

QuestionNum
Response Type

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Correct

Sanitary Survey Questions --- Transient
Response

General / SDWIS Site Visit Info

1	Reason for the visit.	DropDown	None
2	Date of the survey	Date	None
3	Status of site visit.	DropDown	None
4	Source evaluation:	DropDown	None
5	Treatment sytem evaluation:	DropDown	None
6	Distribution system evaluation:	DropDown	None
7	Finished water storage evaluation:	DropDown	None
8	Pump and pumping facility evaluation:	DropDown	None
9	Monitoring and requirements evaluation:	DropDown	None
10	System management and operations evaluation:	DropDown	None
11	Operator compliance evaluation:	DropDown	None
12	Security evaluation:	DropDown	None
13	Financial evaluation:	DropDown	None
14	Other element evaluated:	DropDown	None
15	Last name of inspector:	Text	None
16	First name of inspector:	Text	None
17	Inspector organization	DropDown	None
18	Next inspection due date:	Date	None
19	Water System notification date?(The date you notified them of the deficiency)	Date	None

General / Background Info

Name/Location:

1	Name of public water system:	Text	None
2	PWS number:	Text	None

General / Background Info

Classification:

1	SDWIS Activity Status	DropDown	None
2	Classification of the system?	DropDown	None
3	Transient Population:(Do not change population, make a note and do it manually in SDWIS)	Numeric	None

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General / Background Info

Staff:				
1	2	AC's Last Name:	Text	None
2	2	AC's First Name:	Text	None
3	2	AC's Address:	Text	None
4	2	AC's City:	Text	None
5	2	AC's State:	Text	None
6	2	AC's Zipcode	Text	None

Regulations / General

1	1	Has the system made modifications to its source, treatment process, chemicals used or distribution system without state approval?	YesNo	No
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Regulations / Monitoring

1	1	Is the PWS out of compliance with any monitoring requirements?	YesNo	No
2	2	Are there any outstanding violations?	YesNo	No

Sources / General

General:				
1	3	Are there any abandoned, unused, or auxiliary sources?	YesNo	No
2	1	Does the system have redundant sources?	YesNo	None
3	2	Is a manifold used to combine sources?	YesNo	None

Sources / Groundwater

Wells / SW Protection:				
1	2	Is the upper termination of the well protected? (bollards etc)	YesNo	Yes
2	2	Is the well cased and sealed in such a manner that surface water cannot enter the well?	YesNo	Yes

Sources / Groundwater

Wells / Construction:				
1		What is the depth of the well in feet?	Numeric	None
2		What is the diameter of the well casing?	Numeric	None
3	2	Does the casing terminate at an adequate elevation?	YesNo	Yes
4		Is the well located in a pit or is it buried?	YesNoLeadi	No

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4.01			
6	2		
7	3		
8	2		
9	3		
10	3		
11	2		
12	2		

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YesNo	Yes
YesNo	Yes
YesNo	None
YesNo	Yes
YesNo	None
YesNo	No
Text	None
Text	None

Sources / Groundwater

Springs / SW Protection:

1	2	Is the spring housed in a permanent structure and protected from contamination including the entry of surface water, animals and dust?	YesNo	Yes
2	2	Is the spring located in the proximity of any potential sources of contaminants within 300'?	YesNo	Yes
3	2	Is surface water and drainage ditches diverted away from the spring?	YesNo	Yes
4	3	Is there a screened overflow and drain pipe?	YesNo	None

Sources / Surface Water

Reservoirs, Lakes, Rivers, Streams / SW Protection:

1	2	Is the area around the intake(s) free from potential sources of pollution?	YesNo	Yes
2		How often are intakes inspected?	DropDown	None

Sources / Surface Water

Roof Catchments / Construction:

1	2	Is the roof in good condition?	YesNo	Yes
2	2	Is the gutter system in good condition?	YesNo	Yes
3	2	Is the collection chamber properly designed and constructed?	YesNo	Yes
4	2	Is the vent screened?	YesNo	Yes
5	2	Is the drain / overflow screened?	YesNo	Yes

Treatment / General

Cross-Connections:

1		Are cross-connections present at the water treatment plant?	YesNo	No
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Treatment / Activated Carbon

Granular:

1	3	What is the purpose of the granular activated carbon (GAC) ?	Text	None
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 2 When was the last time the GAC was replaced?

