIFICATE OF POTABILITY**

PLEASE PRINT

PURCHASE PROPERTY

Street Address: _____

Block: _____ Lot: _____

SOURCE OF WATER SUPPLY

- WELL:** A hole or excavation deeper than it is wide, that is drilled, bored, core driver, jetted, dug, driven or otherwise constructed for the purpose of removal of water from the subsurface.
- DUG WELL:** A water table that is excavated by means of picks, shovels, or similar hand-tools.
- SPRING:** A natural surface feature where ground water issues from the rock or soil onto the land or into a body of water.
- CISTERN:** A tank for the collection of rain water draining from a roof or roofs, which water is intended to be used for potable purposes.

Is there a water treatment device on this water supply? () Yes () No

If yes, please provide the type of treatment and date of last service _____

Is there a UV light on this water supply? () Yes () No

If yes, please see attached requirements for the ultra violet light, which must comply with the Safe Drinking Water Act of New Jersey. A Certificate of Potability will not be issued if the UV light does not meet these requirements!!

SELLER'S INFORMATION:

Name: _____

Mailing Address: _____

Address to which seller's original should be forwarded (if different than above, i.e. Attorney info.):

BUYER'S INFORMATION:

Name: _____

Mailing Address: _____

Address to which buyer's copy should be forwarded (if different than above, i.e. Attorney info.):

Name and phone number of contact person: _____

Name and phone number of person completing this form: _____

Date of Application: _____	Agency Use Only
	Fee Received: _____
Original copies of water test results and \$50.00 fee must accompany application.	