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Text None

Treatment / Aeration

General:

1	What is the aeration treatment used for? (eg Radon, Co2, pH adjustment)	Text	None
2	3 Does the aerator have a hepa filter on the air intake?	YesNo	Yes
3	4 Are air intakes and out takes screened?	YesNo	Yes
4	3 Is the air intake located a safe distance from the air outtake?	YesNo	Yes
5	3 Is the outlet air protected from human consumption?	YesNo	Yes

Treatment / Aeration

Cascade:

1	5 Answer all general questions.	Text	None
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Treatment / Aeration

Diffused:

1	5 Answer all general questions.	Text	None
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Treatment / Aeration

Packed Tower:

1	5 Answer all general questions.	Text	None
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Treatment / Aeration

Slat Tray:

1	5 Answer all general questions.	Text	None
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Treatment / Aeration

Spray:

1	5 Answer all general questions.	Text	None
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Treatment / Chlorination

General:

1	3 Is chlorination used for disinfection?	YesNo	None
2	2 Is chlorine residual testing equipment provided and is it capable of measuring residuals to the nearest 0.1 milligrams per liter?	YesNo	Yes
3	Are Monthly Operating Reports being completed and submitted to the DWP by the 10th of the following month?	YesNo	Yes
4	Is adequate contact time provided to complete the chemical reactions involved?	YesNo	Yes

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Treatment / Chlorination

Hypochlorination:

1	3	Is the solution tank covered to minimize corrosive vapors?	YesNo	Yes
2	2	Is the day tank clean and in good condition?	YesNo	Yes
3		Is all chemical feed equipment operable and in good condition?	YesNo	Yes
4	3	Is there a multi-valve on the chemical feed pump?	YesNo	Yes
5		Are the chemical feeders paced to flow?	YesNo	Yes
6		Is the chlorine NSF approved?	YesNo	Yes

Treatment / Filtration

Cartridge:

1	3	What is the typical time between filter replacements?	Text	None
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Treatment / Filtration

Filtered:

1	3	What is the filter removing?	Text	None
2	3	Are the filter's serviced anually and a maintenance log kept?	YesNo	None
3	3	Does the filter backwash?	YesNo	None
4		Where is the filter backwash waste sent?	DropDown	None
5	3	Is there a proper air gap on the discharge pipe?	YesNo	Yes

Treatment / Ion Exchange

General:

1	4	What is the ion exchange system removing?	Text	None
2.01	3	Is a bypass installed around unit?	YesNo	Yes
2.02	3	Is regular maintenance/servicing completed on the treatment unit (recommend annually)?	YesNo	Yes

Treatment / Ion Exchange

Ion Exchange:

1	3	Are salt brine tanks covered and corosion-resistant?	YesNo	Yes
2	3	Where is the filter backwash waste sent?	Text	None
3	3	Is there a proper air gap?	YesNo	Yes

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Treatment / Reverse Osmosis

Reverse Osmosis:

1	3	What is the treatment objective for this particular membrane?	Text	None
2	3	Is pretreatment being utilized?	YesNo	Yes
3	3	Where is the waste stream disposed of?	Text	None

Treatment / Ultraviolet Radiation

General:

1	1	Was UV system installed after 2006?	YesNoLeadi	None
1.01	1	If yes, was this system approved in conjunction with DWP 2006 UV policy?	YesNo	Yes
2	2	What model is the UV system?	Text	None

Treatment / Ultraviolet Radiation

Ultraviolet Radiation:

1	2	Was the UV installed due to bacterial contamination of the system?	YesNo	None
2	2	If the PWS is a seasonal system, is the UV cleaned and inspected prior to seasonal start-up each year?	YesNo	Yes
3		Is there a maintenance log? Is it up to date?	YesNo	Yes
4	3	Is the bulb replaced annually or per manufacturers recommendations?	YesNo	Yes
5	2	Has the system ever failed or shut down for a period of time?	YesNo	No
6	2	Does the UV unit have an automatic shut down if the unit goes into alarm?	YesNo	Yes
7	2	Is there a 5 micron pre-filter installed? (required post 2006)	YesNo	Yes
8		Is there a by-pass?	YesNo	None
9	3	If yes, is there an instruction/safety tag indicating that this should not be py-passed?	YesNo	Yes

Pump Stations / General

1	3	Is all of the pumping equipment operable and in good condition? (includes submersible, centrifugal, verticle, chemical pumps)(ex. Leaking water from aparatus, excessive vibration, noise)	YesNo	Yes
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Distribution / General

1	3	Does the facility have a raw water sampling point and is it adequate? (Will be needed for Ground Water Rule 2009)	YesNo	None
2	2	Is the sample site plan completed, up to date, and reviewable?	YesNo	Yes
3	3	Is the TCR sample point adequate?	YesNo	Yes
4	3	Is the TCR sampling procedure adequate?	YesNo	Yes

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5 Are any Cross-connections present in the distribution (mop sinks, hose's, soap dispensers etc).

YesNo No

Storage / Gravity

Design:

1	2	Is the elevation of the tank sufficient to maintain distribution pressure throughout the system?	YesNo	Yes
2	2	Is the storage structure secure from unauthorized access?	YesNo	Yes
3	2	Does the storage reservoir have a watertight roof or cover and is it sloped so that water will drain?	YesNo	Yes
4	1	What is the tanks usable capacity (volume)? ALWAYS change this question to read "0" then proceed to next question to add correct tank	Numeric	None
5		What is the storage tanks usable capacity (volume)? (Add correct volume here under Measures table)	Numeric	None
6	2	What is the volume measured unit? ALWAYS change this question to read "blank" then proceed to next question to add correct measured unit.	DropDown	None
7		What is the effective volume measured unit? (Add correct measured unit (gallons) here under Measures table)	DropDown	None
8	2	What is the tank material?	DropDown	None

Storage / Gravity

Components:

1	2	Does the tank appear to be structurally sound?	YesNo	Yes
2		Are overflow pipes:	Header	None
2.01	3	Terminated a minimum of 12 inches above the ground?	YesNo	Yes
2.02	3	Screened or fitted with a flapper gate?	YesNo	Yes
2.03	2	Directly connected to a storm sewer or sanitary sewer?	YesNo	No
3		Are air vents:	Header	None
3.01		Turned downward or covered from rain?	YesNo	Yes
3.02	2	Screened?	YesNo	Yes
4		Are access opening covers water tight, and raised above the tank roof to prevent surface water from entering?	YesNo	
5	2	Are outside access hatches locked?	YesNo	Yes

Storage / Gravity

Maintenance:

1	2	Are there cracks in the walls or covers of the storage tank?	YesNo	No
2		What is the frequency of interior inspection and cleaning?	Text	None
3	2	Is leakage evident at time of inspection?	YesNo	No

Storage / Clear-Wells

Design:

1	3	Is the clear-well constructed with baffles?	YesNo	Yes
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2	2	Does the storage reservoir have a watertight roof or cover and is it sloped so that water will drain?	YesNo	Yes
3	2	Is the storage structure secure from unauthorized access?	YesNo	Yes
4	3	What is the tanks usable capacity (volume)? ALWAYS change this question to read "0" then proceed to next question to add correct tank	Numeric	None
5		What is the storage tanks usable capacity (volume)? (Add correct volume here under Measures table)	Numeric	None
6	3	What is the volume measured unit? ALWAYS change this question to read "blank" then proceed to next question to add correct measured unit.	DropDown	None
7		What is the effective volume measured unit? (Add correct measured unit (gallons) here under Measures table)	DropDown	None
8	3	What is the construction material?	DropDown	None

Storage / Clear-Wells

Components:

1	2	Does the tank appear to be structurally sound?	YesNo	Yes
2		Are overflow pipes:	Header	None
2.01	3	Terminated a minimum of 12 inches above the ground?	YesNo	Yes
2.02	3	Screened or fitted with a flapper gate?	YesNo	Yes
2.03	2	Directly connected to a storm sewer or sanitary sewer?	YesNo	No
3		Are air vents:	Header	None
3.01	2	Turned downward or covered from rain?	YesNo	Yes
3.02	2	Screened?	YesNo	Yes
4		Are access opening covers water tight and raised above the tank roof to prevent surface water from entering?	YesNo	Yes

Storage / Clear-Wells

Maintenance:

1	2	Are there cracks in the walls or covers of the in-ground concrete storage tanks?	YesNo	No
2		What is the frequency of interior inspection and cleaning?	DropDown	None
3	2	Is leakage evident at time of inspection?	YesNo	No

Storage / Hydropneumatic

Design:

1	3	Is the tank located above the ground surface and completely housed?	YesNo	Yes
2	1	What is the tanks usable capacity (volume)? ALWAYS change this question to read "0" then proceed to next question to add correct tank	Numeric	None
3		What is the storage tanks usable capacity (volume)? (Add correct volume here under Measures table)	Numeric	None
4		What is the volume measured unit? ALWAYS change this question to read "blank" then proceed to next question to add correct measured unit.	DropDown	None
5		What is the effective volume measured unit? (Add correct measured unit (gallons) here under Measures table)	DropDown	None
6		What is the construction material	DropDown	None
7	2	Is the tank one that has a compressor? If yes, is food grade lubricant used?	YesNo	None

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Storage / Hydropneumatic

Components:

1	3	Are the interior and exterior surfaces in good condition?	YesNo	Yes
2	2	Are tank supports adequate and structurally sound?	YesNo	Yes
3	2	Is leakage evident at time of inspection?	YesNo	No
4	2	Are there provisions designed in for draining and cleaning of the storage tank	YesNo	None

Storage / Under Ground

Design:

1	2	Does the storage reservoir have a watertight roof or cover and is it sloped so that water will drain?	YesNo	Yes
2	2	Is the storage structure secure from unauthorized access?	YesNo	Yes
3	1	What is the tanks usable capacity (volume)? ALWAYS change this question to read "0" then proceed to next question to add correct tank	Numeric	None
4		What is the storage tanks usable capacity (volume)? (Add correct volume here under Measures table)	Numeric	None
5		What is the volume measured unit? ALWAYS change this question to read "blank" then proceed to next question to add correct measured unit.	DropDown	None
6		What is the effective volume measured unit? (Add correct measured unit (gallons) here under Measures table)	DropDown	None
7		What is the construction material for the tank	DropDown	None

Storage / Under Ground

Components:

1	2	Does the tank appear to be structurally sound?	YesNo	Yes
2		Are overflow pipes:	Header	None
2.01	3	Terminated a minimum of 12 inches above the ground?	YesNo	Yes
2.02	3	Screened or fitted with a flapper gate?	YesNo	Yes
2.03	2	Directly connected to a storm sewer or sanitary sewer?	YesNo	No
3		Are air vents:	Header	None
3.01	2	Turned downward or covered from rain?	YesNo	Yes
3.02	2	Screened?	YesNo	Yes
4		Are access opening covers water tight and raised above the tank roof to prevent surface water from entering?	YesNo	Yes

Storage / Under Ground

maintenance:

1	2	Are there cracks in the walls or covers of the in-ground concrete storage tanks?	YesNo	No
2		What is the frequency of interior inspection and cleaning?	DropDown	None
3	2	Is leakage evident at time of inspection?	YesNo	No

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Management / Operations

1 3 Are routine operation and maintenance records kept? YesNo Yes

Security / Management

Emergency Response Plan:

1 2 Does the facility have a current Emergency Response Plan? YesNo Yes

Security / Management

Physical Security:

1 1 Are facilities fenced, including sources, wellhouses and pump pits, and are gates locked where appropriate? YesNo Yes